

SEOW Meeting Minutes for May 18, 2007

ATTENDEES: Eric Wright, Ruth Gassman, Barbara Seitz de Martinez, Susan Crouch, Marion Greene, Harold Kooreman, Marcia French, Kim Manlove, John Viernes, Dave Bozell, Josh Ross, Roland Gamache, Robert Teclaw, Jeanie Alter, Eric Martin, Mi Kyung Jun, Karla Carr, Maggie Lewis, Rick Vandyke

Eric opened the meeting and asked for the approval of minutes. Karla Carr seconded the approval and the minutes for the last meeting were approved.

Ruth Gassman indicated that starting in 2008, the IPRC will be partnering with the CDC to conduct the YRBSS within the school system. It is hoped that this partnership will improve the response rate for the ATOD survey and improve participation from school systems within the state. The YRBSS is done on a biannual basis so the school survey will go from an annual to a biannual basis. The YRBSS does not provide local level data but they do provide information to the participating schools.

The raw data for the YRBSS is only available to the public in the form of percentages. Both surveys will provide demographic information, safety information, damaging school property, physical fights, prevalence of drugs including alcohol, tobacco, marijuana and other drugs. They are asked for 30 days, 1 year, and lifetime prevalence. They are also asked the age of first use. The IPRC just started asking this year how youth access alcohol. Are they getting it from an adult, from the parents' alcohol in the refrigerator? There are areas where there are no overlap and include gambling items, after school activities, national outcome measures—these three are in the IPRC survey, perceived risk of harm of using drugs, perceived peer approval, and perceived parental approval. Questions about the neighborhood environment, whether you feel safe in the neighborhood, school environment, consequences of drug use, probably 15 items on consequences of alcohol and drug use. The CRAFFT alcohol screening scale is something we (IPRC) just added this year and in your packet you will find two articles that address the adolescence substance abuse screening scale called the CRAFFT. We embedded these two in the ATOD survey this year. We also added questions on reasons for drinking.

There is a body of literature that talks about expectations for drinking and actual drinking. With the YRBSS survey, there is a much broader coverage in all areas of life domains: suicide, nutrition, weight height, obesity, exercise, sexual behavior, HIV/AIDS, and questions on asthma. That kind of gives you a snapshot on the two surveys and how they compare with one another. This handout that says the current YRBSS items this basically breaks down the number of each group of items that is on the YRBSS. On the next page, we have suggested, the IPRC has suggested some items. We understand that we will be able to add to the YRBSS 12 items and so one of the reasons that we wanted to present today was to have a discussion of items we have proposed or items that you would like to suggest. The NOMS, perceived risk of harm of using substances would be added to the YRBSS and these items are already on the survey and we are proposing that we add these to the YRBSS.

Roland Gamache said that the program people are not here but that there are only 3 slots left for questions and that they would need approval. Ms. Crouch from the YRBSS said that the IPRC

said initially 3 questions but they allowed 3 to 12. Roland thought that the space was already taken up for everything but 3, however, he deferred to Ms. Crouch who said that they could add up to 12 questions.

Mary Lay wanted to know if the questions which are similar in the two surveys are giving us the same information in terms of prevalence. Do the two prevalence rates presented in the two surveys show similar things. Ruth said that yes, the two versions of the questions yield parallel information.

Rick VanDyke wanted to know if the similar questions are providing similar information or comparable information in the two datasets. Ruth indicated that yes, this was the case. Ruth said that what we are seeing when we compared the ATOD to the YRBSS, the information between the two surveys is very similar. Results also very much mirror the monitoring the future survey from year-to- year.

In terms of questions, Ruth wanted to minimize the number of questions from the NOMS so that they are not redundant and that provide maximum amount of service and maybe they address a priority area related to the State priorities. The CRAFFT alcohol screening scale is a new scale that we have added. We have not made any decisions about the items that we want to use and we know that the CDC has to approve the questions. Ruth feels it is important to find out the number of people in the state who have a potential alcohol problem because it gives a sense of the level of alcohol abuse. Ruth asked for comments about the questions. The questions have to do with patterns of drug consumption and consequences. Each letter in the CRAFFT represents a key word in the questions. There are also gambling items which are not on the YRBSS now but are on the ATOD.

Some questions pertain to the block grant that the DMHA does and so I think it is important that DMHA has input into the questions that are being added so they help with the block grant.

Mary Lay indicated that Diana Williams brought up a good point about utility of questions and NOMS do answer block grant questions and some other questions may not address as broad a range of issues.

Ruth indicated that yes, that is true, the NOMS are broad, the gambling is dependent on interest as are the CRAFFT items which may be more state-specific. Eric Martin wanted to know if we added the CRAFFT items would we be able to do an analysis with the prevalence information we have to know who is having problems with certain drugs. However, you can also determine the prevalence of problems by looking at the use information because should not be drinking or using drugs so everything is supposed to be considered a problem and do you really need a CRAFFT instrument imbedded to make that conclusion and probably not if they are admitting they are drinking. The CRAFFT is a validated instrument and the CDC uses it and endorses it and I would not expect to get any problems with endorsement there. Rick Van Dyke would like to see the questions for his school from the CRAFFT because it might help parents know how to talk with their kids. Ruth indicated that one gap of the YRBSS is the lack of consequence information so it would be useful to include the questions. Eric indicated that both surveys have problems because you cannot go down to the county level. The YRBSS has only 5 counties and

the ATOD is nonrandom but has larger numbers. Eric wanted to know if we could increase the sample size for both so we can get down to the regional level for both the ATOD and YRBSS. According to Ruth the CDC does not allow disaggregation of the YRBSS data.

Ms. Crouch says that in California, what they have done is take the YRBSS and their own alcohol/drug survey and gives it to every school and every student so that way they get both the YRBSS data and their own data which they can then breakdown to any level.

Ms. Crouch indicated that YRBSS in Indiana get enough youth to cover Indiana regionally, but not nearly enough to provide really detailed data.

Mary Lay wanted to know if we are talking in terms of the SPF SIG communities and if these communities would participate in the ATOD survey over the course of the grant. Eric indicated that the SPF SIG youth council is being planned and it is hoped that having the youth involvement will encourage more participation in the surveys from the schools. Rick Van Dyke indicated that if we improve the atmosphere where doing the survey is good then that would be very helpful.

Eric indicated that one of the backlashes of the grant process was that communities said they did not feel they could compete due to lack of data and have attacked law enforcement agencies for not providing the data they have to the FBI. Mary indicated that this was our plan and that things actually worked.

Marcia French indicated that having the youth council would help encourage participation since it is a voluntary survey.

John Viernes indicated that you cannot have really voluntary participation in any school.

Ruth stated that it is up to the school to use active or passive consent; it is not IPRC's decision [since the data belong to the school]. The school gives the questionnaire to all students who they think should take the survey but the students don't have to fill it out and have other options for not participating.

Eric indicated that these differences in the school in terms of how the survey is actually given lead to unknown selection biases in the sample for the ATOD survey. We need to keep focused on where we need to go, which is getting better data at the local level. Ruth indicated she agreed and we need to figure out what is better, a larger sample or a different sampling scheme. Ruth indicated that participation rate improved after sending the monograph to the LCCs. If this is the way to go then they can keep doing that. Or, maybe we need to scale back and look at doing a random sample if that would be better.

Ruth initially thought that the YRBSS could be disaggregated and we could dispense with the school survey. However since that is not the case, Ruth said that this means that the school survey would need to continue. Also, school systems may question the validity of having the YRBSS data represent them especially if they did not participate in the survey. Ruth indicated that each school gets the monograph and a report just on their school district. Ruth indicated

what they did new last year was distribute the monograph to all the LCCs and saw that as a way to get the LCCs to advocate to the school system. One thing we are seeing in the readiness survey is that they want youth data. They are unaware that there is youth data from the IPRC. Eric Martin indicated that they are now sending out a lot of the reports as people are finding out about the data. Groups also like the regional breakdowns and they like to know how they compare to their neighbors.

Tonya indicated that the regional data can improve cooperation because regions can see that they are all dealing with the same issues. Ruth indicated that in just one year there has been a big increase in participation, just with the monograph and they hope that as the utility of the data becomes more evident that participation will improve.

Eric indicated that we should applaud IPRC as it has done a yeoman's job in gathering data for the state. What would be the thoughts on specific additions to the YRBSS. A contact from the board of health said that the CDC has not approved the questions for the 2009 YRBSS so a lot of the questions that we want to add may already be on the upcoming survey. Her recommendation was to take the time while we wait for the next round of questions to come up with a list of questions and rank order them in importance and then when the questions are released you can see what is there and go down the list to see what is important to be added. John Vierenes also said that the NOMS may be changing to add different questions.

Mary Lay indicated that there are changes coming up on the NSDUH too.

Board of Health contact said that SEOW is not the only group that has input on the questions so there is a bit of a competition. Another question is who pays for it because there is quite a bit of expense associated with adding and deleting questions.

Barbara said one reason for keeping two distinct entities going has to do with the historic depth. Needs are changing all the time, new drugs, new criteria for grants. If you give up questions, you are giving up your historic depth of being able to see trends overtime. IPRC wants to have the ability of looking back to see how responses have changed over time.

Another issue is that schools which are not wanting to participate in YRBSS because they are already participating in the IPRC survey. Ruth indicated that that is why they are switching to every other year. Also, there is the tobacco survey which is done on an every other year basis, it is another thing to consider so we don't over survey schools or over burden teachers with having to coordinate a lot of surveys.

Eric indicated that since we are not on as tight a time line, then Ruth can work with IPRC to come up with their wish list of questions and the SEOW can respond to them and provide suggestions.

Roland Gamache indicated that there are other things to consider. When we look at grants, federal grants want to know how Indiana compares to the rest of the country but communities may have different needs in terms of what they want to do and how they get money.

Eric indicated that the NOMS are more important because they allow for broader comparison across states and across the country. NOMS will be required to be collected from all programs across the country. The NOMS is on the DMHA block grant application and if you do not report them, you lose 5% of your block grant. Full implementation of NOMS data collection will be in 2009 with all prevention programs.

Mary Lay indicated that NOMS are 30 day prevalence, perceived harm, perceived risk, perceived approval, age of onset, etc.

Roland wanted to know if the NOMS were on the evaluation materials. Eric indicated that we will get back to that because yes, they are.

Eric wanted to know if there were any questions or comments about how the IPRC survey is done. Maybe we should make a multiagency recommendation to legislature to require participation of all school like the California or Michigan model.

John indicated that this could be considered at the next session of the legislature because there is no money attached to it. It does, however, take a lot of time to do this.

Eric indicated that part of the SEOW is to take a leadership role in the state and this might be a good idea to do this. Eric indicated that he would be happy to go to the Drug Free Commission and propose this. John indicated that what we say has to go to the GAC first and then they vote on whether it goes to other state agencies for consideration.

Eric indicated that for the next meeting we would come up with a proposal based on California and Michigan and what we will do is work on a proposal for the next meeting and bring it up for a vote and figure out where we need to go.

Jeanie Alter indicated that we need to have a survey that appeals to the largest group of people.

Eric indicated that yes, we need to incorporate things that would address the YRBSS, the tobacco survey, and the IPRC survey and do it in one fell swoop.

Roland Gamache said that there is a big hump in the legislature and he doesn't see this going through, even though he knows that everyone would see it as being good.

Eric indicated that if we do what the governor's office wants which is use data to make decisions, then we can say they can make better funding decisions it would be more palatable. We can have data to make the most appropriate decisions. The governor's data initiative is that the governor wants to make all decisions based on data and we may be able to circumvent the legislative block by appealing to governor's data initiative.

John indicated that Indiana is behind on a lot of grant opportunities because we lack community-level data and moving forward on this could help bring in more federal dollars to the state.

Roland said that it is important that people realize that IPRC is not the only agency that can provide questions. We need to consider them. Eric clarified that IPRC is going to take the lead

on coordinating with all agencies involved to come up with a list of desired questions and bring those back. Roland said that is fine as long as all agencies are being represented. Roland also said that we need to consider the gaps of the data that the SEOW has identified and if those will be addressed.

Eric indicated that it would be helpful if we had some information on coverage such as how many high schools do we have adequate participation now, how many counties are there sufficient sample size. Ruth indicated that we make that comparison now in the monograph in terms of participation so we can assess the representativeness at a regional level because we know how many people have responded. Eric indicated that we can do this at the county level but then we start revealing who participates. Eric indicated that we can do some kind of sampling but we need to know the level of coverage at the county level. How far off are we with having data from all 92 counties? Barbara indicated that this year, coverage could come from the urban centers but next year it could come all from a rural part of the county. If you don't get the same schools from year to year you can't talk about county level coverage. You can collapse data and make inferences about the state and you can talk about school district data.

Eric indicated that is what we need to know, what the coverage is like. Eric indicated that we may need to go to the cluster sampling if the IPRC believes that they are not getting representative samples. Eric Martin said it could be a public relations issue of raising awareness and improving sample size.

Eric Wright indicated that it would be better if we want county level data, it maybe better to use a sampling scheme so we can sample schools that would give us a representative sample and have the youth council target specific schools and encourage participation so that we can get representative data at the county level. This might be a better use of funds. Ruth indicated that even if we have a cluster sampling approach it may still be difficult to get enough schools to participate. Eric hopes the youth council will help encourage participation. Ruth indicated that schools need to realize the importance of the data because schools that do participate have been getting grants.

Mary indicated do we want to do 100% coverage, do we want to do every grade level. Can we use just 6th, 8th, 10th grade level. Ruth indicated that we also have to do what schools like and work with what they find valuable.

Roland asked if the survey is in Spanish? Barbara said that is something that is asked every other month and Roland indicated that having the YRBSS in Spanish improved response rate. Thinks having it in Spanish would help.

Harold Kooreman went through the data collection forms. Barbara made some suggestions about demographics as did Jeanie. Barbara suggested that we include question about having another adult with whom they can talk to. Roland indicated that if we are asking questions about MAST and DAST, then we are having a lot of issues of reporting any child that talks about drug use or sexual behavior. Also, what happens if someone scores high on the screening item? Are there resources available to deal with the person who has a problem?

Eric said we could drop the questions, we could replace the questions on the back with evaluation questions. Ruth thought having those questions would be good because it can help you see from a planning perspective the kinds of issues that you have going on with your clients.

Eric thinks that we could have communities see the forms and give input on whether they want to ask these questions.

Marcia wants each community to have a plan in place to know what do if issues like drug abuse or sexual abuse come up so they know what to do -- have a safety plan in place.

Eric said we chose the MAST and DAST as consequence measures. We wanted some behavioral consequences. If there is another measure of consequences then we would consider it to.

Ruth and Barbara wanted to know if the MAST and DAST were used for kids too or was it just developed for adults. Eric said that he thought they had been used for both.

Roland thought that younger kids may not know about all the drugs and they may not provide useful information. Eric asked if IPRC could do some analysis on missing data to see if there are is more missing or non response for younger kids.

Mary said you can put prompts in to indicate street names of drugs to help them know what the drug is.

Eric said we could include opinion questions for adults too and just keep things fair.

Eric Martin wanted to know if this data was valuable for people coming into prevention programs. Eric Wright went the data heavy approach since we are so data poor.

Eric Martin thought if we use some of the IPRC data, then we could make a comparison between IPRC and the communities. How closely do NOMS in IPRC reflect one another. Would help comparability for kids who are or are not in SPF SIG or in any program.

There is an issue with demographic information, how would that impact data collection. Demographic information was used to help prompt data collection for each group of individuals.

Karla indicated that we could use the school identifiers as a way to identify kids but we would have to generate numbers for people who are not in school. We could then use the id numbers as reminders. Eric said that these are issues that we are working to iron it out.

If everyone is collecting NOMS then we will have a better understanding of what's going on in the state.

We need more consequence items but Eric said he will leave the back page open for discussion.

Karla Carr said that the race/ethnicity codes are changing for the census so we might want to add those instead of the list that we are using.

Rich VanDyke suggested looking at the CANS. If we do that, DMHA, DCS, everyone would have those data available.

What about adults? What is DMHA considering? Sue Loomis is the one coordinating that.

Jeanie wanted to know the start date of data collection and then what about follow up. How hard will it be to get data every six months? How will we find these kids? Jeanie also wanted to know about comparison communities or comparison groups? She suggested compare people in the program to those getting ready to come into the program. Eric thought we could compare to people in other counties using the IPRC data to compare funded sites to nonfunded sites. Eric Martin wanted to know what we do with environmental strategies. How do we deal with gathering data from a community as a whole?

Eric Wright said we don't want to get too far ahead because we still don't know what they are going to do.

Last thing Eric wanted to raise was the community readiness survey. Eric wanted comments on the report. Eric indicated that the community readiness survey will be tweaked for each SPF-SIG site and we will try and get 35-50 people for the each community.

Next meeting will be Friday July 20th, however this is the same time as the SPF SIG grantee meeting.