

FY24 SUPTRS BG Pre-Post Survey Training

8.24.2023



policy • partnership • prevention



Agenda

- **Pre-Post Survey Overview**
 - Who uses them?
 - Why do they matter?
- **Pre-Post Survey Instructions**
 - How to access surveys
 - How to implement surveys
 - Obtaining Parental Consent
 - Tips & tricks
- **Pre-Post Survey Discussion**
 - Grantee discussion
 - Q&A

Pre-Post Survey Overview

Who uses pre-post surveys?

Grantees providing direct curriculum-based prevention education (e.g., LifeSkills, Positive Action, Strengthening Families) are required to conduct pre- and post-surveys with program participants prior to, and after, the completion of each program cohort.

Pre-Post Survey Overview

Value for ODP

The surveys are used to inform ODPs overall annual SUPTRS BG Primary Prevention program evaluation:

- Helps ODP understand which EBPs are being impactful
- Allows us to demonstrate the positive impact of SUPTRS BG funds to the State Legislature

Value for Grantee

After the program year providers will receive a summary outcome report of their programs' survey results:

- Helps grantees understand and demonstrate the impact and value of their program
- Outcomes can be used to strengthen an organizations SUPTRS BG application in future years
- Data can be used to support efforts to receive grant funds from other sources

Pre-Post Survey Overview

Types of Surveys

- Younger Youth Grades 4-5
- Older Youth Grades 6-12
- Parent Survey (English and Spanish)

Survey Formats

- Paper
- Online, Computer-Based

YOUTH SURVEY: Grades 4-5 Survey Timeframe: Pre Post

REGION <RG> <PROVIDER>-----> <PROGRAM>----->

This survey is designed to give us information about your health knowledge, attitudes and behaviors. Please answer all of the questions honestly. Your answers are confidential – no one will ever know how you answered. Please bubble in the response that best matches your answer. Do not put your name on this form.

Please completely fill in the bubble for your answer: Like This: ● NOT Like This: ☒ ☓ ☙

How often do you do the following...	Never	Sometimes	Most of the time	All the time
1. Try to be a good friend?.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Treat others the way you like to be treated?.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Think about how others feel?.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Respect others?.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How wrong do you think it is for someone your age to...	Not wrong at all	A little wrong	Wrong	Very wrong
5. Drink beer, wine or liquor (alcohol)?.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Smoke cigarettes?.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Smoke marijuana?.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Use electronic vapor products (including e-cigarettes, vape pen, or JUUL)?.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How much do you think people might hurt their bodies if they...	Not at all	A little bit	More than a little bit	A lot
9. Drink beer, wine or liquor (alcohol)?.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Smoke cigarettes?.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Smoke marijuana?.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. Use electronic vapor products (including e-cigarettes, vape pen, or JUUL)?.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please continue on the other side →

Please tell us how easy or difficult each of the following is for you:

	Very easy	Easy	Difficult	Very difficult
13. Knowing ways I calm myself down.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. Knowing the emotions I feel.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. Knowing what my strengths are.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. Knowing when my feelings are making it hard for me to focus.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. Setting goals for myself.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. Getting along with my classmates.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. Respecting a classmate's opinion during a disagreement.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. Thinking about what might happen before making a decision.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21. Knowing what is right or wrong.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

In the past 6 months...

	Yes	No
22. Have you talked with at least one of your parents/caregivers about the dangers of tobacco, alcohol, or drug use?.....	<input type="radio"/>	<input type="radio"/>
23. Have you and any of your parents/caregivers discussed family rules or expectations about using tobacco, alcohol, or drugs?.....	<input type="radio"/>	<input type="radio"/>

Please answer the following question at the end of the program only:

	Yes	No
24. Did you also take this survey at the beginning of the program?.....	<input type="radio"/>	<input type="radio"/>

25. What grade are you in? <input type="radio"/> 4th <input type="radio"/> 5th	26. What is your gender? <input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Other <input type="radio"/> I prefer not to say	27. What is your race/ethnicity? (Mark all that apply) <input type="radio"/> White <input type="radio"/> Black or African American <input type="radio"/> Hispanic or Latino/a <input type="radio"/> Native Hawaiian/Other Pacific Islander <input type="radio"/> Asian <input type="radio"/> American Indian/Alaska Native
--	--	--

Thank you for taking part in this survey!

Pre-Post Survey Instructions

How to Access Surveys

Paper surveys were shared via email and can be accessed through your Grantee Portal on Neighborly

Online, computer-based surveys are provided upon request. Please complete this form to request online computer-based pre-post surveys: <https://form.jotform.com/IdahoODP/survey-request-form>

Pre-Post Survey Administration Instructions

Survey Administration Instructions, Example Survey Templates, Parental Consent Information, and other resources can be found at: <https://prevention.odp.idaho.gov/provider-information/>



Substance Use Prevention, Treatment, and Recovery Services (SUPTRS)
Block Grant for Primary Prevention Programs

Pre-Post Survey Administration Instructions

Table of Contents

Survey Administration for Prevention Programming	1
When to Administer the Surveys	2
Who to Survey	2
Obtaining Parental Consent	2
Instructions for Paper-Based Pre-Post Surveys	3
Steps for Administering Paper Surveys	3
Reminders and Recommendations for Proper Survey Implementation	5
Survey Duplication	5
Survey Completion	5
Shipping Surveys	6
Instructions for Online Computer-Based Pre-Post Surveys	7
How to Request Online Computer Based Surveys	7
How to Administer Online Computer-Based Surveys	7

Survey Administration for Prevention Programming

To evaluate its investment in substance misuse prevention programs, the Idaho Office of Drug Policy (ODP) requires prevention programming grantees to conduct assessments on the prevention-related attitudes and behaviors of its program participants. These participants are assessed twice: once in advance of receiving the prevention programming (pre-test) and once after completion of the programming (post-test).

Working with professional evaluators, the staff at ODP developed surveys to assess different populations (younger youth, older youth, and parents) and procedures to administer the surveys consistently. Providers can implement surveys with program participants either on paper or online. Following the general instructions, two sets of procedures follow: one for paper surveys and one for online surveys.

Questions or concerns related to the survey forms or procedures should be directed to Jessie Dexter at jessie.dexter@odp.idaho.gov.

Pre-Post Survey Instructions

Who to Survey

If possible, ODP recommends that you survey all participants in curriculum-based programs (youth and parent participants).

If your program serves more than 300 participants and you are not able to survey all of them, notify ODP and we will randomly select cohorts for you to survey. Providers with less than 300 program participants will be asked to administer the survey to all participants.

Participants in Grades 3 and under should not be surveyed.

Pre-Post Survey Instructions

When to Survey Program Participants

Pre-Surveys

Pre-surveys should be administered BEFORE program participants are exposed to ANY programming. This is crucial because it ensures that we are measuring what program participants knew, thought, and believed prior to being exposed to your prevention program.

Post-Surveys

Post-surveys and retrospective surveys (i.e., the Parenting Survey) should be administered AFTER program participants are exposed to ALL programming. This is crucial because it ensures that we are measuring what program participants know, think, and believe after being exposed to your prevention program.

Pre-Post Survey Instructions

Obtaining Parental Consent

Parental consent must be obtained before the implementation of youth surveys. Prevention providers administering the SABG grant funded student surveys have the option of using passive parental consent or active consent, depending on the preferences of stakeholders.

- Under **passive consent** procedures, parents/guardians inform the program facilitator only if they do not want their child to participate in the survey process (opt out).
- Under **active consent** procedures, parents/guardians inform the program facilitator only if they do want their child to participate (opt in).

Keep a list of youth whose parents have declined their participation in the survey and be sure to administer the survey only to youth whose parents have not declined their participation.

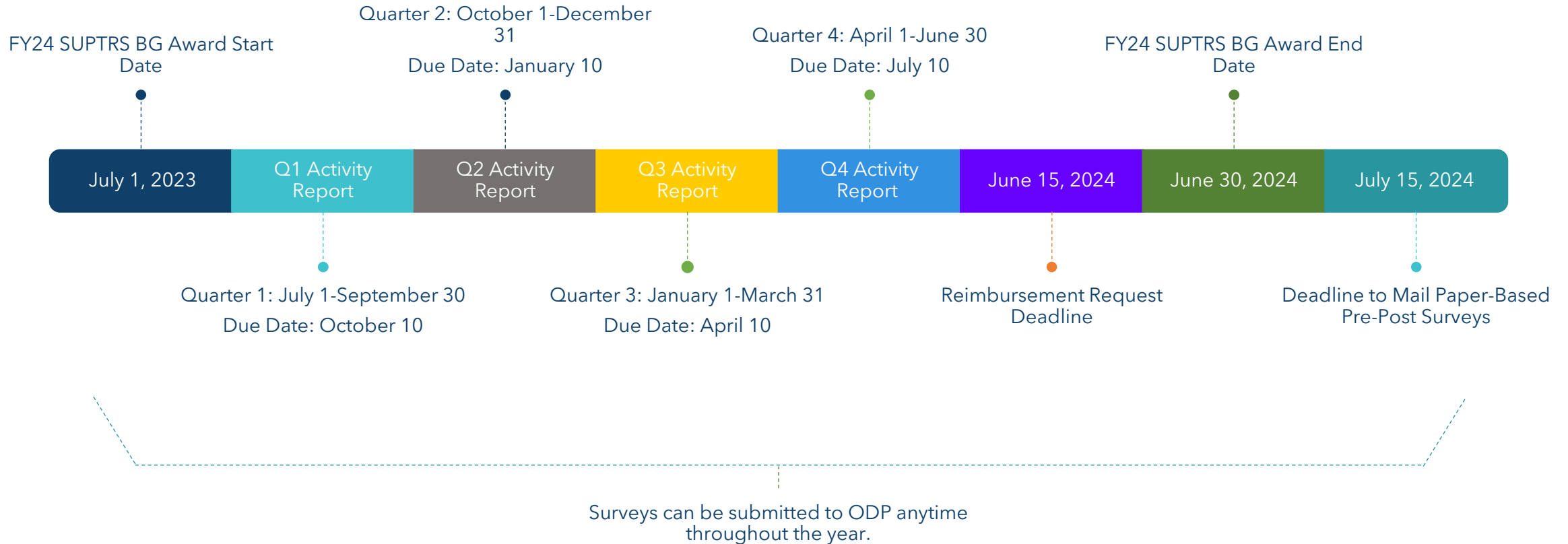
Before implementing youth surveys: providers should review the [**Parental Consent Policy on Idaho Substance Abuse Prevention Programs Serving Minors**](https://www.prevention.odp.idaho.gov/provider-information). Located at www.prevention.odp.idaho.gov/provider-information

Pre-Post Survey Instructions

Submitting Completed Surveys to ODP

- Grantees will submit completed paper-based surveys to ODP by mail. ODP will then count the surveys and send them to our contracted evaluator to be scanned and processed.
- ODP Mailing Address:
Jessie Dexter
Idaho Office of Drug Policy
304 N 8th St. STE 455
Boise, ID 83720
- Please note: when grantees use online surveys the program participants will submit their survey responses online. Grantees do not need to print them off and mail them as paper surveys.
- To receive an evaluation report from ODP, providers must submit both pre- and post-surveys. Ideally grantees submit the same amount of pre- and post-surveys (i.e., 100 pre-surveys and 95 post-surveys).

FY24 SUPTRS BG Timeline



Tips & Tricks

- We ask that you **copy all two-page forms as double-sided** (so that two pages fit on one piece of paper). However, if you do not have this capability and must create surveys on two pieces of paper, please ensure that any staples are placed within the top left margin of the survey, in the margins, away from any text.
- Make sure that the surveys remain **anonymous** and that participants **do not** write their names on their surveys.
- For youth surveys, print a blank copy of the survey, fill in the **Survey Timeframe** in the top right corner (Pre at the beginning of the program, or Post at the end), and then duplicate/copy the surveys for respondents to complete the rest.
- If using a copier, we recommend making all copies for a site/cohort from one **original print-out**, not copies of copies.
- Make all copies on **regular WHITE** copy paper. Please do not use colored paper, as it will cause the scanner to read all responses as marked.

Tips & Tricks Continued

- Respondents may fill in bubbles using a **dark-colored ballpoint pen or pencil**. We do not recommend using markers or felt-tip pens (which bleed through the paper, potentially causing errors to responses on the opposite side), crayons (which can jam the scanner), or highlighters (which are too light to be recognized by the software).
- We **do not** recommend that respondents complete surveys while eating or immediately after an art project, or on surfaces which may have food or art supplies that can get on the survey. Anything that sticks to the paper (e.g., food smudges, bits of paint) will cause the survey to jam in the scanner, potentially destroying the survey and/or scanner. This includes no white-out to correct a response. If an error is made, respondents can cross out the incorrect response and mark their intended response.
- Make sure to only use the **FY2024 surveys** provided by ODP
- We recommend that programs track delivery of all survey packages mailed to ODP and email your counts of the number of surveys sent, so we can corroborate them.

Grantee Questions & Discussion

Contact Information: Jessie Dexter, jessie.dexter@odp.idaho.gov

