Palo Alto Unified
Secondary
2009-2010
Key Findings
This report was prepared for the district by WestEd, a research, development, and service agency, in collaboration with Duerr Evaluation Resources, under contract from the California Department of Education, Safe and Healthy Kids Program Office. For contract information, contact:

Hilva Chan  
California Department of Education  
Safe and Healthy Kids Program Office  
1430 N. Street  
Sacramento, CA 95814  
hchan@cde.ca.gov

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San Francisco: WestEd Health and Human Development Program for the California Department of Education.
This report provides the detailed results for each question from this district’s 2009-10 administration of the California Healthy Kids Survey (CHKS), presented in tables organized by topic. In addition to this Main Report, the CHKS Key Findings provides a summary of selected results with graphic presentations and short discussions. To help in understanding and interpreting these results, review these findings along with the Survey Content Guidebook, (www.wested.org/chks/narratives) which discusses the significance of each question. Several other tools to help in data use are also available, as described below.

The results of this student survey should be compared to those obtained from school staff from the companion California School Climate Survey (CSCS), which was administered at the same time. It is important to determine whether staff perceptions accurately reflect student behaviors and experiences. The Survey Content Guidebook provides a cross-walk between the two surveys’ questions to facilitate this comparison. Combined, the CHKS and CSCS provide a comprehensive assessment of the school climate and the needs of students and staff to guide school improvement efforts. For additional information and resources, visit the survey websites: www.wested.org/chks and cscs.wested.org.

SURVEY PURPOSE
The CHKS and CSCS form the largest, most comprehensive effort in the nation to assess local students and staff on a regular basis to provide key data on learning barriers, engagement, and supports. The California Department of Education (CDE) funded the CHKS in 1997 to provide data that would assist schools in: (1) preventing youth health-risk behaviors and other barriers to academic achievement; (2) promoting positive youth development, resilience, and well-being; and (3) fostering positive school climates and engagement in learning. A thorough understanding of the scope and nature of youth behaviors and attitudes is essential to guide school improvement efforts and develop effective prevention, health, and youth development programs. Since fall 2003, biennial administration of the survey (along with the California School Climate Survey of staff), and the public posting of the results, have been required by CDE in compliance with the No Child Left Behind Act. These surveys grew out of CDE’s commitment to helping schools promote the successful cognitive, social, and emotional development of all students and create more positive, engaging school environments for both students and staff.

SURVEY CONTENT OVERVIEW
The CHKS consists of a required general Core Module and a series of optional supplementary topic-focused modules that districts can elect to administer. Districts may also add their own questions of local interest in a custom module. Table A1.1 indicates the modules administered by the district. The Core Module consists of a broad range of key questions identified by an expert advisory committee considered most important for schools to administer to guide improvement of academic, health, and prevention programs and the promotion of student achievement, positive development, and well-being. The primary focus of the Core Module is assessing student perceptions and experiences related to school climate and engagement, learning supports, and health-related, non-academic learning barriers (e.g., substance use, bullying and violence, and poor physical and mental health).

1 The CHKS Guidebook to Survey Administration contains detailed information about the content of all the survey modules. The modules themselves can be downloaded from the website.
School Related Content
To support school improvement efforts, the majority of questions on the survey assess school performance, engagement, climate, performance, and experiences. The survey provides self-report data on:

• grades, truancy, and school connectedness, as indicators of engagement;
• the level of which students experience caring adult relationships, high expectations, and opportunities for meaningful participation at school, three fundamental developmental supports (protective factors) that promote positive academic outcomes;
• perceived safety and frequency of, and reasons for, harassment and bullying at school; and
• level of substance use, violence, and crime-related behavior (e.g., weapons possession) at school.

These questions can be compared to staff perceptions on the California School Climate Survey.

Closing the Achievement Gap
Several tables are particularly useful for helping districts identify and address the needs of students related to closing the state’s persistent racial/ethnic achievement gap, which Superintendent O’Connell has declared CDE’s top priority (the CTAG Initiative). Students are asked to indicate their racial/ethnic identity and report whether they have experienced harassment because of their race/ethnicity Summary tables also provide key findings (e.g., harassment, developmental supports, school connectedness) disaggregated by race/ethnic categories.

To make the survey more valuable in support of CTAG efforts, in 2008-09 a supplementary module was created that assesses student perceptions of the respect shown to them at the school; equity and diversity; and cultural sensitivity. (Similar questions were added to the CSCS as well.) CDE automatically provides districts that select to administer the CHKS CTAG Module with supplementary reports disaggregating all their CHKS and CSCS results by the race/ethnicity of staff and students.

Survey Administration and Sampling
School staff administered the survey following detailed instructions provided by CDE designed to assure the protection of all student and parental rights to privacy and maintain confidentiality. Students were surveyed only with the consent of parents or guardians. Each student's participation was voluntary, anonymous, and confidential. Table A1.2 gives the target sample of students, and the final number and percent that completed the survey (the participation response rate).

The Report
The tables in this Main CHKS Report provide the percentages responding to each question response option by grade level, organized by topic. Because it is just as important to identify the positive behaviors of youth as it is to identify the risks they face, the tables include the percentages of youth who do not engage in each risk behavior. Percentages are rounded off to the nearest whole number.
Depending on the nature of the districts' enrollment and module administration it may also receive two supplemental CHKS reports. Districts that participate in CDE’s Migrant Education Program (MEP) are qualified to receive reports that compare CHKS results as well as CSCS for students/staff that participate in the MEP versus those that do not participate. As noted, if the district also elected to administer the supplementary CHKS “CTAG” module, it will also receive all CHKS and CSCS results broken down by racial/ethnic categories of students and staff. (CSCS reports that compare results between special education staff and general education are also being provided.)

**AIDS TO UNDERSTANDING AND USING THE DATA**

Several guides, workshops, and other aids are available to help you understand and use survey results. These are described and made available on the survey website. Three are particularly important.

- To help in understanding and interpreting these results, a *Survey Content Guidebook* provides a detailed explanation of each question and its significance (why it was asked) and the potential implications for programs of the results.

- The CHKS *Data Use and Dissemination Guidebook* describes a step-by-step process for reviewing, analyzing, and disseminating your results as part of a data-driven decision making process for program improvement. Free call-in data use workshops are offered as well.

- A *Workbook on Improving School Climate and Closing the Achievement Gap* provides a practical guide to using the data in the framework of improving academic achievement and well-being among all students and closing the achievement gap. It provides examples of how to use the data to improve practice and policy. A workshop accompanying this Workbook will be available in 2010.

**ASSESSING THE DATA**

Care must be taken to fully understand the survey, the context within which the data were collected, and the factors that can impact the quality, validity, and generalizability of the results, the changes obtained between administrations, or differences between your results and those from other districts or state norms. The following are a few of the key issues that should be kept in mind. A more detailed discussion of these topics can be found in the *CHKS Data Use and Dissemination Guidebook*.

**Representativeness**

Among the most important factors affecting the quality of survey results is the level of student participation. The validity and representativeness of the results will be adversely affected if the student response rate is lower than 60%. One indication of the survey's representativeness is how accurately the sample reflects the gender and ethnic composition of the district’s student enrollment. Even if the response rate is low, the results provide an indication of what those students who did respond felt about the school and their experiences and behavior.

**Changes Between Surveys**

Many factors may account for changes in results from administration to administration besides real changes in behavior, attitudes, or experiences among students. The change could be due to differences over time in the characteristics or size of the sample of students who completed the survey, or changes in the questions themselves, or differences in the time period in which the
survey was administered (e.g., some risk behaviors tend to increase with age, and be higher after holidays or even a social event).

**Comparison Data**
Tables 9.1 and 9.2 provide comparisons of selected results to state and national data. Comparing district results to other local, regional, state, and national benchmarks provides a broader context with which to evaluate the local situation. They can help you determine whether changes in your district are unique or may be part of a larger trend, possibly affected by broad social forces. Ultimately, however, the most fundamental concern should be not how you compare with others but your satisfaction with your own survey results and whether your indicators are improving.

**NEXT STEPS**
Receiving this report is just a beginning step in a data-driven, decision-making process. The following describes actions you can take to analyze and use the results and provide additional information to support school- and program- improvement efforts.

**Request School Reports**
Individual school-level reports may be of interest for many reasons. Primary among these is the interest of staff and parents about their own local school results, especially if the schools vary significantly in demographics, programs, or other characteristics. A comparison among schools may also prove useful in identifying sites which might benefit from special work or interventions. A small fee applies. (For large districts that sample schools and students, the sample may not support school reports.)

**Compare with Other Data Sources**
CHKS results will be enriched if analyzed in the context of data from the California School Climate Survey and other sources, particularly in identifying consistent patterns. Other data typically collected in effectiveness studies of school climate include number and kinds of discipline referrals, school demographic information, school vandalism costs, and behavioral observations in classrooms.

**Discuss with Students and Staff**
Discuss the results with both students and staff to explore their meaning in more depth and obtain their input into how the school might better meet the needs identified. This is especially important because it communicates to students that you value their input into how to improve the school and gives them an opportunity for meaningful participation. As such, it helps improve their perceptions of the developmental supports and opportunities that the school offers and their school connectedness. Survey staff can provide information on conducting structured group “listening” discussions of the data with youth focused on obtaining their input on how to address the needs identified by the survey.

**Conduct Additional Analyses of The Dataset**
The complete dataset is available electronically for analysis (there is a small fee for preparation). The dataset enables analyses of patterns in the results, how they are interrelated, and how they vary by different subgroups of students and across schools. Particularly valuable in understanding factors that may affect student achievement is examining how other variables relate to student reports of attendance, grades, and school connectedness.
**Add Questions to your Next CHKS**

Determine what additional information is needed from staff to guide school improvement efforts and add questions to your next CSCS or CHKS. Both surveys were designed so that schools can add additional questions to help them conduct a more individualized and comprehensive assessment.

**ACKNOWLEDGEMENTS**

The CHKS was developed, and this report prepared for the district, by WestEd in collaboration with Duerr Evaluation Resources, under contract from the California Department of Education (CDE) Safe and Healthy Kids Program Office. For more information, call the toll-free helpline at 888.841.7536, or visit the website at http://www.wested.org/chks.

Gregory Austin, Ph.D.
CHKS Director, WestEd

Tom Herman, Administrator
Safe and Healthy Kids Program Office, California Department of Education
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INTRODUCTION

The Palo Alto Unified School District administered the California Healthy Kids Survey (CHKS) in the 2009-2010 school year. We wish to thank all the school staff, teachers, parents, and students who participated in the survey for their commitment, time, and effort.

The CHKS is a service provided by the California Department of Education (CDE) to districts that want to collect information on the health risks and resilience of their students. This report provides a summary of the survey's purpose and key findings relating to substance use, violence and safety. While it is essential to identify and address student problems, it is equally important that we do not lose sight of the positive behaviors and attitudes of most youth. The CHKS provides the data to do this. This report summarizes the results for key indicators of risk and well-being. The complete survey results are available in the district's Technical Report.

Why Was the Survey Conducted?

The “CHKS Goals” at the end of this document provides the reasons why the district administered the survey. The most important reason is the monitoring of progress toward promoting youth well-being and school success. Schools increasingly need—and are often required—to find out what problems their students face and to put in place programs to address them. This is an essential part of efforts to improve student academic performance and positive youth development.

More specifically, the survey meets the requirements of the federal Safe and Drug Free Schools and Communities Act (SDFSCA) and contains eleven performance indicators that the California Department of Education has identified for schools to monitor in meeting the Act's goals of reducing substance use and violence by youth, as required by the No Child Left Behind Act of 2001. The results for these Performance Indicators are summarized in Tables 2 and 3.

How Was the Survey Conducted?

The survey was conducted using passive parent consent. The CHKS targets students in grades 5, 7, 9, and 11. The district conducted the survey using strict guidelines to preserve student privacy, data confidentiality, and all other student and parent rights. Each student's participation was completely voluntary and anonymous. The district administered the survey following detailed written instructions and on-call technical assistance from a CHKS Center.

Who Took the Survey?

Table 1, on the following page, presents the number of students that participated in the CHKS. According to CHKS standards, the district must collect completed answer sheets from a minimum of 60% of students at each surveyed grade level (at a minimum grades 5, 7, 9, and 11) to produce representative data. The lower the percentage of participating students below 60%, the less valid and useful are the results. Overall, the results for the district appear reliable and are a good reflection of student behavior.
**Table 1. Description of Participating Students**

<table>
<thead>
<tr>
<th></th>
<th>Grade 7</th>
<th>Grade 9</th>
<th>Grade 11</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Number of Students Surveyed</strong></td>
<td>632</td>
<td>702</td>
<td>663</td>
</tr>
<tr>
<td><strong>Percent of Students Participating</strong></td>
<td>77%</td>
<td>77%</td>
<td>79%</td>
</tr>
<tr>
<td><strong>Gender (%)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Males</td>
<td>52</td>
<td>48</td>
<td>50</td>
</tr>
<tr>
<td>Females</td>
<td>48</td>
<td>52</td>
<td>50</td>
</tr>
<tr>
<td><em><em>Race/Ethnicity</em> (%)</em>*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>American Indian or Alaskan Native</td>
<td>2</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Native Hawaiian or Pacific Islander</td>
<td>2</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Asian</td>
<td>39</td>
<td>38</td>
<td>37</td>
</tr>
<tr>
<td>Black or African American</td>
<td>2</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Hispanic or Latino/Latina</td>
<td>9</td>
<td>7</td>
<td>9</td>
</tr>
<tr>
<td>White or Caucasian (non-Hispanic)</td>
<td>47</td>
<td>51</td>
<td>53</td>
</tr>
<tr>
<td>Other</td>
<td>10</td>
<td>10</td>
<td>7</td>
</tr>
<tr>
<td>Selected more than one category</td>
<td>9</td>
<td>10</td>
<td>11</td>
</tr>
</tbody>
</table>

*Students that selected more than one category were counted in each category. Therefore, these columns may add up to more than 100%.
ALCOHOL, TOBACCO, AND OTHER DRUG USE

Reported in this section are the results for lifetime and current substance use, alcohol and drug use at school, high-risk behaviors such as binge drinking and drinking and driving, and perceived harm. Tables 2 and 3 on pages 13 through 15 display state and national comparison data for CDE’s Performance Indicators.

Lifetime Use of Alcohol and Other Drugs
Chart 1 illustrates the percent of students who have ever tried a full drink of alcohol (not just a sip), inhalants, or marijuana. These data provide information about the overall drug environment in the school and community. However, lifetime use rates include students who may have only experimented once.

Chart 1. Percent of Students Who Used Alcohol and Other Drugs at Least Once in Their Life

Current Use (Past 30 Days) Of Alcohol and Other Drugs
Chart 2 shows the percent of students who are current users of the same three substances displayed in Chart 1, having consumed them in the thirty days before the survey. These students, particularly in high school, may be regular users and not just students who experiment.
Chart 2.  Percent of Students Who Used Alcohol or Other Drugs During the Past 30 Days (Current Use)

Tobacco Use, Lifetime and Current Use
Chart 3 shows the percent of students who experimented with tobacco at least once in their lives, either smoking one or two puffs or a whole cigarette. In addition, the chart displays the percent of students who in the 30 days before taking the survey smoked at least one cigarette as well as smoked daily (at least 20 days).

Chart 3.  Percent of Students Who Participated in Various Levels of Tobacco Use
High Risk Behaviors

The CHKS asks students several questions that help determine the level and risk of substance use as a guide for programs targeting serious involvement. Chart 4, on the following page, shows the percent of students who drank alcohol or smoked marijuana on school property, had been sick after drinking, had been high in their lifetime, and drank excessively in the past month.

Use at School. Special attention should be paid to alcohol and other drug use at school, as this is a key indicator of serious involvement, as well as a lack of attachment or sense of belonging to the school. These behaviors interfere with students' educational development. Because marijuana is long lasting, can be easily concealed, and is consumed quickly, its use has been particularly associated with attending school “high.”

Drunk or High. Youth were asked whether they had ever been drunk or sick after drinking alcohol, or been high from using drugs. When considering this information, keep in mind that youth may feel that they are drunk when an adult would not, and that, because of their lower body weight, it also takes less alcohol for them to get drunk.

Binge Drinking. One of the most widely used definitions of heavy drinking is the consumption of five drinks in a row in a single setting or occasion. This is frequently called “binge drinking” or “episodic” heavy drinking. Adolescent binge drinkers open themselves up to many alcohol-related problems, such as losing control over their actions, making poor choices, and taking part in high-risk activities such as unprotected sex or driving while intoxicated.

Involvement in Drinking and Driving. Driving under the influence is one of the main causes of traffic accidents and death among youth. To gauge the overall risk to students from drinking and driving, high school students were asked how often they had ever driven after drinking or been driven by a friend under the influence. 8% of 9th graders and 23% of 11th graders indicated they had either driven a car after drinking or been a passenger in a car driven by a friend who had been drinking. 27% of 7th graders reported riding in a car with a driver who had been drinking. At the middle school level, these drivers are mainly parents and guardians.
Chart 4. Percent of Students Who Participated in High Risk Behaviors Associated with Alcohol, Tobacco, or Other Drugs

Perceived Harm

As a way to measure attitudes toward substance use, the CHKS asks students how they feel about frequent use (at least once a day) of cigarettes, alcohol, and marijuana. Chart 5 provides the results for students who think it is harmful.

The relationship of knowledge, attitudes, and behavior is complex. Only providing information about the dangers of alcohol, tobacco, and other drug use has had little impact on behavior. However, state and national data indicate that if students think using alcohol, tobacco and other drugs is extremely harmful or risky they will be less likely to use them. This means that talking to students about the use dangers is an important part of a total prevention program.

Research has consistently shown that the great majority of students believe that frequent use of cigarettes, alcohol, and marijuana is harmful. However, it seems students usually think alcohol is less dangerous than tobacco, and that tobacco is less harmful then marijuana.
Chart 5. Percent of Students Who Feel Frequent Use of Alcohol, Tobacco, and Other Drugs is Harmful

<table>
<thead>
<tr>
<th>Drug</th>
<th>Grade 7</th>
<th>Grade 9</th>
<th>Grade 11</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cigarettes</td>
<td>91%</td>
<td>96%</td>
<td>96%</td>
</tr>
<tr>
<td>Alcohol</td>
<td>91%</td>
<td>95%</td>
<td>96%</td>
</tr>
<tr>
<td>Marijuana</td>
<td>87%</td>
<td>91%</td>
<td>91%</td>
</tr>
</tbody>
</table>
VIOLENCE AND SAFETY

The American public’s highest concerns about youth are currently related to violence. Chart 6 shows students’ answers to the question about how safe they feel at school. Chart 7 includes indicators of harassment, violence perpetration, and weapons possession at school. A safe school environment is necessary in order for students to succeed academically. Students who feel they belong to their school are also less likely to be involved in violent behavior at school.

Perceived Safety
The CHKS asks students how safe they felt in school. The need for safe schools does not mean just "violence-free," but safe, secure, and peaceful. Safety—both psychological and physical—is a basic need that must be met in order for students to succeed in school.

Chart 6. Percent of Students Who Feel Very Safe at School

Harassment
Harassment is a form of violent and abusive behavior that makes the person being harassed feel vulnerable, isolated, and afraid. This can lead to taking part in risk behaviors such as drug use. The CHKS asks students if they have been harassed at school in the past year because of race, ethnicity, religion, gender, sexual orientation, or disability.

Physical Fights
Fighting often comes before deadly violence among young people. The CHKS asks students about their frequency of involvement in physical fights at school in the past year. This is a measure of the overall scope of fighting behavior and does not differentiate between aggression and victimization. In practice, fighting is often mutual.
Fear of Physical Violence
To help measure physical victimization, students were asked about the frequency they had “been afraid of being beaten up.” This provides insight into the psychological dimension of fear of being physically harmed. (Students were also asked if they had been “pushed, shoved, slapped, hit, or kicked by someone who wasn’t just kidding around”).

Carrying Weapons
Much of the public concern over school safety is focused on guns and other weapons. The immediate availability of a firearm or other lethal weapon often is part of what turns a violent fight into a deadly incident. Chart 7 shows the percent of students who carried weapons to school at least one day in the past 12 months.

Chart 7. Percent of Students Who Experienced Safety-Related Incidents on School Property During the Past 12 Months

Gang Membership
Gang members typically are proud of their gang membership and do not feel the need to hide the fact when answering questions on a survey. It is very important to find out how much school violence is due to gang-related activity, which has been found to be a factor. These types of incidents require special attention because they are different than violent behaviors seen in the general student population. District-wide results revealed that 5% of 7th graders, 6% of 9th graders, and 6% of 11th graders currently belong to a gang.
BREAKFAST CONSUMPTION

The CHKS assesses the proportion of youth that ate breakfast the day of the survey. Students who eat breakfast have been found to learn better, perform higher on standardized test scores, have better attendance rates at school, and are less apathetic and lethargic.

Chart 8.  Percent of Students Who Ate Breakfast
PROTECTIVE FACTORS: SCHOOL SUPPORTS

Youth development researchers emphasize the importance of providing environmental supports and opportunities (external assets) in the form of Caring Relationships, High Expectations, and opportunities for Meaningful Participation, as measured by the CHKS Resilience and Youth Development Module. The presence of high levels of these three Protective Factors will help meet the fundamental developmental needs of youth for love, belonging, security, respect, identity, power, mastery, and meaning. This, in turn, engages students’ innate resilience, promotes positive individual outcomes such as improved health and academic achievement, and protects against involvement in risk behaviors such as substance abuse and violence.

Chart 9 illustrates the proportion of students scoring High for each of these three protective factors in the school environment, as well as total perceived Protective Factors (average across the three scales). Resilience research clearly documents the power of teachers and schools to tip the scale from risk to resilience for children and youth. Even among children growing up in overwhelmingly negative conditions, researchers have found that 70-80% of them have demonstrated healthy adjustment and achievement when schools are sensitive to them and their burdens and provide supportive activities.\(^1\) Youth development and successful learning are not competing goals but rather complementary or even synergistic processes. As Nel Noddings has observed:

\begin{quote}
It is clear that when schools focus on what really matters in life, the cognitive ends we now pursue so painfully and artificially will be achieved somewhat more naturally. It is obvious that children will work harder and do things...for people they love and trust.\(^2\)
\end{quote}

The School Connectedness Scale derived from the Add Health Survey is currently used by CDE as the Performance Indicator for school connectedness for Local Education Agency Plans.

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Comparison to State and National Student Data

One way to understand the data collected for the schools and district is to compare them to state and national data collected using the same questions. Tables 2 and 3 on the following pages display state and national student data for a select number of questions. The comparison information in the tables comes from the 2007 statewide California Student Survey and the 2007 national Youth Risk Behavior Survey results. The California Student Survey includes 9th and 11th graders in Continuation/Alternative schools with the data from Comprehensive/Traditional high school students. These include Performance Indicators CDE has identified for monitoring progress in reducing drug use and violence, as required in the Local Education Agency Plan. The indicators are identified by the symbol: (PI).
### Table 2. Selected Alcohol, Tobacco and Drug Use, with Comparisons to 2007 State CSS* and 2007 National YRBS

<table>
<thead>
<tr>
<th>Lifetime and Current ATOD Use</th>
<th>7th Grade %</th>
<th>9th Grade %</th>
<th>11th Grade %</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>District CSS</td>
<td>District CSS</td>
<td>District CSS</td>
</tr>
<tr>
<td>During your life did you ever...</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>smoke a cigarette? (PI)</td>
<td>2 7</td>
<td>12 20</td>
<td>19 34</td>
</tr>
<tr>
<td>chew tobacco or snuff?</td>
<td>2 4</td>
<td>3 6</td>
<td>8 10</td>
</tr>
<tr>
<td>drink alcohol (glass)?</td>
<td>9 24</td>
<td>28 47</td>
<td>54 66</td>
</tr>
<tr>
<td>use inhalants?</td>
<td>6 11</td>
<td>7 14</td>
<td>7 15</td>
</tr>
<tr>
<td>smoke marijuana? (PI)</td>
<td>3 9</td>
<td>15 25</td>
<td>31 42</td>
</tr>
<tr>
<td>During the past 30 days, did you...</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>smoke a cigarette? (PI)</td>
<td>2 6</td>
<td>6 11</td>
<td>9 17</td>
</tr>
<tr>
<td>chew tobacco or snuff?</td>
<td>1 3</td>
<td>2 5</td>
<td>4 6</td>
</tr>
<tr>
<td>drink alcohol (glass)? (PI)</td>
<td>6 15</td>
<td>15 24</td>
<td>36 42</td>
</tr>
<tr>
<td>use inhalants?</td>
<td>2 5</td>
<td>3 7</td>
<td>2 7</td>
</tr>
<tr>
<td>smoke marijuana? (PI)</td>
<td>2 7</td>
<td>9 15</td>
<td>20 24</td>
</tr>
<tr>
<td>Level of Involvement (High Risk Patterns)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>During your life have you ever...</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>been very drunk or sick after drinking?</td>
<td>2 11</td>
<td>14 28</td>
<td>32 45</td>
</tr>
<tr>
<td>been high from using drugs?</td>
<td>2 8</td>
<td>15 22</td>
<td>28 37</td>
</tr>
<tr>
<td>During the past 30 days, did you...</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>drink 5 drinks in a couple of hours?</td>
<td>1 6</td>
<td>8 16</td>
<td>22 29</td>
</tr>
</tbody>
</table>

(PI) = SDFSCA/TUPE performance indicator required by CDE for Local Education Agency Plans.
*YRBS asks about smoking even a puff or two.
*The California Student Survey includes 9th and 11th graders in Continuation/Alternative schools with the data from Comprehensive/Traditional high school students.
Table 2.  Selected Alcohol, Tobacco and Drug Use, with Comparisons to 2007 State CSS* and 2007 National YRBS (continued)

<table>
<thead>
<tr>
<th>ATOD Use on School Property</th>
<th>7th Grade %</th>
<th>9th Grade %</th>
<th>11th Grade %</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>District</td>
<td>District</td>
<td>District</td>
</tr>
<tr>
<td></td>
<td>CSS</td>
<td>CSS</td>
<td>YRBS</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>During your life, have you ever been drunk/high?</td>
<td>1</td>
<td>9</td>
<td>15</td>
</tr>
<tr>
<td>During the past 30 days, did you smoke cigarettes?</td>
<td>1</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td><strong>Perceived Harm</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>People risk harming themselves using...</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>cigarettes (1-2 packs a day)</td>
<td>91</td>
<td>96</td>
<td>96</td>
</tr>
<tr>
<td>alcohol (five or more drinks once or twice a week)</td>
<td>91</td>
<td>95</td>
<td>96</td>
</tr>
<tr>
<td>marijuana (once or twice a week)</td>
<td>91</td>
<td>91</td>
<td>87</td>
</tr>
</tbody>
</table>

*The California Student Survey includes 9th and 11th graders in Continuation/Alternative schools with the data from Comprehensive/Traditional high school students.

(PI) = SDFSCA/TUPE performance indicator recommended by CDE.

ªnot comparable with previous CHKS results

ªcombines "Great," "Moderate," and "Slight"
<table>
<thead>
<tr>
<th>School Safety</th>
<th>7th Grade % District</th>
<th>7th Grade % CSS</th>
<th>9th Grade % District</th>
<th>9th Grade % CSS</th>
<th>11th Grade % District</th>
<th>11th Grade % CSS</th>
<th>11th Grade % YRBS</th>
<th>11th Grade % CSS</th>
<th>11th Grade % YRBS</th>
</tr>
</thead>
<tbody>
<tr>
<td>During the past 12 months at school, have you….</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>been harassed because of race/ethnicity, religion, gender,</td>
<td>26</td>
<td>31</td>
<td>26</td>
<td>27</td>
<td>~</td>
<td>22</td>
<td>22</td>
<td>~</td>
<td></td>
</tr>
<tr>
<td>sexual orientation, or disability?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>been in a physical fight?</td>
<td>17</td>
<td>32</td>
<td>13</td>
<td>25</td>
<td>18</td>
<td>7</td>
<td>23</td>
<td>11</td>
<td></td>
</tr>
<tr>
<td>been afraid of being beaten up? (PI)</td>
<td>15</td>
<td>29</td>
<td>16</td>
<td>22</td>
<td>~</td>
<td>9</td>
<td>15</td>
<td>~</td>
<td></td>
</tr>
<tr>
<td>During the past 12 months on school property, did you carry any</td>
<td>6</td>
<td>10</td>
<td>9</td>
<td>13</td>
<td>~</td>
<td>6</td>
<td>13</td>
<td>~</td>
<td></td>
</tr>
<tr>
<td>weapon (gun, knife, or club)?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How safe do you feel when you are at school? Very safe. (PI)</td>
<td>36</td>
<td>18</td>
<td>30</td>
<td>16</td>
<td>~</td>
<td>43</td>
<td>20</td>
<td>~</td>
<td></td>
</tr>
<tr>
<td>Do you consider yourself a member of a gang?</td>
<td>5</td>
<td>9</td>
<td>6</td>
<td>8</td>
<td>~</td>
<td>6</td>
<td>8</td>
<td>~</td>
<td></td>
</tr>
<tr>
<td>School Protective Factors - High Levels (Resilience Indicators)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caring relationships with teacher or other adult (PI)</td>
<td>49</td>
<td>31</td>
<td>38</td>
<td>28</td>
<td>~</td>
<td>47</td>
<td>29</td>
<td>~</td>
<td></td>
</tr>
<tr>
<td>High expectations from teacher or other adult (PI)</td>
<td>63</td>
<td>45</td>
<td>52</td>
<td>39</td>
<td>~</td>
<td>55</td>
<td>38</td>
<td>~</td>
<td></td>
</tr>
<tr>
<td>Opportunities for meaningful participation at their school (PI)</td>
<td>25</td>
<td>16</td>
<td>19</td>
<td>13</td>
<td>~</td>
<td>21</td>
<td>15</td>
<td>~</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>48</td>
<td>31</td>
<td>39</td>
<td>27</td>
<td>~</td>
<td>45</td>
<td>28</td>
<td>~</td>
<td></td>
</tr>
<tr>
<td>School Connectedness Scale (PI)</td>
<td>67</td>
<td>39</td>
<td>62</td>
<td>34</td>
<td>~</td>
<td>62</td>
<td>31</td>
<td>~</td>
<td></td>
</tr>
</tbody>
</table>

*(PI) = SDFSCA/TUPE performance indicator required by CDE for Local Education Agency Plans.

*The California Student Survey includes 9th and 11th graders in Continuation/Alternative schools with the data from Comprehensive/Traditional high school students.
# ABOUT THE CHKS

**SPONSOR**  
California Department of Education

**SURVEY TYPE**  
Anonymous, voluntary, confidential student self-report, comprehensive health risk and resilience survey  
Modular secondary school instrument; single elementary version

**GRADE LEVELS**  
Grades 5, 7, 9, 11, and continuation schools, minimum

**SAMPLING**  
Representative district sample by contractor  
School-level surveys optional

**MODULES**  
A. Core  
B. Supplemental Resilience and Youth Development  
C. AOD Use & Safety (Violence & Suicide)  
D. Tobacco  
E. Physical Health  
F. Sexual Behavior (Pregnancy and HIV/AIDS risk)  
G. Custom module  
H. After School

**SOURCES**  
Items based on California Student Survey, Youth Risk Behavior Survey, and California Student Tobacco Use and Evaluation Survey

**REQUIREMENTS**  
Biennial administration starting 2003-04  
Active consent from parent/guardian for grade 5  
Active or passive consent for grade 7 and up  
Representative district samples

**ADMINISTRATION**  
By school, following detailed instructions

**PRODUCT**  
Local reports and aggregated state database

**ADVISORS**  
Advisory committee of researchers, educators, prevention practitioners, and representatives of state public and private agencies, including the PTA and California School Boards Association

**DATABASE**  
For spring 1998-spring 2003, contains over 1,300,000 student records from 77% of school districts representing 94% of state enrollment

**STAFF SURVEY**  
Staff School Climate Survey assessing key factors relating to substance use, safety, youth development and well-being, learning supports and barriers, and school improvement (Required since fall 2004)

**CONTRACTOR**  
WestEd — Gregory Austin, PhD, Project Director

**INFORMATION**  
California Department of Education: 916.319.0920  
Website: [http://www.wested.org/hks](http://www.wested.org/hks)  
Regional center helpline: 888.841.7536
**Background**

**Development**
The CHKS was developed under contract from CDE by WestEd in collaboration with Duerr Evaluation Resources, assisted by an Advisory Committee of researchers, teachers, school prevention and health program practitioners, and public agency representatives. It is designed to provide a common set of comprehensive health risk and resilience data across the state to guide local program decision-making and also determine geographic and demographic variations. Its flexible structure enables it to be easily customized (including the addition of questions) and integrated into program evaluation efforts to meet local needs and interests.

**Sampling and Analytic Plans**
For districts with 900 or fewer students per grade, all students are surveyed; otherwise 900 students may be randomly selected. If a district has over 10 schools per grade, schools may be randomly sampled. For results to be representative, a minimum of 60% of the students must complete useable surveys in each grade and school. Results are discarded for students who grossly exaggerated their substance use or had inconsistent response patterns.

**Goals**

**Reduce Risk Behaviors and Promote Well-being and Positive Development**
The behaviors assessed by the CHKS are those that contribute directly to the leading causes of death, injury, and social and personal problems among youth. Schools need a thorough understanding of the scope and nature of student risk behavior and assets (resilience) to develop effective prevention and health programs. Without data, districts will struggle to make sound decisions about allocation of resources, programming, and the effectiveness of their efforts.

**Promote Learning**
Ensuring that students are safe, drug-free, healthy, and resilient is central to improving academic performance. Growing numbers of children are coming to school with a variety of health-related problems that make successful learning difficult, if not impossible. (See the discussion below on Using the CHKS to Help Improve Schools and Achievement.)

**Demonstrate Accountability**
The CHKS is an important component of California’s school accountability system, which requires that schools objectively assess students and then set measurable goals for making improvement. The CHKS gathers credible information to identify the health and safety needs of the students, establish district goals, and monitor progress in achieving the goals.

**Meet Funding Requirements**
For these reasons, state, federal, and private agencies increasingly require schools to collect, disseminate, and use health-related data as a requirement for obtaining and maintaining funding. The CHKS is specifically designed to help meet such requirements. For example, the federal *No Child Left Behind Act* requires LEAs to regularly conduct a drug use and violence needs
assessments and report the results to the community. Districts that have state competitive grants for Tobacco Use Prevention Education (TUPE) programs also must administer the CHKS.

**Promote Health Programs and Community Support**

The CHKS is designed to send a positive message of the importance of a healthy lifestyle and to promote the development of comprehensive school health programs. It aims to foster school and community collaboration that is essential to tackling these critically important issues.

**Using the CHKS to Help Improve Schools and Student Achievement**

How do schools engage, motivate, and support students so that they can achieve? Ensuring that students are safe, drug-free, healthy, and resilient is central to improving academic performance. Growing numbers of children are coming to school with a variety of health-related problems that make successful learning difficult, if not impossible. Research studies and reviews over the past decade have consistently concluded that student health status and academic achievement are inextricably intertwined. Incorporating health and prevention programs into school improvement efforts produces positive achievement gains. To these ends, the CHKS provides data to assess and monitor the health-risk and problem behaviors that research has identified as important barriers to learning among students, particularly those related to school climate. The CHKS also assesses school assets and connectedness, which research has consistently identified as promoting positive youth development and school success. The full CHKS report lists all the school-related questions. The numbers refer to the high school module. An important new tool to help further integrate the CHKS with school improvement efforts is the Staff School Climate Survey, required as of fall 2004. Call your CHKS Service Center for further information.
ABBREVIATIONS AND DEFINITIONS

**Agencies**
- CDC: U.S. Centers for Disease Control and Prevention.
- CDE: The California Department of Education.
- CBEDS: California Basic Education Data System compiled by the California Department of Education.
- LEA: Local Education Agency, such as a school district or county office of education.
- Title IV: The federal Safe and Drug-Free Schools and Communities Act, part of the No Child Left Behind Act.
- TUPE: California’s Tobacco Use Prevention Education program.

**Surveys**
- CSS: The biennial California Student Survey (also known as the Biennial Statewide Survey of Drug and Alcohol Use Among California Students or the Attorney General's survey). Last conducted in the fall/winter of 2007-2008.
- CSSA: The California Safe Schools Assessment, a state-mandated program that requires all LEAs and school sites to collect and report the incidence of specified crimes to the California Department of Education.
- MTF: The national Monitoring the Future Survey, sponsored by the National Institute of Drug Abuse. The foremost and oldest national survey of student drug use; conducted annually.

**Drugs and Drug-Related Behaviors**
- AOD (ATOD): Alcohol (tobacco) and other drugs.
- Alcoholic Drink: One can/bottle of beer or wine cooler, glass of wine, mixed drink, or shot glass of distilled spirits (liquor).
- Binge Drinking: Refers to consuming five drinks or more in a row on the same occasion. The CHKs and YRBS measure this behavior over the past 30 days; the CSS and MTF, over the past two weeks. Also referred to as episodic or occasional heavy drinking.
- Illicit Drugs: Drugs other than alcohol or tobacco, such as marijuana.
- Inhalants: Drugs that you "sniff" or "huff" to get high, such as glue, gas, gasoline, paint fumes, aerosol sprays, poppers, and laughing gas.
- Methamphetamines: Refers to crystal meth, speed, ice, crank, or any amphetamine.
- Polydrug Use: Use of two or more different drugs on the same occasion. Measured for the past six months.
- Smokeless Tobacco: Chew or snuff, such as Redman, Levi Garrett, Beechnut, Skoal, Bandits, or Copenhagen.
- Tobacco: Includes both smoked and smokeless tobacco.