

weapons violence bullying alcohol tobacco **safety** drugs HIV/AIDS suicide depression pregnancy gangs truancy **healthy kids** alcohol tobacco AIDS suicide truancy weapons **well-being** alcohol tobacco suicide pregnancy drugs **exercise** violence bullying alcohol tobacco **nutrition** drugs HIV/AIDS suicide depression gangs truancy weapons **RESILIENCE** drugs **Safe Schools** HIV/AIDS suicide pregnancy gangs violence bullying alcohol tobacco **PREVENTION** HIV/AIDS suicide depression pregnancy gangs

Weapons violence tobacco drugs HIV **RESILIENCE** pregnancy gangs violence bullying drugs HIV/AIDS suicide depression **exercise** gangs violence bullying drugs HIV/AIDS pregnancy gangs **PREVENTION** truancy weapons violence bullying alcohol AIDS **Safe Schools** tobacco truancy suicide depression pregnancy gangs drugs weapons violence bullying alcohol tobacco drugs HIV/AIDS suicide tobacco **safety** depression gangs truancy weapons **well-being** alcohol tobacco suicide depression pregnancy gangs violence bullying alcohol tobacco gangs **nutrition** pregnancy drugs HIV weapons alcohol tobacco depression suicide

weapons violence tobacco HIV/AIDS drugs **exercise** depression gangs truancy weapons bullying alcohol suicide depression **RESILIENCE** gangs truancy violence bullying drugs HIV/AIDS depression pregnancy gangs truancy weapons violence bullying alcohol tobacco **Safe Schools** pregnancy gangs truancy weapons violence bullying alcohol tobacco **PREVENTION** tobacco truancy HIV/AIDS suicide depression alcohol pregnancy gangs **drug-free** violence bullying healthy kids **well-being** truancy weapons **safety** HIV/AIDS suicide pregnancy gangs violence bullying drugs HIV/AIDS truancy depression

Weapons violence bullying drugs **PREVENTION** alcohol tobacco drugs suicide HIV/AIDS depression truancy weapons gangs **safety** bullying alcohol AIDS suicide depression drugs pregnancy gangs **Safe Schools** truancy weapons violence bullying alcohol tobacco **well-being** drugs HIV/AIDS suicide depression gangs **drug-free** truancy weapons violence **nutrition** HIV bullying alcohol truancy suicide pregnancy gangs **RESILIENCE** gangs truancy weapons violence **healthy kids** tobacco drugs HIV/AIDS suicide depression pregnancy

Palo Alto Unified Elementary 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:

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PREFACE

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 set of questions. Districts may also add their own questions of local interest. The survey 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.¹ The primary focus of the survey 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 the survey.

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:

- school connectedness;
- 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; and
- perceived safety and frequency of, and reasons for, harassment and bullying at school.

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

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 1.1 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, 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.

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).

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>.

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CALIFORNIA

healthy kids

SURVEY

Palo Alto Unified

Elementary

2009-2010

Key Findings



CALIFORNIA
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RESOURCES

WestEd 

Section A

1. Introduction

Table A1.1

CHKS Survey Modules Administered

Survey Module	Administered
A. Core (Required)	x
B. Resilience & Youth Development	
C. AOD Use & Safety	
D. Tobacco	
E. Physical Health	
F. Sexual Behavior	
G. Custom Questions	
H. District After School Module	

Table A1.2

Student Sample Characteristics

	Grade 7
<i>Student Sample Size</i>	
Target Sample	270
Final Number	231
Average Response Rate	86%

* NT includes continuation, community day, and other alternative school types

2. Sample Characteristics

Table A2.1

Age of Sample

	Grade 7 %
12 years or younger	87
13 years old	12
14 years old	0
15 years old	0
16 years old	0
17 years old	0
18 years or older	0

Question HS/MS A.3: How old are you?

Table A2.2

Gender of Sample

	Grade 7 %
Male	51
Female	49

Question HS/MS A.4: What is your sex?

Table A2.3

Ethnic/Racial Characteristics of Sample

	Grade 7 %
American Indian or Alaska Native	3
Native Hawaiian or Pacific Islander	1
Asian	22
Black or African American (non-Hispanic)	4
Hispanic or Latino/Latina	10
White or Caucasian (non-Hispanic)	61
Other	19
Selected more than one	15

Question HS/MS A.6: How do you describe yourself? (Mark all that apply)

Note: Column totals may add up to more than 100% because students could select more than one response.

Table A2.4***Living Situation***

A home with both parents
A home with only one parent
Other relative's home
A home with more than one family
Friend's home
Foster home, group care, or waiting placement
Hotel or motel
Migrant housing
Shelter
On the street (no fixed housing), car campground
Other transitional or temporary housing
Other living arrangements

Question HS A.9: What best describes where you live? A home includes a house, apartment, trailer, or mobile home. (Mark all)

Table A2.5***Grades, Past 12 Months***

	Grade 7 %
Mostly A's	36
A's and B's	44
Mostly B's	9
B's and C's	6
Mostly C's	1
C's and D's	3
Mostly D's	0
Mostly F's	1

Question HS A.125/MS A.107: During the past 12 months, how would you describe the grades you mostly received in school?

Table A2.6

Truancy, Past 12 Months

	Grade 7 %
0 times	86
1-2 times	8
A few times	2
Once a month	0
Once a week	0
More than once a week	3

Question HS A.126/MS A.108: During the past 12 months, about how many times did you skip school or cut classes?

Table A2.7

Days Home Alone During Normal School Week

	Grade 7 %
Never	39
1 day	31
2 days	15
3 days	12
4 days	3
5 days	0

Question MS A.102: In a normal school week, how many days are you home after school for at least one hour without an adult there?

Table A2.8

Migrant Education

	Grade 7 %
Yes	2
No	71
Don't know	27

Question HS A10/MS A9: In the past three years, were you part of the Migrant Education program or did your family move to find work in agriculture?

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INTRODUCTION

The Palo Alto Unified School District administered the Elementary School California Healthy Kids Survey (CHKS) in 2009-2010 to fifth-grade students. The CHKS is a comprehensive youth health-risk and resilience data collection service, sponsored by the California Department of Education (CDE). The elementary survey was designed to measure behaviors and, particularly, the factors that influence them. The survey items were selected with the assistance of an advisory committee of experts based on their value to schools and committees for monitoring and understanding behavior and for program planning. 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. Table 1 summarizes the characteristics of the sample and students that completed the survey.

Although this report provides information on the percent of students that are involved in risk behaviors, equally important is the percent of students who did not engage in them. While it is essential to identify and address student problems, we should not lose sight of the positive behaviors and attitudes of most youth. About half the CHKS is devoted to assessing youth assets or resilience traits that have been found to promote success and help prevent the onset of health-risk behaviors even in the presence of high-risk environments.

Why Was the Survey Conducted?

The district conducted the CHKS in order to assess and reduce student violence, substance use, and other health-risk behaviors, and to monitor its progress in promoting youth well-being and school success. The CHKS is an integral part of efforts to improve student academic performance, enhance youth assets, and promote positive youth development.

It provides critically important information to guide the development of programs targeting specific risk behaviors, as well as the fostering of youth assets and resilience that protect against these behaviors. It helps schools and communities understand when and how risk behaviors develop by assessing youth prior to the ages at which they usually occur, as well as identifying early initiators. Research demonstrates that delaying the onset of risk behaviors reduces the level of involvement and related problems. Used in conjunction with the middle and high school CHKS, the results can guide and support the implementation of comprehensive K-12 prevention and health programs.

More specifically, the survey meets the requirements of the federal Safe and Drug Free Schools and Communities Act (SDFSCA) and contains seven 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 Table 2.

How Was the Survey Conducted?

To have uniform results across schools, the state requires that all participants survey a representative number of fifth-grade students following standard administration guidelines. 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, and required the written consent of a parent or guardian.

Who Took the Survey?

Table 1 presents the number of fifth-grade 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 to produce representative data. The lower the percentage of participating students below 60%, the less representative and useful are the results. The student participation rate was high enough to meet the survey's minimum goal. Therefore, the information collected appears to be a good reflection of student behavior.

The biggest challenge for the district in meeting the survey requirements was ensuring that the parents/guardians filled out and returned the consent forms. Research shows only a small proportion of parents will not approve participation, but no student could take the survey without their approval in writing.

Table 1. Description of Participating Students

	Grade 5
Number of Students Surveyed	651
Percent of Students Participating (%)	66%
Gender	
Males	52%
Females	48%

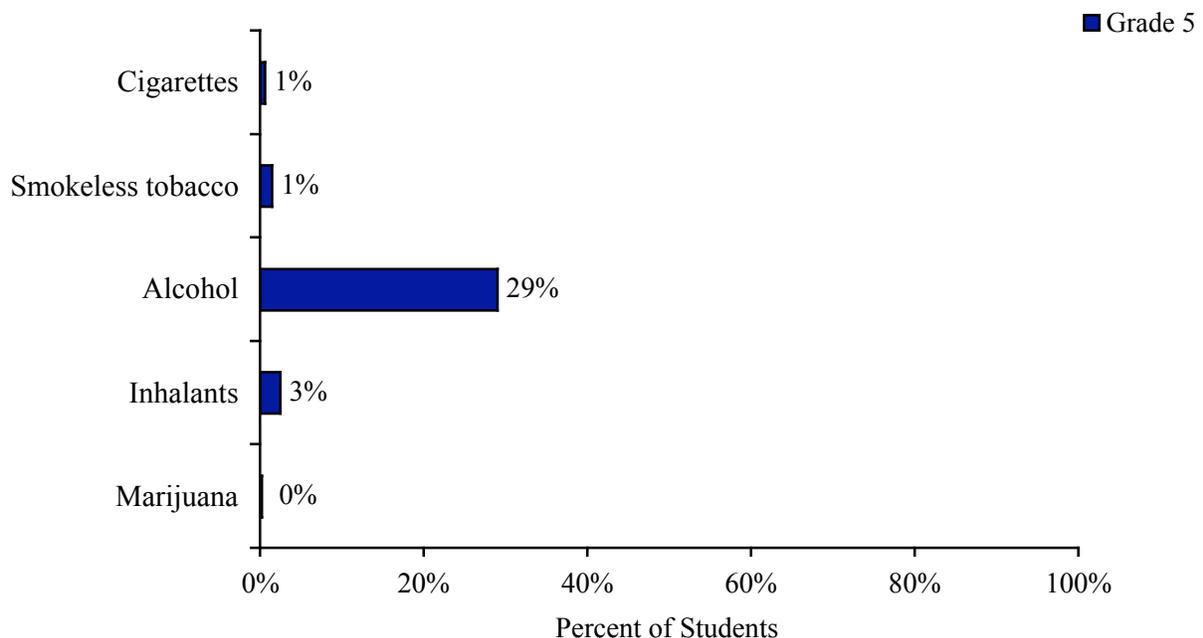
ALCOHOL, TOBACCO, AND OTHER DRUG USE

Overall Prevalence

Chart 1 shows the overall lifetime prevalence (have ever used) of the four most popular psychoactive substances among preadolescents: tobacco (cigarettes and smokeless tobacco), alcohol, inhalants, and, to a lesser extent, marijuana. This provides a gauge of the overall drug environment in the school and community and when use onset begins. Although many students may have only experimented with substance use one time with a small amount, those that do at such a young age are especially at risk of later involvement. As indicated in Table 2, the results for cigarettes and marijuana are the performance indicators CDE has recommended for monitoring progress in reducing substance use.

- **Alcohol** is by far the most widely used substance across grades.
- **Cigarette** smoking is normally experimented with in preadolescent years. In the U.S., tobacco use is considered the main preventable cause of death.
- **Inhalants** (glue, paint fumes, etc.) are the most widely used illicit drug among youth because of their ready availability.
- **Marijuana** use is much less common.

Chart 1. Ever Used Alcohol, Tobacco, or Drugs



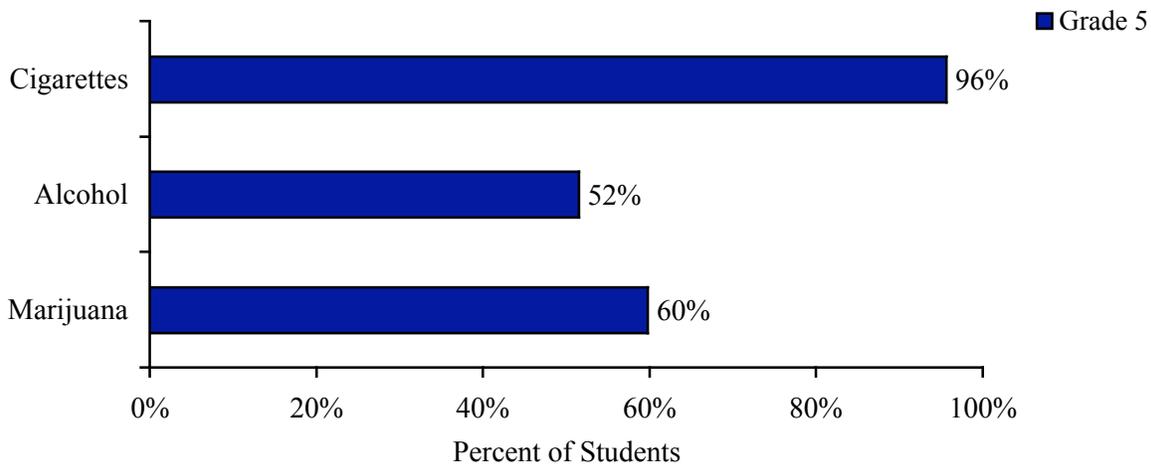
Alcohol and Drug Use at School

Special attention should be paid to the proportion of students who use alcohol or other drugs at school. (See Table 3.3 in the Technical Report.) This not only indicates a high degree of early drug involvement but also of estrangement from school. This behavior threatens the students' education and positive development.

Perceived Harm

Chart 2 provides the results for students who viewed using cigarettes, alcohol, and marijuana as bad for a person's health. The relationship of knowledge, attitudes, and behavior is complex. Attitudes toward drug use among elementary-age youth are generally very negative. Among secondary school students, state and national trend data indicate that perceptions of high harm or risk are associated with lower use rates over time. This indicates that realistically communicating drug hazards is an important strategy of a comprehensive prevention program, particularly if youth do not see regular drug use as harmful.

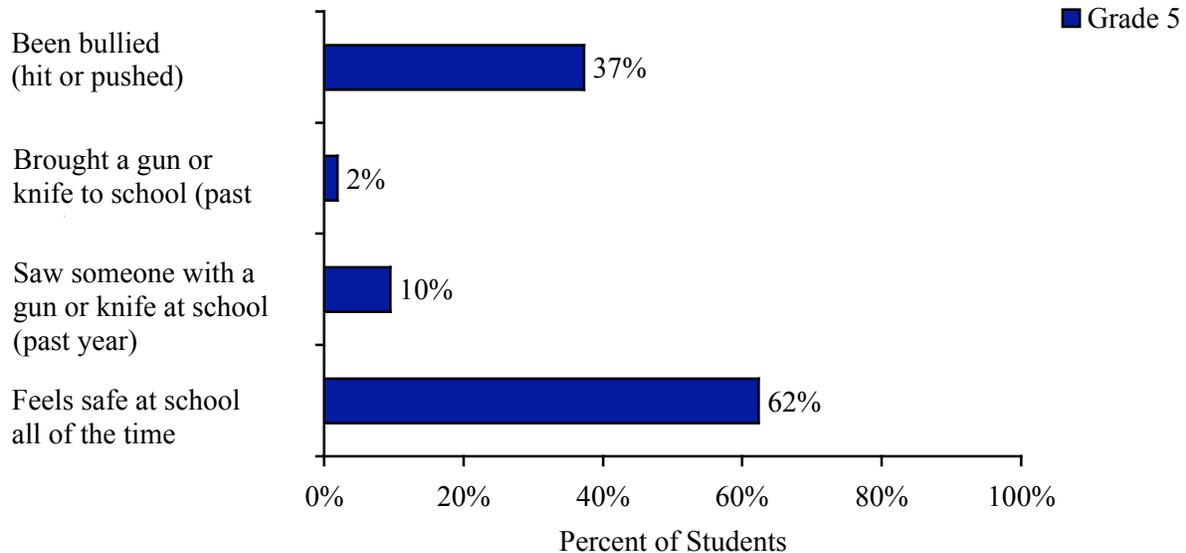
Chart 2. Perception that Use of Cigarettes, Alcohol, or Marijuana is Very Bad for a Person's Health



VIOLENCE AND SAFETY

Violence and safety have emerged as some of the American public's biggest concerns about schools. Chart 3 illustrates different aspects of the school environment relating to violent behavior (carrying weapons), victimization (being bullied), and perceived safety.

Chart 3. Violence and Safety-Related Behavior and Experiences



Bullying

Pushing behavior is a form of harassment or bullying commonly used among elementary level youth. It is a form of abusive behavior that instills a sense of vulnerability, isolation, and fear in its victims. If pushing behavior is confronted with conflict, it can lead to physical fights, possibly with weapons. If not confronted, it can lead to isolation from friends, family and school, depression, and engagement in risk behaviors such as drug use.

Carrying Weapons at School

Much of the public concern over school safety is focused on guns and other weapons. The immediate accessibility of a weapon often is the factor that turns a violent altercation into a lethal event. Chart 3 includes the percentages of students who carried weapons to school and who saw someone with a weapon there. The former is likely lower than the latter because many students might see a weapon brought by only one student. The observation rate provides a sense of the effect of carrying weapons on the school environment.

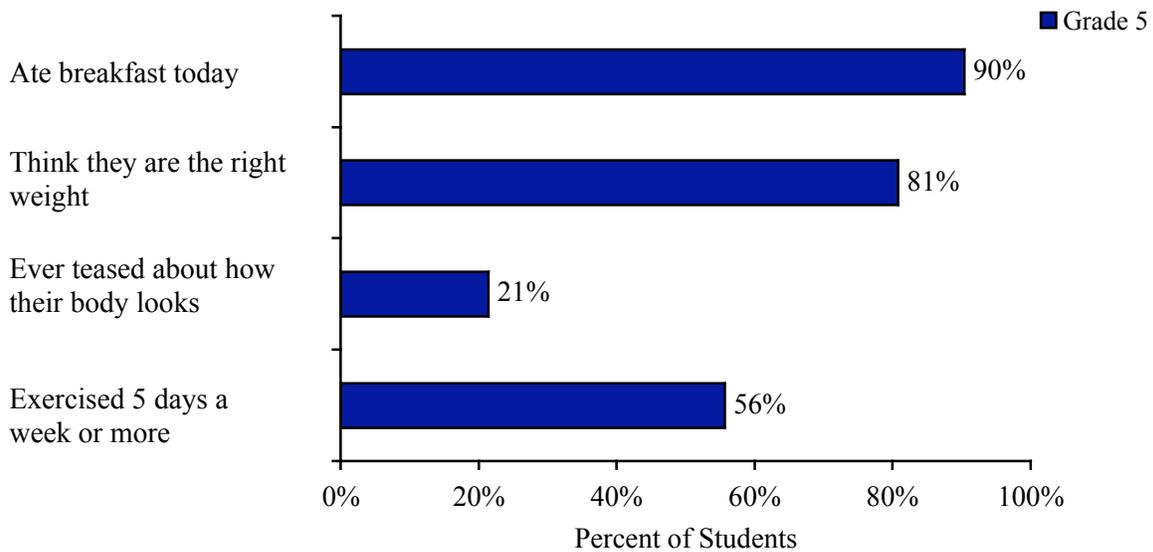
Perceived Safety

The CHKS asks students how safe they felt in school. The mandate for safe schools does not mean merely "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 and in life.

PHYSICAL HEALTH

Good nutrition and physical health are among the most overlooked contributors to school success and positive youth development. They enable youth to make the most of the opportunities that are offered to them.

Chart 4. Physical Health



Eating Habits

Lifetime dietary patterns are established during youth. To assess nutritional habits, the CHKS asks elementary students if they had breakfast the day of the survey. Students who attend school hungry or malnourished may experience compromised health, well-being, and school performance.

Body Weight and Image

The CHKS asks students how they felt about their body weight and whether other kids tease them about their body. A poor body type or image can negatively influence self-esteem and school performance. Both obesity and overemphasis on thinness have negative mental and physical health consequences that can lead to perceptions of a distorted body image and thus distorted and unhealthy eating habits. Students who are teased about their body can become isolated from friends, family and school, depressed and vulnerable to risk behaviors.

Physical Activity

Students were asked how many times they exercised. Regular physical activity is associated with the prevention of disease, lower risk behavior rates, better school performance, and less mental health problems. The fitness of children can be significantly affected by the physical education programs in public schools.

RESILIENCE INDICATORS

Too often, surveys gauging youth health and behavior only gather data on risky behaviors. This presents a picture of youth as deviant individuals that need to be changed. The CHKS balances the picture by providing data on essential external (environmental) protective factors and internal (innate) strengths that research has shown to promote resilience and help students overcome adverse situations and difficult circumstances. Understanding the factors that make some students seem invincible to negative social influences will help schools and communities develop strategies to ensure that *all* youth are provided the needed supports for academic success and positive youth development. This is especially important at this formative age.

The CHKS assesses two types of resilience indicators:

- For each of three environments in a youth's life (school, home, and peer), the CHKS asks about the existence of the three principle *Protective Factors* that research has shown to be essential for promoting resilience and positive youth development. Also known as developmental supports or environmental assets, these three resilience principles are: (a) Caring Relationships, (b) High Expectations, and (c) Opportunities for Meaningful Participation. These are the supports and opportunities that meet the basic development needs of youth and are associated with both healthy development—lack of involvement in health-risk behaviors—and academic success.
- In addition, three *Internal Strengths*, also known as developmental outcomes or resilience traits, are assessed: Empathy, Problem Solving, and Goals and Aspirations. These internal strengths are those found to protect a young person from involvement in health-risk behaviors. They are the natural developmental outcomes for youth that experience homes, schools, communities, and peer groups rich in the external assets or developmental supports and opportunities.

Chart 5 provides the percentage of students that were categorized as *High* in Total External assets in the school, home, and peer environments. The total asset score is derived by averaging the scale scores for each of the three resilience principles. The individual scores for the school environment are performance indicators and are provided in Table 2. This provides a measure of how asset-rich or asset-poor the youth are in your community. The goal is for all youth to score high in all categories.

When students report low levels of environmental protective factors, they report higher levels of health-risk behaviors. Similarly, when they report higher levels of these protective factors, they report lower rates of involvement in these risky behaviors. This pattern is illustrated in Chart 6 using the results collected statewide from seventh graders for marijuana use and total assets; similar results were found for each of the three assessed environments and across various risk behaviors.

Chart 5. Percentage of Students Scoring High in Protective Factors in their Home, School, and Peer Environments

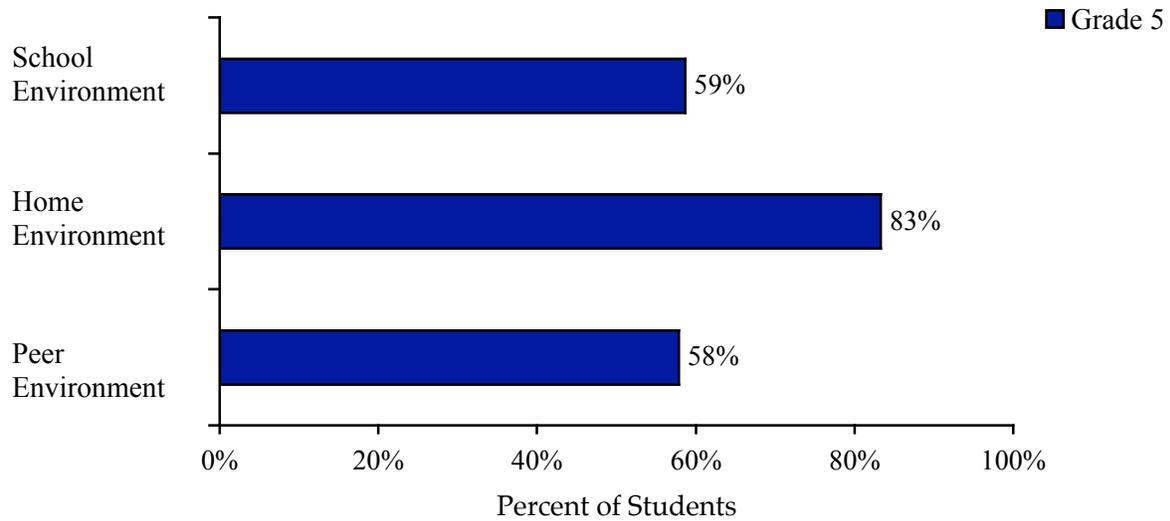
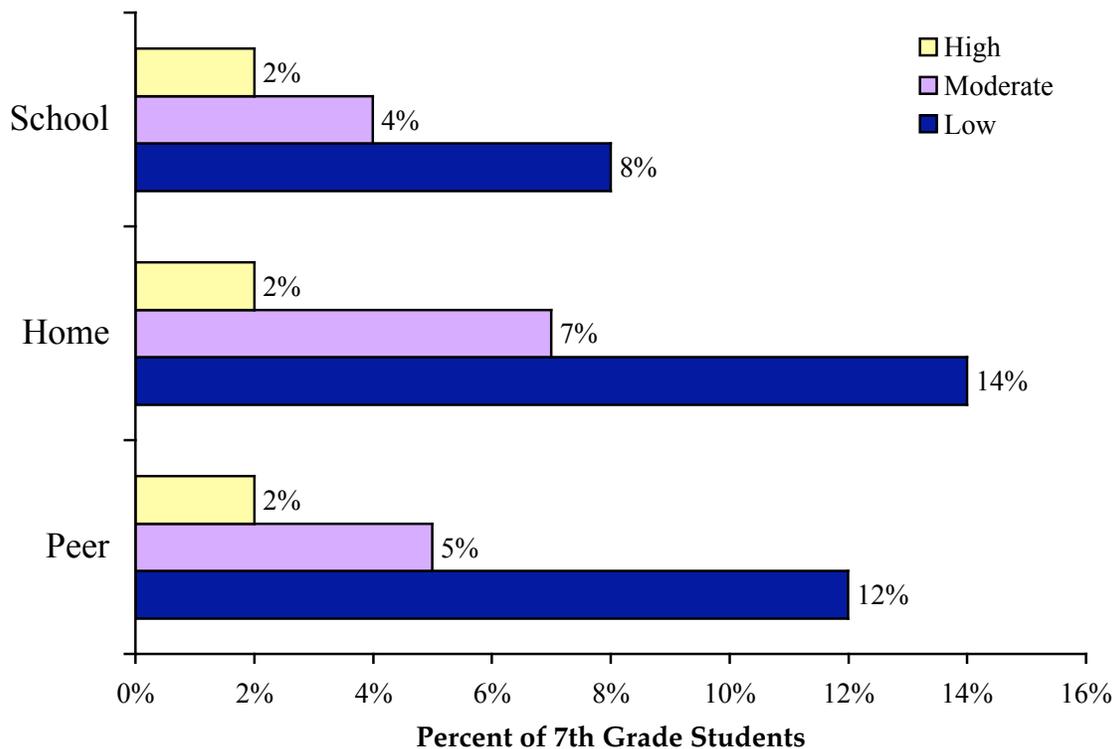


Chart 6. Percent of 7th graders using marijuana at school by level of Protective Factors.



PERFORMANCE INDICATORS

Table 2 lists the results for all the seven Performance Indicators selected by CDE to monitor progress in reducing drug use and promoting protective factors, as required by the No Child Left Behind Act of 2001. In some cases, the wording of the elementary questions differ from the wording of the Performance Indicators, as shown in the Table.

Table 2. Fifth Grade Results for SDFSCA/TUPE Performance Indicators Recommended by CDE

Performance Indicator	5th Grade %
Tobacco Use	
The Percentage of students that have ever used cigarettes*	1%
Drug Use	
The percentage of students that have ever used marijuana**	0%
Safe Schools and Violence	
The percentage of students that feel very safe at school***	62%
Protective Factors	
The percentage of students that report high levels of caring relationships with a teacher or other adult at their school	62%
The percentage of students that report high levels of high expectations from a teacher or other adult at their school	60%
The percentage of students that report high levels of opportunities for meaningful participation at their school	16%
The percentage of students that report high levels of school connectedness	73%

*Includes students who smoked part of a cigarette and those who smoked a whole cigarette.

**Excludes students who answered "I don't know what marijuana is"

***Elementary students are asked how often they feel safe at school rather than how safe they felt, as in the secondary survey. This table reports those students who responded, "Yes, all of the time."

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
MODULES (SECONDARY)	A. Core (required) B. Resilience and Youth Development (school and community scales required) C. AOD Use & Safety (Violence & Suicide) D. Tobacco (required by state TUPE grantees) E. Physical Health F. Sexual Behavior (Pregnancy and HIV/AIDS risk) G. Custom questions
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 Modules A and B (school & community asset scales) Module D by state TUPE grantees 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, every two years
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
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 starting fall 2004)
CONTRACTOR	WestEd —Gregory Austin, PhD, Project Director
INFORMATION	California Department of Education: 916.319.0920 Website: 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 are randomly selected. If a district has over 10 schools per grade, schools are 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 assessment and report the results to the community. Districts that have state competitive high school 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? 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. The CHKS provides data to assess and monitor the health-risk and problem behaviors that research has identified as *important barriers to learning*, particularly those related to school climate. The CHKS also assesses perceived *school assets*, an indicator of school connectedness which research has consistently identified as promoting school success. The school asset data can be interpreted as an

indicator of school connectedness. The full CHKS report lists all the school-related questions. An important new tool to help further integrate the CHKS with school improvement efforts is the Staff School Climate Survey. Call your CHKS Service Center for further information.

ABBREVIATIONS AND DEFINITIONS

Agencies

TUPE	Tobacco Use Prevention Education.
SDFSCA	Safe and Drug Free Schools and Communities.
NCLB	No Child Left Behind Act of 2001 which requires schools assess student substance use and violence and identify indicators for monitoring their progress in reducing them.
CDE	California Department of Education.

Surveys

Drugs and Drug-Related Behaviors

AOD (ATOD)	Alcohol (tobacco) and other drugs.
Inhalant	Drugs that you "sniff" or "huff" to get high, such as glue, gasoline, paint fumes, aerosol sprays, poppers, and laughing gas.
Prevalence	The overall rate (percentage) that a behavior is reported.
Lifetime Use	Any use that ever occurred in a respondent's lifetime.
Current Use	Any use 30 days prior to the survey.
Participation Rate	The percent of students who participated in the survey divided by the number of eligible students.
Caring Relationships	Supportive connections to others in the student's life who model and support healthy development and well-being.
High Expectations	Consistent communication of direct and indirect messages that the student can and <i>will</i> succeed responsibly.
Meaningful Participation	Involvement of the student in relevant, engaging, and interesting activities with opportunities for responsibility and contribution.
External Assets	Supports and opportunities to youth in the School, Home, Community and Peer Environments.
Internal Assets	Factors in the School, Home, Community and Peer Environments which foster self-esteem.
Resilience	Fostering young people's emotional, spiritual, and social well-being, in addition to their academic success.
Youth Development	External and internal assets associated with positive youth development and resilience.