

Guidebook for the California Healthy Kids Survey

Part II: Data Use & Dissemination

2004-2005 Edition

Austin, G., Bates, S., Duerr, M., (2005).

WestEd



CALIFORNIA
Safe and Healthy Kids
PROGRAM OFFICE



DUERR
EVALUATION
RESOURCES

PURPOSE OF THE SURVEY

The California Healthy Kids Survey (CHKS) is a comprehensive youth health risk and resilience data collection service sponsored by the California Department of Education (CDE). Since the fall of 2003, CDE has mandated that all local education agencies (LEAs) that receive funding under the federal Safe and Drug Free Schools and Communities Act (SDFSCA) or state Tobacco Use Prevention Education (TUPE) program must administer the survey at least once every two years and report the results publicly. The survey meets the student data collection requirements in the *No Child Left Behind Act of 2001* (NCLB).

More generally, this survey 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 also can be easily customized to meet local needs, interests, and standards.

PURPOSE OF THE GUIDEBOOK

Step-by-step, the *Guidebook for the California Healthy Kids Survey, Part I: Administration* describes the tasks that need to be performed in administering the survey and offers strategies to help you along the way. This section of the guidebook, *Part II: Data Use & Dissemination*, is intended to help you understand your CHKS results and what you should do with them. The section numbers in this document are a continuation of those from Part I. Copies of both parts of the guidebook may be downloaded from the survey website (www.wested.org/hks) or obtained from a CHKS Service Center (see *Technical Assistance Services*, Page iii).

DATA USE WORKSHOPS

As a companion to this guidebook, the CHKS Regional Centers also offer two workshops on data use. *Before attending either of these workshops, you should thoroughly read this guidebook.*

- The first, known as *Data Appreciation*, provides both a general introduction to data issues and interpretation, and a specific review of the relevance and use of specific CHKS findings. This workshop is offered for free once a month at the CHKS Los Alamitos and Oakland offices and regionally upon request. Local workshops can also be arranged as a custom service (fee applies).
- The second workshop, entitled *Listening to Students*, is focused on interpreting and using the results from the Resilience and Youth Development Module and includes training in the process of using student focus groups to enrich your understanding of the results. Described in more detail in Section VII of this guidebook, it also is offered for free regionally each year and can be conducted locally as a custom service.

ACKNOWLEDGMENTS

The lead writer of this part of the guidebook was Scott Bates, PhD, with the assistance of the CHKS Staff who conduct the Data Appreciation Workshops.

The survey itself 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 consisting 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. Advisory Committee members are listed in Part 1 of this Guidebook.

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TECHNICAL ASSISTANCE SERVICES

HELPLINE:
888.841.7536

On-call consultation by survey specialists in three Regional Service Centers helps 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. Many of the materials can be downloaded, copied, and even modified if necessary. It also contains a list of all districts that have conducted the survey and includes links to other health-related websites and information resources.

TRAINING:

Regularly scheduled free trainings occur in regionally convenient locations throughout the year. Call the Helpline or consult the website for information. District-level training is 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 with "**Subscribe CHKS**" in the subject line and your **first & last name, place of employment, 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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V. INTRODUCTION

This document aims to help local practitioners and policy makers get the most out of their CHKS data.

This part of the guidebook will assist you in understanding, interpreting, and deriving the maximum benefit from your CHKS results. It provides a basic road map that can lead you from the beginning of the "data-use" process (reviewing your report and assessing your data) to the end (using data to make programmatic decisions). It also includes strategies for effectively disseminating your results in compliance with NCLB. The goal of this document is to help local practitioners and policy makers get the most out of the rich data contained within each CHKS report and understand some of the key issues and concepts around data dissemination and use.

In this Introduction, we discuss the importance of data-driven decision making and the US Department of Education's Principles of Effectiveness. Subsequent sections are devoted to:

- Basic concepts of survey research (Section VI);
- Understanding and evaluating your CHKS results (Section VII); and
- Reporting and disseminating results (Section VIII).

EFFECTIVE DATA USE

As part of the national goal of raising accountability standards, local schools and communities are increasingly being required (and are recognizing the need) to base their health and prevention programs on local data. Specifically, federal, state, and local agencies are requiring evidence that schools/communities are assessing adolescent risk behavior and risk and protective factors, and that they are using these data in program development and evaluation. Most recently, this has been embodied in the No Child Left Behind Act of 2001 and its Principles of Effectiveness.

PRINCIPLES OF EFFECTIVENESS

The U.S. Department of Education's Office of Safe and Drug-Free Schools has made data assessment, evaluation, and dissemination central components of its Principles of Effectiveness, designed to guide prevention planning and implementation efforts in schools and communities. The No Child Left Behind Act now makes these Principles, which are listed in full in Exhibit 1.1 of the first part of this Guidebook, a statutory requirement for receiving federal Title IV (SFDFSCA) funds. This second part of the CHKS Guidebook is a tool to help you implement the law's dissemination requirements and

to help improve your ability to make better use of your findings in program decision making.

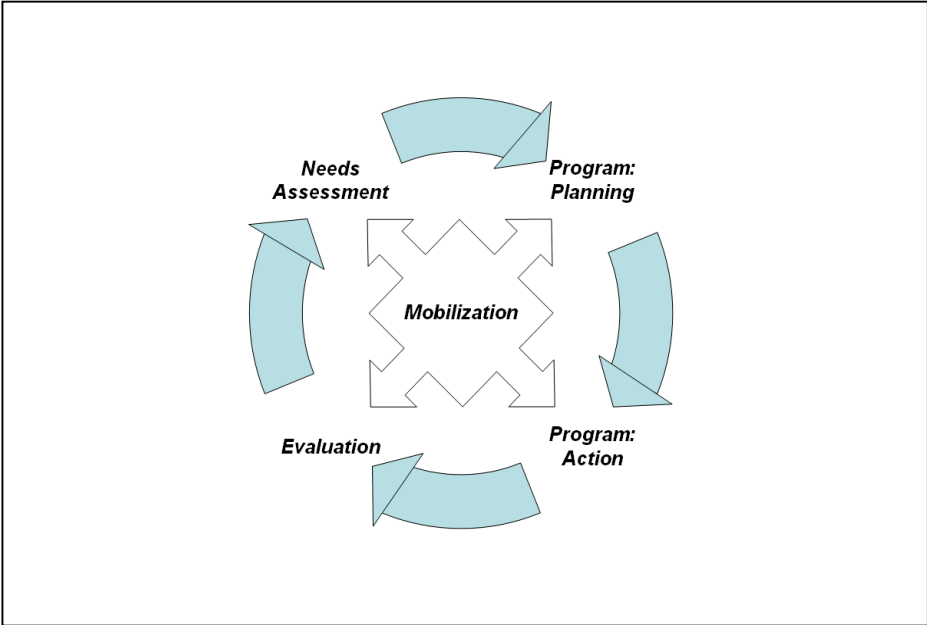
DATA-DRIVEN DECISION MAKING

*Use local data to guide
local planning and decisions.*

Exhibit 5.1 depicts the process of data-driven decision making that underlies the SDFSCA Principles of Effectiveness. It shows the process through which schools and/or communities can progress to effectively use CHKS data for maximum benefit. That is, local data are used to guide local decisions.

There are four major data-use stages (needs assessment, program planning, program action, and program evaluation) and an underlying mechanism (school-community mobilization) that sustain the system of data use in the prevention field. Assessing and understanding your CHKS results (Section VII) is a necessary first step in conducting a needs assessment, setting goals, and even program evaluation. Section VIII addresses the school-community mobilization efforts that arise from good dissemination practices.

Exhibit 5.1. Prevention Data-Driven Decision Making



VI. BASIC CONCEPTS OF SURVEY RESEARCH

In order to effectively use your CHKS data and derive the most benefit from the results, it is important to understand some of the basic concepts of survey research, such as measurement and sampling. This section of the guidebook provides a brief primer on these basic concepts and the factors you must take into consideration in determining your data's strengths and limitations. In Exhibit 6.1, important terms that are used throughout this guidebook are defined.

MEASUREMENT

Measurement is the act of assigning numbers to quantities, as when numbers are assigned to a person's height, weight, and blood pressure. This simple-sounding act is revealed as more complex when human behaviors or characteristics are measured. It is further complicated when we attempt to make a measurement of a group (a *sample*) and generalize the "results" to an entire population. The issues around this last subject (*generalizing*) will be explored a bit later. First, however, we discuss two important concepts that impact the basic idea of measurement—reliability and validity.

RELIABILITY

Reliability is the extent to which a measure yields the same result on repeated trials. That is, an assessment of reliability answers the question: if a measure is used multiple times on an unchanging characteristic, will the result remain consistent? A real-world example is the accuracy of a bathroom scale. Designed to measure a person's weight, a bathroom scale is reliable if it can consistently measure weight. An example of "unreliability" is when a 10-pound bag of sugar is weighed (measured) in the morning and the scale reports 10 pounds, but weighed again some time later and the scale reports a weight of 3.5 pounds.

While a behavioral example is a bit more complex, the same principles apply. Take the question "During your life, have you ever used or tried a whole cigarette?" If a student answers this question differently from one time to the next (assuming no actual change occurred), then the question would be considered unreliable. If a measure is not "reliable" then the results that are obtained should be interpreted cautiously (if at all). An important aspect of reliability is that it is a quantity: a measure isn't reliable or unreliable but rather shows *degrees of reliability* (often reported with a statistic called Cronbach's Alpha (α)).

VALIDITY

Validity indicates that something measures what it is being used to measure. A measure is valid when it really quantifies the characteristic it is being used to quantify. Let's look at our bathroom scale example. Designed to measure a person's weight, a bathroom scale is valid if it is actually measuring weight. If someone "really" weighs 150 pounds but the scale says 50 pounds, it is not very valid. Much like reliability, if a measure is not valid then it should be used cautiously (if at all). Also like reliability, validity exists in degrees.

There are many ways that validity is assessed. One is whether data are consistent with the characteristics of student behavior that are well known from observations and the accumulated knowledge of decades of research. For instance:

- Drug use goes up with age (except for inhalants).
- Some drugs are used more than others (alcohol vs. heroin).
- Males use some drugs more often than females.

If results of a survey are found inconsistent with these observations, one would suspect the measures are not valid. Results from the CHKS track these observations quite well. It, therefore, appears that when administered properly, the CHKS provides a valid reflection of actual behaviors—that it possesses a respectable amount of validity.

Do Students Answer Honestly?

Research shows that in anonymous, confidential surveys (like the CHKS) there is a high degree of validity in student answers.

Perhaps the most common concern related directly to validity is whether the students have answered the questions honestly. Research shows that in *anonymous, confidential surveys* (like the CHKS) there is a high degree of validity in student answers—even with sensitive questions¹. A few students may under-report any given behavior, but there are also those who will over-report instead, resulting in a balancing out.

Removal Criteria. Several measures and procedures have been implemented in the CHKS to further ensure that data are reasonable estimates of behavior for all students. Students whose responses might not be valid because they did not take the survey seriously, were careless, or did not answer truthfully, are removed. While no student is removed based on only one of these criteria, some students are removed based on meeting two or more of the following criteria:

- The degree of inconsistency in their responses (for example, regarding questions about trying a drink of alcohol; did they report never using a drug but then reported using it in the past 30 days);

¹ O'Malley, Johnston, Bachman, & Schulenberg, 2000.

- Exaggerated drug use (reporting a level or pattern of drug use that is improbably high);
- Marking that they used a fake drug that was inserted in the list of real drugs, and;
- Marking that they did not respond honestly to all or most questions in the reliability question at the end of the survey.

These criteria rely heavily on substance use measures because there are a variety of ways to cross check for inconsistencies across items. In practice, these rejection criteria generally reduce the number of students in a sample by about two percent.

REPRESENTATIVE SAMPLING

Sampling is a technique used to understand the attitudes, behavior, or characteristics of an entire population without measuring each member of the population (which can often be cost prohibitive). Politicians use sampling to understand what “the people” think; television networks, to determine which shows “the people” like; and social scientists, to understand the behavior of particular groups. In the same way a sample of 1,000 Americans can, within a margin of error, accurately represent the thoughts of all 250,000,000 Americans, it is possible that a randomly-selected group of students in a school district can—within a few percentage points—determine what is going on among students as a whole.

Of course, with a sample we cannot be perfectly sure that we are truly representing the population; this is where the concept of error (often referred to as “margin of error” or confidence intervals) comes in. Rather than saying that because 30% of a sample of 1,000 Americans believed in the tooth fairy, then 30% of all Americans believe in the tooth fairy, we say that we are 95% sure that between 26% and 34% of all Americans believe in the tooth fairy. Often this technical phrasing is summarized unceremoniously as: “30% (with a margin of error, or confidence interval, of +/- 4%) of Americans believe in the tooth fairy.”

It is critical that a sample be representative for generalizations to be legitimate.

Many factors can influence the quality (representativeness) of the sample and thus impact our ability to generalize to the population from which it was drawn. It is critical that a sample be representative for generalizations to be legitimate.

The CHKS sampling and administration plans were designed by a team of national experts in order to obtain valid data. These plans are detailed in Part 1 of the *Guidebook* and summarized in Exhibit 6.2 on the following page. If followed, these guidelines should lead to valid estimates in each grade for the entire district. One of the most

important things that a district can do to insure valid results is to make sure its survey meets *all* the survey-sampling standards.

The CHKS-provided sampling plan is based on the premise that at least 60% of the targeted youth—and all selected schools and classrooms—take the survey. To the extent that the survey requirements and methods are not followed, results *may not* be representative, which hinders their usefulness. For example, if not all the sample schools or classrooms participate, the results may be biased. This is especially the case if there are major differences among schools in demographics or in program implementation. Similarly, if there are wide variations in response rates between schools, results may reflect the behavior of students in the high-response schools more than the district as a whole.

Your CHKS *Key Findings* includes an evaluation of your success in meeting the sampling criteria. This information will also be provided to CDE for determining funding needs and program compliance.

What If Data Representativeness is Uncertain?

If your survey effort falls below a level that can be considered representative, it does not mean that the data cannot be useful to you.

If your survey efforts do not meet the requirements outlined in Exhibit 6.2, they cannot be considered representative of all students in your district. This does not mean that the data are not useful to you. While you *are* precluded from generalizing to your entire population (district), you are not precluded from using your results as revealing something about the students who took the survey.

For instance, if 50% of students reported using alcohol at least once in the past month, but your results didn't meet the criteria for representativeness, then one could still say that *one half of the students who took the survey reported use*. The only thing that should not be said is that one half of the student body has used alcohol in the past month—that would be an inappropriate generalization from the non-representative data. From a policy perspective, the question then becomes what does it mean that half the respondents did drink monthly, and what should be your response. In other words, while each survey effort should strive for representativeness, the lack of representativeness does not invalidate the results but rather limits their generalizability.

Exhibit 6.1. Key Terms in Survey Research

Population: The entire group of possible responding students.

Sample: A sub-group of students, ideally chosen at random, that is used to *generalize* to the population.

Measure: A device (e.g. a survey question, or set of questions) that is designed to ascertain some characteristics of a student or their behavior.

Reliability: A property of a measure that is indicative of its stability over repeated trials—if a measure were used repeatedly, the amount that the results vary is an indication of a measure’s stability. For example, a yard-stick is a reliable measure of height as it generates the same result for the same person over multiple uses.

Validity: A property of a measure that is indicative of it measuring what it was designed to measure. A yard-stick is also a valid measure of height as it was designed specifically to measure height and is related to other measures of height.

Bias: The extent to which a given measure is influenced by factors that are not related directly to the measure’s purpose.

Exhibit 6.2. Survey Representativeness Standards

CDE requires that a survey must meet the following minimum standards to insure that data are representative and valid:

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 the 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 was 60% or more of the selected sample.

Districts that ultimately meet standards 1, 2, and 3, and either standard 4 or 5, will be certified as having collected representative data. 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 obtained between 60% and 70% of signed parent consent forms or that only between 90% and 100% of selected schools participated in the survey. Each district will receive notification of how well they met these standards with their results. This information will be available to CDE, which intends to use it in making grant funding decisions.

** Note: The standards listed above are only **minimum** requirements. Response rates of 70% or more are strongly recommended in order to obtain valid, representative data.*

VII. UNDERSTANDING AND EVALUATING CHKS RESULTS

As a local stakeholder, you have a large role to play in how the results are used, interpreted, and acted upon.

Having established a common understanding of some key research-related concepts, we are ready to discuss the steps you should take once you receive your results. As a local stakeholder, you have a large role to play in how the results are used, interpreted, and acted upon. This section of the guidebook is intended to enhance your ability to understand and evaluate the results, as well as describe a process to help you achieve this goal. The following essential steps are discussed:

- Review your CHKS reports;
- Conduct additional analyses;
- Find additional resources;
- Compare your results to other data; and,
- Evaluate change over time.

REVIEW REPORTS

CHKS survey results are provided in two reports (see Guidebook Part I, Exhibit 1.5):

- The full CHKS *Technical Report* reviews the significance of each question and provides tables with the percent of respondents who selected each response option for each question.
- The *Key Findings* highlights those results that CDE, CHKS staff, and advisory committee members felt were of most value to local schools and communities, especially in regard to SDFSCA Performance Indicators. It contains tables, charts, and overheads that can be used for presentations.

The first step in understanding and evaluating your results is to thoroughly review the findings provided in your printed CHKS reports with your program staff, advisory committee members, and other interested stakeholders. Interested stakeholders include community members or school personnel, community-level prevention staff or community-based organizations, law enforcement, parents and students. By systematically bringing various perspectives to the table, a better understanding of the meaning of the results is possible.

There is no “correct” way to begin the review process, but a useful approach is to begin by reading the *Key Findings* report carefully and fully, noting any questions that you have. Identify specific results that “make sense,” those that are “surprising,” and those that are

Understanding your results means taking the contexts into account.

“shocking.” Remember—things can be shockingly good as well as shockingly bad; don’t overlook the positive. Discuss some of the possible reasons for the “shocking” result. Was there a major on-school event that led students’ perception of availability to increase? Was there a major national event that could lower students’ perceptions of their safety on campus? These conversations about the interpretations of the data can be extremely helpful in making the best use of the results to guide program decisions.

CONDUCT ADDITIONAL ANALYSIS

Reviewing the CHKS results should only be the first step in your overall effort to put the data to use. The value of your survey effort can be significantly improved by conducting additional analyses of your CHKS dataset, which is available in SPSS format (a common statistics software program) upon request for a small service fee. You may or may not have expertise, or even any experience, in sifting through this sort of data. To help you, suggestions for additional analyses are made throughout the CHKS *Technical Report*. For example, you might wish to determine how behaviors are interrelated and how results vary by subgroups and schools.

Behavioral Relationships

How are specific behaviors related, such as drug use and violence? This can form the basis for a comprehensive, integrated approach to prevention (e.g., the application of a single strategy might affect multiple behaviors).

Subgroup Analyses

Your CHKS report provides data by grade levels as a whole, with only some key gender breakdowns. Effective prevention often requires targeting efforts at specific subgroups. Such *disaggregation* can be important when resources are limited.

- How do results differ among **demographic** groups (e.g., by gender, ethnicity)? Are there specific groups with special needs to whom you can target resources?
- How do results differ among **other subgroups** of youth (e.g., gang vs. non-gang members, students who normally receive high grades vs. low grades)?
- **What groups are most involved in risk behaviors?** Who are the most frequent or heavy AOD users? Who are most often the perpetrators or victims of violence?

Current research shows that there can be substantial variation in results among schools within the same district.

School-Level Analyses

Your CHKS *Technical Report* provides data for the district as a whole. In addition, most districts will be able to conduct school-level analyses.² Eligible districts may request printed reports of the results for each school or analyze the raw dataset to determine significant differences in results across schools.³ This is especially important if schools vary markedly within a community. Research shows that there can be substantial variation in results among schools within the same district that warrant different programs or allocations of resources. Thus, each school may present its own profile and need to implement prevention programs that address prevailing conditions on their campuses.

Obtaining Analytical Assistance

If you do not have data analysis experience or the ability to obtain help from a district data analyst, assistance may be available from your local health department, college, or university. This is another reason why it is important to involve a wide range of collaborators in planning and reviewing the data. School-community collaboration is especially valuable in analyzing and interpreting your results. Because local data are rare, many researchers and agency staff may be most willing to analyze the data for you. CHKS staff can also perform analyses as a custom service.

Data Confidentiality and Small Samples

It is potentially feasible for school districts that have very small grade-level samples to identify the responses of individual students. For this reason, we do not produce reports for districts with final samples less than 25 students per grade. Small school districts are encouraged to conduct the survey as a collaborative with other small districts in order to reach 25 students per grade. Likewise, where a sample size is so small that there is potential for a breach of confidentiality, all demographic and school identifiers will be stripped from raw datasets.

COLLECT SUPPLEMENTAL DATA

Your CHKS reports are only one source you should use in a comprehensive assessment of local needs and strengths. Other data sources – particularly data other than student self-report – should be examined to confirm, enrich, and provide context to the CHKS

² Your CHKS Advisor can confirm if this applies to you.

³ A small fee is charged for preparation and printing of individual school reports or the electronic dataset.

Your CHKS report is only one resource you should use in a comprehensive assessment of local needs and strengths.

Don't underestimate the importance of asking students their opinion-- after all, who better to interpret survey results than those who provided them?

results. This especially should be done in regard to any specific problems or issues of concern you have identified.

These other sources can include archival data (such as data from the census, the CDC, or CDE), or new data. New data can be collected via student or staff interviews, direct observations of behavior, focus groups, etc. Supplementary data collection can help explain or clarify the problems and factors that might account for them. More importantly, this can provide context, support, and meaning to the statistics.

Youth Focus Groups

Youth should be part of your survey planning and review from the beginning. They especially should be involved in discussions about the meaning of the results—after all, who better to interpret survey results than those who provided them? Don't underestimate the importance of asking students their opinion. Survey results can be most effectively used as an invitation to further explore with students their experiences on the school campus. This is one of the benefits of conducting the survey. Not only can you learn important information from discussing the findings with students, but the process itself can help foster resilience and positive youth development. It communicates to them that you value their opinion and that you care about them. It gives youth an opportunity for meaningful participation.

Among the questions you can explore with them are:

- Do they believe the data accurately reflect the behavior and attitudes of their peers?
- Why do they think a particular problem occurs?
- Do they think current programs in school are helpful? If not, why? What would they do about it?

For example, the CHKS data on school fighting are valuable for assessing overall school safety and risk for physical injury, but you may also want to ask youths to describe the circumstances under which the fighting occurred and what it implies for school security and school climate. A fight having its origins in a boyfriend/girlfriend dispute has different implications for the school than a fight erupting from racial or ethnic conflict.

The CHKS Workshop: Listening to Student Voices

Holding student focus groups to explore data from the Resilience & Youth Development Module of the CHKS can be both informative and transformative. To promote this process, the CHKS developed a workshop entitled *Listening to Students: Using Your CHKS Resilience*

& Youth Development Module Data to Improve Schools. In this workshop, which is offered in eleven regions of the state each year for free, you will learn a process that you can do in your school and district that will shed light on your RYDM data. Even more importantly, the student focus group process modeled in this workshop is also a powerful youth development tool for transforming the school environment from risk to resilience. This workshop can also be held locally as a custom service (fee applies). Please email Bonnie Benard (bbenard@wested.org) for more information or to register for this workshop.⁴

Collect Data from Staff

Staff can provide very valuable contributions to your understanding of the survey results and their implications for school health education and prevention programs. Conducting formal or informal focus groups with staff members—or administering a staff-survey—can especially generate useful data in regard to two areas. First, clarify what’s “going on” on campus. Do the results “ring true” or resonate with their experiences? What other information can they contribute to help explain the findings? The second area concerns determining the validity of the findings. Was the survey administered properly? Was the instrument understood and taken seriously by the students?

The CHKS Staff Survey

To help provide useful information from staff, in addition to fulfilling a NCLB requirement, CDE funded the CHKS to develop a staff School Climate Survey, and requires (as of September 2004) that it be administered along with the CHKS student survey. This survey provides you with data on staff perceptions of:

- Student behavior, including the degree to which certain risk behaviors are a problem at the school;
- Substance abuse, truancy, and violence prevention/intervention efforts, including the nature, communication, and enforcement of school rules/policies;
- School connectedness & environmental assets; and
- Learning supports and barriers related to health and risk behaviors.

Many of the questions allow comparison of staff perceptions with the actual student behavior and attitudes provided by the respondents on the CHKS student survey. For more information on this survey, contact your CHKS Advisor or review the Frequently Asked

⁴ For more information on the specifics of conducting focus groups with students, please see *Listening to Student Voices: Self-Study Toolkit* (www.nwrel.org/scpd/scc/studentvoices/index.html).

Questions section of our website
(www.wested.org/pub/docs/chks_faq_answers.html#sscs).

COMPARE YOUR RESULTS TO THE STATE AND OTHER DISTRICTS

Comparing your CHKS results with other local, regional, state, or national data may help guide program decisions by placing the results in a larger context. How do your students compare to others in your area? Are the trends you see locally also occurring on a large scale? If so, the changes you see locally might be rooted less in local circumstances or programs than on broader sociocultural trends.

However, such data comparisons have their limitations. Your primary focus should be determining what your survey results reveal about local youth—how kids around the nation are behaving isn't as important as *how kids are behaving at your school!* It is important to not place too much emphasis on comparing results. Below are some sources of comparison data and some issues and considerations that should be taken into account before comparisons are made.

Sources of Comparison Data

How do your students compare to others in your area?

As a local stakeholder, only you will truly be able to evaluate the comparability of one survey to yours. Comparison data may be available at four relevant levels:

- **Local Level.** Do your local stakeholders have related data that might further elucidate the risk and protective factors in your community? For example: County Departments of Alcohol and Drug Programs and Departments of Health Services may have collected statistics, including the community mapping of assets, alcohol establishments, etc.
- **District Level.** If there is another school district or community similar to yours, you might contact them and mutually compare your results. Look for similarities and differences, and then analyze what may account for them. Your CHKS Advisor can help you determine which districts have conducted the survey and who to contact about their results. Information about which districts conducted the survey and when can be found using the Administration Log on our website (www.wested.org/cs/chks/search/chksa?x-layout=reports). Beginning October 1, 2005 the Administration Log also will give you direct access to districts' *Key Findings* reports.
- **County Level.** Increasingly, counties are coordinating survey efforts across districts so that a representative countywide report can be prepared. Exhibit 7.1 provides the criteria for determining whether a county report can be prepared. The website also lists

surveys conducted by county. All requests for county data must be made through the County Office of Education.

The statewide CSS has been expanded to include all the items on the CHKS Core and the RYDM (Module B) required by CDE.

- **State Level.** Statewide norms are provided by the biennial statewide *California Student Survey (CSS)*, sponsored by the Office of the Attorney General. Not only were many of the CHKS items on drug use and violence derived from the CSS, but the CSS has now been expanded to include all the items on the CHKS Core and the RYDM (Module B) required by CDE.⁵ These state norms are provided in the CHKS reports and are also available at www.wested.org/hks.
- **National Level.** At the national level, the most important comparison source is the *Youth Risk Behavior Survey (YRBS)*, which was also a source for many CHKS items.⁸ Some comparison data from the YRBS are also provided in the CHKS reports. Many of the substance use items are also on the national *Monitoring the Future (MTF)* survey; although comparisons are limited by the different grade levels it assesses (grades 8, 10, and 12).⁶

Considerations When Making Comparisons

Making comparisons across survey administrations or survey instruments should be made cautiously and deliberately. Some seemingly similar comparisons may not be valid. The bottom line questions are:

- What are the implications of local youth behavior to your schools and community?
- Are you doing better? Are you going in the right direction?

Exhibit 7.2 highlights some additional considerations to take into account when making comparisons.

⁵ As a statewide version of the CHKS, the CSS is needed because, even though the CHKS data across schools are aggregated, in any given time period the results are not necessarily representative of the state but only of those districts that volunteered to conduct the survey at that time. The CSS is also administered under controlled conditions by WestEd staff. Along with this expansion in content, the survey is now funded in collaboration with the California Department of Education, Department of Alcohol and Drug Programs, and Department of Health and Human Services.

⁶ The *Monitoring the Future (MTF)* survey is administered by the University of Michigan and sponsored by the National Institute on Drug Abuse; it is the oldest national sample ATOD survey in the United States.
www.monitoringthefuture.org

EVALUATE CHANGE OVER TIME

The real power of the CHKS data is harnessed when the survey is implemented over time and results from one administration are compared to those from another. However, comparing the results from two or more survey administrations adds another layer of complexity to your analyses. *When do you know if a difference in the results from one survey to another reflects a true change in student behavior, attitudes, or characteristics?*⁷

Discussed below are three major factors to consider when answering this question.

- Is your new sample somehow different from your old sample?
- Was there a difference in the procedures, or the circumstances under which the survey was administered?
- Has a survey question changed in some way?

Sample Differences

One of the most important factors to consider when determining if change in your data has actually occurred is whether or not equality was achieved across the two samples. Remember that when using a sample of students to represent the behaviors and characteristics of all students, there will be some variation that can be attributed to randomness. However, if one sample was “less random” than another, then that bias can directly impact the results. Thus, if the second survey’s sample is significantly different from the first (in terms of characteristics or response rates) it will be difficult to determine if any observed difference is the result of a real change in behavior or merely a change in the type of students who were surveyed.

Is any observed difference the result of a real change in behavior or merely a change in the type of students who were surveyed?

Here are some issues to examine to help determine if your survey samples are equivalent enough to allow you to assume that changes from one year to the next in behavior, attitudes, or student characteristics actually occurred.

- **Response Rates.** The response rate of a survey represents the percentage of students selected that actually completed the survey—it is our best measure of the “representativeness” of a survey – or how close the students surveyed mirror the student population. If either survey had a response rate under 60%, you should not assume that any difference in results between surveys reflects real change in behavior or attitudes among the entire student population. This is because one (or both) was not an adequate reflection of the population.
- **Consent.** We know for certain that survey results are influenced by “who takes the survey.” Consequently, any considerable

⁷ The *Key Findings* report provides tables with data for up to three consecutive survey administrations.

differences in the percentage of students who returned consent forms can have an impact on who takes the survey and thus the characteristics of the respondents. For the CHKS, the consent issue has a major impact on who takes the survey and should thus be considered when examining change over time. If, for instance, the 2001 administration of the CHKS in your community achieved a 65% consent return-rate and the 2003 achieved an 85% rate, then there were possibly types of students surveyed in the 2003 year that were not surveyed in 2001. Similarly, using active consent in one administration and passive consent in another can significantly impact your consent and response rates, and therefore, your results.

- **Demographics.** Random surveys such as the CHKS should approximate the “true” demographic make-up of your school or district. If your first survey sample contained an over-representation of Whites or males, and the second had an overrepresentation of Blacks or females, this too could account for differences. The survey should be reflective of the district demographic make-up at the time that it is administered. If either survey administration produces results that are different from the district demographics, caution should be utilized in interpreting differences in results across years.

Procedural Differences

Another important factor that can influence survey comparability is how, when, and under what circumstances the survey was administered. Did the procedure or circumstances change? Any major differences in the time frame, methodology, or other contextual factors can have an impact on student response and, as a direct consequence, the results.

Any major differences in the time frame, methodology, or other contextual factors can have an impact on student response.

- **Time.** Generally, a survey administered in the early fall will produce slightly lower rates of ATOD use and some other risk behaviors than a survey administered later in the school year, as students age. This is especially true for 9th graders, who enter school more like middle school students but by the spring have begun to be influenced by the behavior of their older teen peers. If two surveys are compared—one administered in the spring and one in the fall—differences in rates may be attributable to the aging of students. This relates directly to factor I (above)—students in the spring are by definition older than students in the fall. Research clearly shows that, all other things being equal, older students report more risk behaviors.
- **Methodology.** A change in a survey’s administration methodology can have an impact on how students respond to questions, even when subtle (e.g., using overheads for instructions rather than reading instructions). In other words, to the extent that

procedures vary from survey to survey, comparability may be compromised.

- **Context.** It is important to note any other contextual factors that may influence student responses as they, too, may explain differences in results across survey administrations. For example, surveys that were administered in the weeks following a tragic event, such as September 11th or the Columbine shooting, may show lower levels of students' perceptions of their personal safety in their neighborhood or school.

Item Changes

The survey required several modifications and additions in order to be in compliance with the No Child Left Behind Act of 2001.

One of the most obvious factors that can affect results is a change in the wording of survey questions. Surveys like the CHKS undergo subtle — and at times not so subtle — changes. Even small changes can result in changes in rates.

Several questions on the CHKS have undergone changes during its early period of development, although we have tried to avoid this. This was done, in part, to further integrate the CHKS with the CSS, and to better meet the needs of sponsoring agencies and respond to emerging areas of concern.⁸ Most recently the survey required several modifications and additions in order to be in compliance with the No Child Left Behind Act of 2001.

Before drawing *any* conclusions about change in data, make sure that survey questions remained the same for both measurement periods. Not all data from one year is directly comparable to the next. However, changes in items are kept to a minimum and are implemented in such a way as to minimize impact on longitudinal survey efforts. Call your CHKS Advisor for an outline of changes made to the survey instruments from year to year. The latest changes are posted on the website.

⁸ For instance, in 2001 the question “during the past 24 hours (yesterday), how many times did you...drink soda pop?” was altered from its previous form of “during the past week...” In this case it is clear that students are being asked to respond to similar, but different, questions.

Exhibit 7.1. County Data Collection and Analysis Criteria

The California Department of Education's California Healthy Kids Survey enables the regular, cost-effective collection of comparable county-wide data on adolescent health risks and resilience that can be used for county program planning. CDE requires that every district in the state conduct the survey every two years in compliance with Title IV (SDFSCA) requirements of No Child Left Behind. Results are then aggregated into a single dataset that can be used to generate a countywide report. CDE also recommends that County Offices of Education (COEs) take the lead in coordinating countywide survey efforts in collaboration with other county health agencies. Increasingly counties coordinate their CHKS administrations across districts within a single year in order to improve the quality of county-level data. Several issues must be taken into consideration in meeting requests for county data:

- In any given year, not all districts in a county may have conducted the survey and they may not be representative of the county as a whole.
- Even if a single-semester countywide survey is coordinated, district participation may vary in ways that affect the representativeness of the data at the county level.
- The confidentiality of district- and school-level results must be preserved.

In order to make results available but avoid it being misrepresented or misused, CDE has authorized CHKS staff to prepare an aggregated county report only under the circumstances specified below. For more information, call the toll-free helpline at 888.841.7536.

Standards for County Reports

- All requests must be made to the CHKS through a County Office of Education.
- For each module, districts that conducted the survey must represent 70% of the county enrollment by grade during one school year, or 90% for two years. Data from each district will be weighted to reflect the proportion of its enrollment to the total of all participating districts.
- The COE will notify each district that a county-level report request has been made and determine if they want a copy of the report for comparison to their local results.
- For requests that require district or school identifiers, districts must be notified and an MOU signed guaranteeing no survey results will ever be released that identify a school or district by name or enable such identification in any other way without district approval.

Fees: There is a fee of \$150 per module for each printed report. Custom data preparation or analysis will be charged at the standard custom-service rate of \$75.00. For information on raw datasets, call the CHKS Helpline 888.841.7536

Exhibit 7.2. Cross-Survey Comparison Guidelines

Focus on Your School. Among the limitations of cross-survey comparisons, it is inevitable that 50% of all schools will be “below average” in the incidence of school violence or other problems. Statewide trends and averages also can go up or down outside of a school’s control. The only trend that a school has control over is its own. It is for this reason that schools should focus primarily on those things under their control; that is, what happens on their campus and how their students experience their school.

Pay Attention to Item Wording. Pay attention to slight differences in item wording or even ordering that might affect the results: these intra-survey differences can impact results and may account for differences that you see. For example, many surveys measure use of inhalants, but what is meant by “inhalant” often varies from survey to survey. Surveys especially vary in how they ask about alcohol drinking (any, a full drink, whether to include ritual uses). Time frames may also vary. The CHKS and the YRBS ask about binge drinking in the past 30 days but the major national survey on substance use, the MTF, asks about binge drinking in the past two weeks.

Review Data Consistency. It is important to look at how consistent the data are. If they are not consistent, what might explain the differences? One explanation may be different data collection methods or item wording. This will also help you understand the limitations of different data collection methods. For example, if a high proportion of youth self-declare carrying weapons to school but few incidents are generally reported, you may want to look at your enforcement or reporting procedures.

VIII. REPORTING AND DISSEMINATING RESULTS

This section explores some of the strategies that have been effective at enhancing school and community awareness of survey results and mobilizing the civic, political, educational, bureaucratic, and governmental systems to act — and to use the data collected from the CHKS as part of a comprehensive data-driven decision making process. Specifically:

School-community partnerships are critical for implementing and sustaining effective prevention programming.

- Mobilization strategies;
- Reasons why dissemination is important;
- Dealing with controversy; and
- Guidelines for effective dissemination.

COMMUNITY MOBILIZATION

Prevention and intervention efforts are unlikely to truly succeed without buy-in from the community. School-community partnerships are critical for implementing and sustaining effective prevention programming. Community mobilization is a mechanism that both underlies and wraps around the data-use process introduced in Exhibit 5.1. Community mobilization—by which we mean broadly the mobilization of schools, families, and the larger population and civic and political agencies of the community—is a set of processes by which community buy-in can be achieved and maintained. It depends on the *inclusion* of key stakeholders, and *appropriate dissemination* of information.

Mobilization is a set of processes by which community buy-in can be achieved and maintained.

- **Inclusion**, in this case, means having equitable representation of relevant stakeholders. It is critical to have representatives at relevant meetings for all the areas covered by the survey: ATOD use, violence and safety, equity (harassment), physical education, nutrition, mental health, etc. This will help to identify connections across health risks and to lay the foundation for comprehensive school programs. You might also want to have a series of more focused follow-up meetings with each interest group to discuss specific health risks in more detail.
- **Dissemination** means more than simply “getting word out” but rather a process by which information is gathered and folded into the dissemination process. What follows is a more detailed explanation of some of the issues around reporting and disseminating.

THE IMPORTANCE OF DISSEMINATION

A critical issue in community mobilization and the data-driven decision making process is disseminating the information. Having identified the main study findings, a next critical step is widespread dissemination of the results in order to both increase public awareness of youth needs and cultivate support for your program.

Dissemination of CHKS data should occur at several points along the data-driving decision making process (Exhibit 5.1). For instance, as a part of a basic needs assessment CHKS data can help point to where a community's assets and needs exist. However, dissemination of CHKS data is also important when conducting goal/objective setting, program implementation, and evaluation activities.

Effective reporting will enable you to provide a broad audience with factual information on the priority health-risk behaviors and assets of your students.

A major reason for conducting the CHKS is to raise local awareness of adolescent risk behaviors and public support of your school-health, prevention, and youth development programs—in short, to support community mobilization around adolescent problem behaviors. Disseminating and sharing the results are essential to achieving these goals. Effective reporting will enable you to provide a broad audience with factual information on the priority health-risk behaviors and assets of your students. It can also insure that you have better control over how the findings are interpreted, and help insure that they have the most positive impact. Attention to dissemination and reporting is very important.

Remember to include your advisory committee and key stakeholders in the discussions of how and what to disseminate. Generate conclusions and recommendations, and formulate a consistent message that all stakeholders can agree upon.

DEALING WITH CONTROVERSY

No community is without problems that need to be identified and addressed.

Some CHKS findings may appear controversial. Make sure to get input from the advisory committee and key stakeholders as to the form and content of reports, publications and other dissemination activities (e.g. PTA, school-board, or school-staff presentations). Use this group to develop a plan for dealing with potential controversies and how to avoid them. Officials may be concerned that they make the schools or community look bad. However, no community is without problems that need to be identified and addressed. How you present your findings affects how the public and media will respond. The goal is to make them your allies in promoting your programs.

Determine very specifically:

- The key messages to communicate.
- What more can be done in collaboration with the community to inform the public and promote prevention and youth well-being.

- What resources are available to help cover labor or direct costs of dissemination (e.g., volunteers, the business community).
- The process for releasing the data.

The Key Findings is written so that it can be publicly disseminated as is.

For convenience, the *Key Findings* is written as a local report that can be publicly disseminated as is, if you choose. It highlights the results that CDE, CHKS staff, and advisory committee members felt would be of most interest and value locally, especially in regard to SDFSCA Performance Indicators. It is designed to meet many of your reporting needs, and to serve as a model for preparation of additional reports. It contains tables, charts, and overheads that can be used for presentations.

Among other CHKS materials that may be especially helpful in communicating your results are:

- Rationale for Conducting the CHKS (Guidebook, Part I, Appendix B).
- Frequently Asked Questions (available at www.wested.org/hks).

DISSEMINATION GUIDELINES

An effective dissemination process is often comprised of four steps, with community mobilization as the overarching goal. Ideally, these steps should take place with the same people who were involved in the activities described in Section VII around understanding and evaluating your CHKS results. They will be most familiar with your results and the data's strengths and weaknesses. If you are working with a new team, take some time to acquaint them with what you learned during your analysis. Then:

- Identify spokesperson(s);
- Develop dissemination plan;
- Choose dissemination formats and disseminate; and
- Evaluate your efforts.

Identify Spokesperson

Identify a primary contact spokesperson (or persons) to field all outside inquiries about the results and take the lead in community outreach. This could be the person who managed the survey effort or a public affairs official. This will help in promulgating a consistent and professional message. Whoever is selected, the spokesperson should be involved early in report planning and preparation. Establish a working relationship with him/her and seek guidance on the dissemination plan and specific issues. It is important to make sure this key spokesperson fully understands the district's results, the

Whoever is selected, the spokesperson should be involved early in report planning and preparation.

issues involved, the report, and your program; often this is accomplished by involving the spokesperson in all planning, analysis and dissemination activities.

Develop Dissemination Plan

A general report such as the *Key Findings* should meet most of your needs. But different audiences may require different information, types of presentations, and dissemination strategies. You may want to prepare a variety of reports for target audiences.

- Determine how and to whom reports should be disseminated, and then assign timelines and responsibilities.
- Identify important audiences, interest groups, or influential opinion leaders to target, especially those that might be asked to comment on the results.
- Determine what information and materials each should receive. Ideally, you want to generate program support at all levels.

Different audiences may require different information, types of presentations, and dissemination strategies.

Consider how the style, format, and content of your media might need to differ for different audiences. For each group, ask these questions:

- What do you hope to accomplish (outcome) by a report?
- What characteristics should it have to elicit the optimal response?
- What are their existing levels of knowledge, key concerns and issues?
- What will likely motivate the group to take action?
- What information would be of most interest and use to this audience?
- What message do you want to disseminate to them (what do you want them to know)?
- What can each audience do to help?
- What type of presentation would get the most attention?

Regardless of the type of report, you should communicate a consistent, clear, and easy-to-understand message that emphasizes what has, and will, be done in response to the findings.

Regardless of the type of report, you should communicate a consistent, clear, and easy-to-understand message that emphasizes what has been, and will be, done in response to the findings. To guide report preparation, Exhibit 8.1 provides suggestions for both content and style.

Finally, it is important to conduct a thorough review of the final report(s) before release: submit drafts to your staff, Advisory Committee, etc., for review. This process will insure that the general

reader can understand your report and that your staff and advisors are comfortable with the presentation.

WORKING WITH THE MEDIA

You should welcome media interest in your survey results. The media and other interested parties can and should be your allies. They can help to disseminate important results and recommendations, and to generate broader public understanding of the need for your programs. As is the case in generating survey support, the key to effective public and media relations is *openness*, without violating confidentiality, and *preparedness*. It is good to establish rapport in advance with journalists by letting them know about the survey in the planning stage. Exhibit 8.2 provides general strategies for talking with the media. Exhibit 8.3 provides some key talking points, with messages or themes to keep in mind in all your communications about the survey, regardless of audience.

Use a wide variety of materials and multiple media to increase your chances of reaching and persuading broad audiences. Some of the formats you might consider are listed on the following pages.

PREPARING A PRESS RELEASE

A sample press release is provided in Appendix A. A press release is a relatively easy and effective mechanism for widely disseminating survey results. There is no guarantee that the media will use a press release, or that it will use it in the way you intended. Some reporters will use it verbatim; others will change it, or want more details. Regardless, it is your best opportunity to get your message disseminated as you would like it, to convey the important messages that you derived from the findings, and to help people understand the complex and potentially controversial issues that are often involved.

If you have a public relations office, work with it to develop the release and obtain a list of media contacts for your area. You might also get assistance from local offices of the American Cancer Society, American Lung Association, or American Heart Association.

A well-written press release reflects well on your program and schools.

The press release should describe the "who, what, where, when and why" of your survey and program. It is important to have the basic facts simply expressed. The better prepared, the more likely the press will use it as is. A well-written press release also reflects well on your program and schools. Many of the same stylistic guidelines provided for reports in Exhibit 8.1 also apply to press releases: be clear, concise, avoid jargon, and focus your message.

Here are some other dissemination guidelines to maximize the impact of the release:

- **Time well.** Time the press release to best increase its use by the media. Mondays, Tuesdays, and weekends are generally slow news days so the likelihood of coverage is greatest on these days.
- **Call in advance.** Let reporters know the press release is coming. Call back to ask if the person has any questions.
- **Send it to the right person.** A person in each news agency usually is designated to receive information related to specific areas such as education or health.
- **Format correctly.** Not only the content, but the format of the press release must be correct. Check with your public relations office to determine the format preferred by media in your area or the school district.
- **Distribute widely.** Make sure it is distributed to all branches of the local media at the same time.
- **Hold a press conference.** Hold a press conference to provide the media with an opportunity to ask questions in a controlled environment. *If you have time, provide advance copies of the press release so that the media have time to review it.* Visual aids will strengthen your presentation, but the conference doesn't have to be elaborate or long. Be sure to let them know when the end is approaching. For example, you could state, "We only have time for one more question." And then end on a positive note thanking them for the help in addressing this important issue.
- **Hand-delivery.** Note that if you are not holding a press conference, hand-delivery helps draw attention to the release among editors and reporters who often receive much mail and phone calls.

OTHER DISSEMINATION FORMATS & STRATEGIES

Discussed below are the uses of five common forms of dissemination: newsletters, factsheets, posters, instructional materials, and public service announcements. This is followed by a review of strategies for making effective oral presentations.

Newsletter

A newsletter is an effective mechanism for information specifically addressed to certain groups of people, such as teachers, principals, or other professional or community groups. This is a good format for combining survey results with information about your programs.

Fact Sheets or Brochures

Fact sheets are good for targeted dissemination of specific results.

Single-page fact sheets or small brochures are good for dissemination to a large but specific audience such as parents or the community. They can be inserted into public mailings to reach a maximum number of people.

Posters

Posters are good eye-catchers for presenting small amounts of information. Emphasize one or two important messages that can be absorbed at a glance. Posters can be displayed for specific groups at workshops, conferences, and trainings. They can be placed in public places such as schools, libraries, community centers, and grocery stores to reach a wider audience. You might consider asking students for help with creating and posting.

Instructional Materials

Integrating survey findings into instructional materials for teachers can be a powerful support for existing curriculum.

Integrating survey findings into instructional materials for teachers can be a powerful support for existing curriculum and help improve the quality of SDFSCA and comprehensive school health programs. By using local data, you make the lessons more relevant to the students. This also makes teaching prevention and health lessons easier for the teacher. Include ideas for lesson plans and student activities; lists of available resources; and graphic displays such as bulletin board packages, posters, colorful overheads, and slides.

Media Spot or Public Service Announcement (PSA)

If getting certain messages across to a wide audience quickly is important, consider developing a media spot or public service announcement (PSA). All public television and radio stations are required to broadcast in the public interest, and may help you produce one. The PSA is an excellent means of disseminating small items of general information, one significant finding, or short messages. You may want to create several of these spots to target different audiences.

MAKING AN ORAL PRESENTATION

Develop at least one oral presentation you can give to key groups. Get the report on the agenda at every school site's faculty meetings and PTA meetings. Schedule district speakers into service clubs and community groups to address the issues and clarify the message if necessary. In making oral presentations, it is important to know your audience. How much do they know about youth risk behaviors? What are the issues that are of most concern to them? Make sure to:

- **Target your message** to them and focus on a few main points.

In making oral presentations, it is important to know your audience, how much they know about youth risk behaviors, and the issues that are of most concern.

- **Be familiar** with all the information to be presented.
- **Use visual aids** to highlight key findings, recommendations, and conclusions. Overhead transparencies are most commonly used. The graphs provided in the CHKS *Key Findings* can be easily converted to overhead transparencies. If you are making new overheads, be sure the print is large enough to be read from a distance and don't try to put too much information on any one overhead. (See the advice on graphics in Exhibit 8.1.)
- **Have handouts** to accompany the presentations.

Multimedia presentations that can be loaned out to school, parent, and community groups can be very helpful, although they do involve costs. The least costly approach may be a slide and audiotape presentation or a videotape. Your local public television station may be able to help with the video production.

Presentations to Students

As with survey planning, don't restrict review or discussion of the data to school personnel. Include representatives from community agencies, youth service organizations, parent groups (the PTA), and elected officials—as well as students themselves. It is important to have their issues, concerns, and perspectives as part of the review. This promotes ownership of the results throughout the community, helps avoid controversy, and lays the foundation for a community response to any identified problem.

Another way to learn more from students is to “infuse” the results of the survey into your prevention and health curriculum. Use it to illustrate or support the curriculum's lessons. This helps give local meaning and relevance to the instruction and can provide a means for further getting useful feedback from youth about their reactions to the results and what they think should be done.

EVALUATE DISSEMINATION EFFORTS

Every community is unique and dissemination plans must therefore be customized. As a consequence, it is important to monitor the strengths and weaknesses of dissemination efforts in order to provide feedback and, where necessary, make corrections that maximize the efficacy of future dissemination efforts. Specifically, monitor the media reports and public reactions; tape news coverage; and clip newspaper articles, letters to the editor, and editorials that are related to the survey and its planning process. Seek feedback from key community contacts to assess "the mood of the community" and determine if you need to respond or modify your message. Use this information to develop your next dissemination plan.

VIII. REPORTING AND DISSEMINATING RESULTS

The lessons learned from evaluating your dissemination efforts will improve future plans.

In addition, share your challenges and successes with your CHKS Regional Advisor. Your insight on the CHKS process, from administrative issues to data analysis and dissemination, may prove invaluable to school districts with similar barriers. The lessons learned will help both the state and your own district in improving the CHKS administration process in years to come.

Exhibit 8.1. Strategies for Writing Effective Reports

Be Concise, Clear, and Understandable. Clearly and concisely present the data that are most significant and interesting, and don't overwhelm with details. Don't give more information than necessary. Too much information discourages readership and diminishes the report's impact. Present the data in a logical order, using active instead of passive verbs. Summarize data in the most complete and efficient manner. Avoid using jargon, abbreviations, or acronyms. Define terms that the average reader might not understand. If you must use them, explain them. Have a layperson, such as a parent, read the document for understandability.

Prepare an Executive Summary. Any lengthy or detailed report should contain an executive summary similar to that of the CHKS *Key Findings*. This will be the most read part of your report, and therefore the most important. Many readers may never read past the executive summary. This should be a succinct, clear document highlighting the main findings of interest to the widest audience with liberal use of visuals and plain language. It should include the survey's purpose and methods, purpose of the report, conclusions based on results, and recommendations.

Use Graphs and Other Visuals. Pay attention to the visual appeal of written reports. Visual images are more powerful than written text. Solid pages of text tend to turn readers off. Intersperse text with pictures that focus on a single survey finding. Make use of headings, subheadings, and well-placed tables, charts, or other graphics. Excel, PowerPoint, and Lotus are examples of data analysis and presentation software that are available.

Tables, graphs, and charts should complement the text and illustrate the findings. Figures can be used to create interest, attract attention, save space, better convey quantifiable information, and show relationships between results. Title your graphs so they clearly describe the content and the message you want to convey. Use your *Key Findings* as a model.

Provide Local Context. Anecdotes and stories may help illustrate certain key points or emphasize the importance of some of your results.

Provide Comparison Data. Do not limit the content of your report to just CHKS results. Provide comparison statistics, such as from the state CSS or national YRBS that help place your local findings in a broader context. The CHKS provides some comparison data in the *Key Findings*. If you have local data from other sources, such as the California Safe Schools Assessment or local health statistics, they can add weight to the findings. You might want to contact another school system that you consider similar to yours and compare results—but do not publish anyone else's findings without permission.

In making any comparisons, be aware of differences between two data collections. In comparing data from any other survey, make sure the questionnaire items, survey methods, and samples are truly comparable.

Exhibit 8.1. Strategies for Writing Effective Reports (continued)

Be Selective. Clearly define your message and focus on key findings, the most significant conclusions you want people to reach, and the most important recommendations. Not everyone will read a detailed report. People often expect to receive the information in summary formats that can be quickly absorbed. Look carefully at your results and select a few basic findings that will have the most impact on specific audiences. Think about what headlines you want to see.

Emphasize the Positive. While identifying problems is of primary importance, also stress how many students don't engage in negative behaviors and do demonstrate positive, healthy attributes. Your CHKS report provides the percentage of students who responded negatively on each risk behavior. The purpose of reports is to provide a profile of the whole child and inform the community about the lives of its kids and their well-being. This helps avoid the public focusing only on the negative.

Emphasize the Community Context. Although the survey is conducted in the schools—and many items assess school behavior—the results reflect the youth of the community. Student drug use, violence, and other risk behaviors are not just school problems but community problems as well—and require the schools and the community to work together to prevent them. Use the report as a call to the community to protect its investment in children and schools. Include recommendations for what community groups can do to help.

Highlight Your Program and Its Successes. In all your dissemination products, describe what have you been doing to ensure safe and drug-free schools and to promote well-being. Include information about your SDFSCA and school health education programs. Highlight any success stories that you have. Use the release of your results to describe and generate support not only for the survey, but also for your programs. Be sure to include your program name, address, and telephone number.

Highlight Your Response. Include what your LEA plans to do in response to any problems identified. Will you be doing anything new as a result of what you have found? This will help to allay concerns.

Link Recommendations to Results and Be Realistic. Make sure your recommendations are stated objectively and are clearly based on your results. In describing any plans for addressing identified problems, don't minimize the difficulties in changing behavior. Establish realistic goals and expectations for when you conduct a follow-up survey.

Exhibit 8.2. Media Communication Strategies

Inform Officials Early. Make sure school and community officials are informed fully of the results in advance so they can support you if contacted by the media.

Be Prepared with Data and Answers. Prepare answers in advance for the kinds of questions people are likely to ask about your CHKS results and your related programs. Include all the basic journalistic questions (i.e., who, what, why, when, where, and how) and questions about specific results likely to attract media attention. Clear these prepared answers with appropriate administrators and your public affairs office before results are released. Prepare a statement to read and distribute that highlights your CHKS results and their programmatic implications.

Be Open—Don't Appear to be Hiding Something. Do not appear to dodge questions or withhold critical information. Avoid secrecy and defensiveness. Reporters tend to press harder for information if they feel the people they are interviewing are trying to hide something. In dealing with sensitive data, enlisting the media as a partner can yield the best results.

Maintain Confidentiality. Do not feel obligated to divulge everything about your survey. A common problem that can occur is media demand for confidential information, such as survey results breakdowns by different schools or by ethnic groups. Keep your word if you promised to keep the names of schools confidential. Make sure you do not violate anyone's trust. This could do great damage to future surveys and your programs. Be ready with an explanation for why you cannot provide this information. This is why it is important to demonstrate a sincere desire to inform the public.

Be Concise. Keep your responses to questions as concise as possible. Long, complex responses may not be reported accurately or may be misinterpreted. If a question cannot be answered well without additional information, be sensitive to a reporter's deadline and follow up as soon as possible.

Don't Overreact. Anything said to a reporter can appear in the media. Don't overreact to inaccurate information, being misquoted, or negative stories that appear. Simply try to set matters straight with a simple request for a correction or clarification. Your long-term goal is to enlist the media in supporting your program and addressing the problems that have been identified. Make them your allies.

Nurture Your Contacts. If your story is covered well, send a personal note from your program to express your thanks.

Exhibit 8.3. Key Talking Points

Remember, by disseminating your findings you maintain control over their interpretation. How you present your findings affects how the public and media respond to them. Your audience should know:

1. No community is without problems that need to be identified and addressed.
2. Drug use, violence and other health risks are not just school issues; they are society, community, and family issues.
3. Schools are often safe havens in their communities.
4. The CHKS results help districts focus resources and develop programs. To address any problem, you first need to identify and understand it.
5. Reducing risk behaviors and promoting positive youth development are key efforts to improve schools and promote academic success among all students.
6. Our goal is to determine what we can do to support and help our community's youth lead healthy, satisfying, and productive lives.

REFERENCES

- California Department of Education. (1998). *Getting Results, Part I: California Action Guide to Creating Safe and Drug-Free Schools and Communities* (Sacramento, CA: California Department of Education).
- O'Malley, P. M., Johnston, L. D., Bachman, J. G., & Schulenberg, J. (2000). A comparison of confidential versus anonymous survey procedures: Effects on reporting of drug use and related attitudes and beliefs in a national study of students. *Journal of Drug Issues* 30(1):35-54.

APPENDIX A.
SAMPLE PRESS RELEASE

For Immediate Release

Contact: _____
(Name) (Phone No.)

(School District)

Date: _____

**XYZ SCHOOL DISTRICT RELEASES DATA FROM CALIFORNIA
HEALTHY KIDS SURVEY: PROMOTES POSITIVE YOUTH
DEVELOPMENT STRATEGIES**

XYZ School District announced today the results of the California Healthy Kids Survey (CHKS) and their plans for expanding their prevention and intervention programs to promote positive youth development and safe and drug-free schools.

“As part of our on-going efforts to provide safe and drug-free, positive learning environments for students, I am pleased to announce the findings and recommendations of the XYZ Advisory Committee for Safe and Drug-Free Schools,” said Superintendent_____. The Advisory Committee is comprised of key school staff; community leaders in the field of substance use prevention, intervention and safety; and representatives from parent groups. One of their tasks is to advise the district about issues related to the data collected from the CHKS.

The CHKS was developed by WestEd and Duerr Evaluation Resources for the California State Department of Education to provide schools, districts and counties with a data collection service to assess health-risk behaviors and resilience/assets among their youth. It is an important component of California’s new school reform and accountability systems, which require that LEAs objectively measure pupil knowledge, skills, and behaviors and set concrete and measurable goals for making improvement.

“As educators we believe that building schools as drug-free, safe havens for positive youth development is central to a school’s mission and ability to teach. The CHKS provides us with credible information on the scope and nature of health-risk behaviors and resilience factors that predict students’ success in school,” continued Superintendent _____.

The District uses these data as part of a comprehensive assessment of our community’s youth development to help it better determine program needs and how to best allocate dollars for these programs. The data are shared with our partner agencies to further identify community needs and plan collaborative efforts aimed at making communities safe and healthy places for youth.

In Fall 2002, a representative sample of 7th, 9th and 11th grade students (n=xxx) participated in the survey. The survey provides us with important data to identify and address problem behaviors. However, we should not lose sight of the positive behaviors and attitudes of most of our youth. For example, the percent of students who reported that they had not used alcohol, tobacco, or marijuana in the past 30 days was xx%, xx% and xx%, respectively. Similarly, xx% of students report feeling safe at school. [*Highlight Core findings and other findings. Note: If your district has data from previous surveys you may want to highlight positive changes or note trends.*] For example: Compared with data from the last survey (19xx), drug use has gone down among 7th, 9th and 11th graders. Rates remain stable in (other categories).

Our district also administered the section of the CHKS entitled Resilience & Youth Development, which measures supports and opportunities and indicators of positive development for students. When comparing health risk behaviors with scores from the resilience section, we found that with lower frequencies of drug use, the scores for caring relationships with adults at home, in school and in the community and with their peers were high. Furthermore, we saw that when scores for social competence such as cooperation and communication skills, empathy and respect and problem solving skills were higher, the frequencies for high risk behaviors such as taking drugs, physical fights or bringing weapons to school were lower. (Find positives to report in this section.)

The high-risk behavior rates continue to be lower [higher] in our district compared to the state level data. (Give specific examples which highlight your positive message.)

Based on these results, the Safe and Drug-Free Schools Advisory Committee and Superintendent _____ identified the following new initiatives to address the most common problems identified for the district. (List these initiatives.)

