

**The  
Database Builder  
Planning  
Workbook**

**Draft 3**

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# 1 Introduction and General Overview

## 1.1 Purpose of this Workbook

This workbook has been designed to facilitate the planning process for using the Database Builder software. It poses a series of questions that your organization should answer before configuring the software, and provides examples to clarify the purposes of each step in the process. Once you have completed this workbook, your system administrator will be ready to set up the database system on a computer.

**Documents and other resources.** Resources useful for the setting up, administration and use of the system include:

- ?? The Database Builder Planning Workbook (this document)
- ?? The Database Builder Administrator's Guide—explains how to set up the software
- ?? The Database Builder User's Guide—provides a step by step guide for those who will be entering data into the system and includes a glossary of terminology
- ?? The online Help system linked from within the Database Builder software
- ?? The Database Builder Multimedia Training CD-ROM—provides training and tutorials for using the software (in development)

**Conventions in this document.** In this document, concrete examples of concepts are provided throughout to aid your organization in planning. It is assumed that your organization or agency has been tasked with the development of evaluation systems for one or more program. Many examples are provided that are appropriate for State agencies as they plan evaluation systems for various branches of their prevention systems, but the software and planning steps in this manual are also appropriate for Federal-level or multi-state implementations, specific programs within a state, large non-profit organizations planning for their program evaluation needs, or single smaller organizations planning for a simpler evaluation system.

Throughout this document the Database Builder program is abbreviated as DbB. A complete set of forms shown in the body of this document are included in *Appendix A—Staffing*, to be used for reproduction purposes. The process in this document is presented as a series of steps to be followed in a particular order, but your group may choose to reassign steps to other groups or to reorder some of the steps, as needed.

## 1.2 Uses of the Database Builder

The Database Builder tool provides benefits for organizations in various stages of evaluation preparedness. For example, it provides support for organizations with previously adopted, purchased or developed instruments, to:

- ?? store and maintain instruments in a repository
- ?? optimize web-based data entry procedures, e.g. to decentralize data entry
- ?? store and aggregate datasets
- ?? print instruments
- ?? produce reports

For agencies that are just beginning to organize data collection, it can:

- ?? provide standardized measures and instruments through the repository
- ?? provide a set of core questions to use throughout the data collection effort as well as support specific measures appropriate for subgroups, to facilitate data aggregation

The DbB software provides a secure data entry system that can be accessed from any web-enabled computer within your organization, thus facilitating data collection and analysis at low cost over large geographic regions.

### **1.3 Staffing Requirements**

The Database Builder can be used within an office with minimal staff; you probably have staff already capable of performing the required tasks within your organization. Typically, you will need to form a decision-making group consisting of one or more people to can use this workbook and make the decisions related to setting up the Database Builder system. This decision-making group should consist of the project administrator, project evaluator, technical assistance staff person, and any other key decision-makers. A complete list of the “ideal” staffing, including required skills, is supplied in *Appendix A—Staffing*. Once you have the software up and running, you will need someone designated as the *system administrator* to maintain users and settings, as needed.

## **2 Setting Your Evaluation System Goals and Objectives**

### **2.1 Examples of Goals and Objectives**

Working with the decision-making team to articulate your organization’s goals and objectives for using the Database Builder will help you design the system in such a way that it provides optimal support for your program needs. Most likely your goals have already been established for you by your State. Developing objectives towards these goals will allow you to identify the specific tasks that need to be completed in order to reach the goals.

Throughout this manual examples will be provided for each of the planning steps discussed. For purposes of illustration we have invented a fictitious state agency, the State Office of Prevention Services (SOPS). This agency’s organization chart is shown in figure 2. SOPS mission is to “promote healthy communities by reducing alcohol and other drug problems by developing, administering, and supporting prevention programs.” They have decided to adopt the Database Builder software to help them meet specific accountability goals. Specific goals and objectives that have been established, related to data collection systems, include:

**Goal 1: support the data collection and analysis needs for the Strategic Prevention Framework State Incentive Grants related to specific goals of the framework, which include:**

- ?? **Increase abstinence from drug use/alcohol abuse of youth age 12 to 18 by 25 percent within five years;**
- ?? **Increase perception of drug use as harmful (ages 12-17) by 25 percent within three years.**

Objective 1.1: develop a community-assessment instrument that can be administered to a representative sample of youth and young adults from communities across the state to identify gaps in prevention services, within three months.

Objective 1.2: create a timeline, sampling strategy and analysis plan for this community-assessment instrument, within six months.

Objective 1.3: as service gaps are discovered, further refine or develop instruments that will explore the breadth and depth of these gaps over the next five years.

Objective 1.4: review the PPG Required Measures/Outcomes Instrument contained in the DbB Instruments Repository; add any measures determined needed, within three months.

Objective 1.5: create a timeline, sampling strategy and analysis plan to obtain a baseline measure of 30-day use among youth ,within six months.

Objective 1.6: review the Substance Abuse and Mental Health Services Administration National Outcome Measures (NOM) to determine required measures and review current PPG Required Measures/Outcomes Instrument and any other measures we have added to make sure that NOM objectives are met, within six months.

And so on for each of the divisions/programs for the state for which they have decided to use the DbB.

## 2.2 Establishing Your Reporting Needs

One common process used by evaluators and database system designers, in order to ensure that a database system is capable of providing the information that is desired, is to create a set of report examples (or templates), including sample results. In this way, when the system is programmed, variables that will be needed in order to sort, filter and group data according to these reporting needs can be set up, making the reporting possible.

The Database Builder software is capable of being used to meet any arbitrary reporting need, though it may require some custom programming by your agency to create these reports. Generic reporting is provided within the

Desired Outcome/Domain	Performance Measure
Abstinence from Drug Use/Alcohol Abuse	30-day substance use (non-use/use reduction)
	Availability of ATOD
	Perception of drug use as harmful Attitude toward use (Perception of drug use as wrong)
Increased/Retained Employment or Return to/Stay in School	School attendance ATOD-related suspensions/expulsions Drug-related workplace injuries
Decreased Criminal Justice Involvement	Drug-related crime
Increased Stability in Family and Living Conditions	Parent participation in prevention activities
Increased Access to Services (Service Capacity)	Number of persons served by age, gender, race, and ethnicity
Increased Social Supports/Social Connectedness	Under development
OMB Required Outcome/Domain	Performance Measure
Cost Effectiveness	Increase services provided within cost bands
Use of Evidence-Based Practices	Total number of evidence-based programs and strategies funded by SPF SIG

**Table of Prevention Measures as reported in the SPF SIG RFA**

system; at the time of this writing, these features are still in development, and will be described in more detail later. The DbB also has a variety of included reports (also in development at this time) that have been designed to meet the basic reporting needs of most groups. Some of the reports that are being developed as part of DbB will be designed to meet specific reporting needs of States and agencies as required by funding sources. For example, Federal data reporting requirements, principally derived from the National Outcome Measures (see *Appendix H—National Outcome Measures*), require certain measures to be reported yearly. Within the DbB, the Government Performance and Results Act of 1993 (GPRA) instruments provide a means of collecting and reporting data required by congress. These figures are used for comparing actual performance with the projected levels of performance as set out in the performance goals of the agency’s annual performance plan. Because each agency’s funding level is determined by the President and Congress, it is in your best interests to provide accurate and timely data to be included in these reports.

The DbB software has made the data collection and reporting process as streamlined as possible. Included within the system are three Center for Substance Abuse Prevention (CSAP) GPRA instruments (see *Appendix E—Measures and Instruments in the Database Builder*): the CSAP GPRA Client Outcome Measures for Discretionary Programs—Youth Form (2002), CSAP GPRA Participant Outcome Measures for Discretionary Programs—Youth Form (2005), and CSAP GPRA Participant Outcome Measures for Discretionary Programs—Adults (2005). All of these meet the requirements for reporting by the National Outcome Measures. Other measures, as available, will be added to the Database Builder’s Measures and Instruments Repository.

Other Federal reporting requirements, which vary by funding agency, may include process measures, additional (or other) outcome measures, and perhaps other data such as cost or

ABSTINENCE FROM DRUG USE/ALCOHOL ABUSE 30-Day Substance Use (Non-use/reduction in use) (DATA SOURCE: CSAP Core Measure, ATOD 30-day Use, CMIR2)			
Trends in 30-Day Prevalence of Daily Use of Various Drugs for Eighth, Tenth, and Twelfth Graders			
Year	2004	2005	change
Marijuana/Hashish daily			
8th Grade	0.7	0.8	+0.1
10th Grade	2.2	2.8	+0.6
12th Grade	3.6	4.6	+1.0
Alcohol, Any daily use			
8th Grade	0.9	1.0	+0.1
10th Grade	1.9	1.9	+0.0
12th Grade	3.9	3.4	-0.5
Been Drunk, daily			
8th Grade	0.3	0.2	-0.1
10th Grade	0.4	0.6	+0.2
12th Grade	1.2	1.3	+0.1
5+ drinks in a row			
8th Grade	14.5	14.5	+0.0
10th Grade	23.6	24.0	+0.4
12th Grade	28.2	29.8	+1.6
Cigarettes, any daily use			
8th Grade	8.8	7.3	-1.5
10th Grade	14.6	12.3	-2.3
12th Grade	19.4	18.6	-0.8
1/2 pack+/day			
8th Grade	3.6	3.4	-0.2
10th Grade	7.6	8.3	+0.7
12th Grade	11.2	10.4	-0.8
Smokeless tobacco, daily			
8th Grade	1.9	1.2	-0.7
10th Grade	3.0	2.7	-0.3
12th Grade	3.9	3.6	-0.3
<b>Sample Report (template only, data not real) for SPF                      SIG (note: this report is not available from within the DbB system)</b>			

fidelity measures. CSAP has a data gathering and reporting system specific to gathering some of process data, called the Minimum Data Set (MDS). This system, which is a different package than the DbB, runs on a computer server configured with exactly the same operating and middleware software as required by DbB, making it possible to run both programs on one system. More information on the MDS can be obtained from your CSAP Program Officer or online at <http://prevtech.samhsa.gov> (see details in the MDS link under the Evaluation tab).

CSAP has committed to completing the development of the DbB, including and the measures and reports as appropriate for State needs. It is anticipated that as new Federal reporting requirements emerge, the appropriate measures, instruments and reports will be included in the software. Free updates to the software will continue to be provided to the groups using the system, and technical support will continue as long as development continues. Even after the software is completed, updates to measures and instruments are likely be funded by CSAP, as the use of Database Builder will help the agency receive clean data sets to support analysis of programs. Of special interest to States at the time of the writing of this manual are the data gathering and reporting requirements as SAMHSA transitions from the current Block Grant funding system to a Performance Partnership Grant (PPG) system. The goal of the change is to provide States increased flexibility in return for improved accountability based on performance. The PPG reporting requirements are projected to measure more detailed, qualitative and consistent data sets, with an emphasis on outcomes. However, at the time of this writing, the exact measures that will need to gathered and reported are not completely determined. As these measures move from draft to final version, they will be added to the DbB system.

**Step 1.a:** Gather the documents related to specific measurable goals and objectives which fall within your organization's responsibilities, such as grant goals, strategic plans, initiatives, planning documents, etc.

**Step 1.b:** Organize these documents, pulling out those items that are related to measurable goals and objectives, group all like items, and create a master document for planning purposes.

**Step 1.c:** Gather documents related to reporting requirements for your programs, such as those required by the Federal agencies from whom you obtain funding and those required by your State.

**Step 1.d:** create sample reports containing the type of data you will want to be able to obtain from your evaluation system.

When you have completed step 1, you will have a master document containing relevant goals and reporting requirements, including samples of reports you expect to be able to generate from the system.

Begin by reviewing the reports that are currently defined within the DbB system and planning how you will use these reports. Keep in mind that what data these reports show will

depend on who runs them; the security level of the person running the report will determine how much data is shown in the report (see *Setting Up Security Levels and Groups* on page 14 for more information on how security levels affect the data this is viewable within a report).

You may discover that the set of reports provided by the software, combined with the reports that are generated by data analysis outside of the DbB system (e.g. from the evaluator as they analyze the data in a statistical package), are sufficient for all of your organization needs. At the time of the writing of this draft of the manual, the development team is working on a plan for creating a more generalized reporting system for the software, with options for generating reports for any data in the system; however, the timeline for completion of this modification is not yet available. If you need reports that are not part of the system, there are two options for obtaining these reports; one is to submit a request to the DbB team to upgrade the software to include the requested report(s), and the other is to develop the reports outside of the DbB system.

Either of these options require that you define the missing reports first by creating a report sample (or template). Your report examples/templates should be designed by the various members of your agency decision-making team. Also include, as report designers, your “in the trenches” staff; for example, what reports might be useful to those that are doing the data entry in your organization? Ask them. You may want to consider sending sample reports for review to anyone in your agency or associated with your data collection effort (e.g. your Program Officer, State officials, etc.) that might have need of reports, and request feedback on them before you begin meeting to design your evaluation system.

As you design reports, you will want to answer the questions: who needs this data, for what purposes, at what frequency, with what level of detail, in what format(s)?

If the reports you have created may be of general interest to other users of the system, send a copy of the report to the developers at [spms-mis-support@qrc.com](mailto:spms-mis-support@qrc.com). It will be reviewed and considered for inclusion in the system. However, don't expect these reports to appear rapidly: the development process can take considerable time, and the request for approval to add a report to the system also takes time. If you need a report in the near future, this is not the best option for obtaining the report.

Alternately, you can use software designed for database reporting. Various reporting software packages are available commercially, and can be used for web-displayed real-time reports (that is, generated by users on data currently in the system at any time they want to see the report), or for reports that are published (generated from the data and then emailed or otherwise published for users of the system). Crystal Report Writer is an example of a commonly used report tool that can be used to develop report templates that are web-based, and can be run real-time by whomever you grant report access. This report writing and generation can access the data within the Database Builder, but the reporting software is outside of the Database Builder system. Benefits to this option are that you can create templates for a wide range of needs of the users of your system, and provide them access to run these reports at any time. A disadvantage to this approach is that you will need someone on your staff trained in using the tool, or you will need to hire an outside developer to create

the templates for you. Another disadvantage is that you will have to create a system for providing access to the reports.

Another option is to create report templates that use data downloaded from the system, such as creating graphs and tables from within your statistical analysis software. A benefit of this process is that you can review all data and reports before they are distributed, and then select who will see the reports. A potential disadvantage to this method is that you must run these reports manually, offline from the database, so you will only be seeing snapshots of the data at the points in time you choose to run the reports. *Appendix G—Reporting Software* provides some ideas for reporting tools that can be integrated into the DbB system.

### **2.3 Evaluation Goals and Objectives**

Based on the mission and vision of your organization and the specific goals for programs and projects devised to carry out this vision, establish your evaluation system goals and objectives. Your goals and objectives can be very detailed and specific, or more general at this point. Once you have established these goals and objectives, you will need to task out the details and assign personnel to tasks. In many cases you will have already refined some of the tasks associated with these goals (for example as part of a proposal for funding from Federal sources). It is important to have a balanced team while setting these goals and objectives; there will certainly be many questions worth exploring for which answers can be provided by good instruments and evaluation plans, but the cost of performing overly extensive evaluation will outstrip any group's ability to collect and analyze the data. It is most important, of course, to establish those goals and objectives that match specific project or program goals. Your evaluator(s) will need to be very active in this process. *Appendix C—Commonly Used Evaluation Designs* provides a brief overview of evaluation designs and pros and cons of the common designs.

**Step 2:** list your evaluation goals

**Step 3:** for each goal listed, create objectives

**Step 4:** for each objective, create a set of tasks and determine who will be responsible for the task

Examples:

Objective 1.1: develop a community-assessment instrument that can be administered to a representative sample of youth and young adults from communities across the state to identify gaps in prevention services, within three months..

Task 1: determine what measures are needed for the evaluation effort (four weeks)  
[agency decision-makers]

Task 2: determine what existing instruments are available to meet these needs (four weeks) [evaluators]

Task 3: develop a consent and confidentiality plan for the data collection effort (four weeks) [evaluators]

Objective 1.2: create a timeline, sampling strategy and analysis plan for this community-assessment instrument, within six months.

Task 1: establish timeline for baseline and follow up surveys (during first three months) [agency decision-makers with assistance of program directors from each effected program]

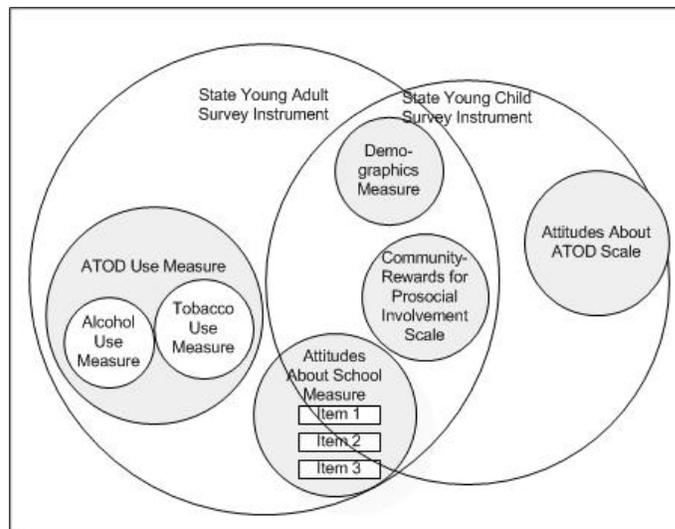
Task 2: develop a sampling strategy that will allow you to obtain statistically significant results from surveys (four weeks) [evaluators]

Task 3: develop an analysis plan for the surveys (eight weeks) [agency decision-makers with assistance of program directors from each affected program]

## 2.4 Determining Appropriate Measurements

Within the Database Builder tool, single statements, queries or stem choices that a respondent will answer in a defined way are referred to as *items*. For example, a statement item might be “I have made a final decision to stay away from marijuana.” The participant must then pick one of the three possible responses: “True,” “False,” or “I Don’t Know”. Items are collected into a group and referred to as a *measure*. Any measure may contain one or more item. A measure may have psychometric properties of interest to the outcome of the evaluation. Or, it may be used to collect other data, such as demographics, cohort or grouping data, and other values of interest to the evaluation. Many pre-defined measures used in prevention research have been included in the Database Builder.

*Instruments* refer to a group of measures, arranged in a definite order. The instrument would correspond to the questionnaire or survey packet that is administered to a group of respondents. More than one unique instrument can be made by selecting a set of measures and grouping them into an instrument (see Figure 1.)



**Figure 1. Sample Instruments and Measures**

The Measures and Instruments tools built into the DbB software are designed to provide:

- ?? a repository (library) of instruments that are in the public domain and that have been extensively tested with various populations;

- ?? a repository of measures that are useful in prevention evaluation, that have been shown by previous research to be useful measures of factors related to prevention practices;
- ?? a set of tools for editing, copying and adding new items to measures; and
- ?? a set of tools for editing, copying and adding new measures to instruments.

If you have not done so already, your group will need to:

- ?? Research which measures and instruments are already available within the DbB and which of these will be useful in your evaluation efforts.
- ?? Review instruments that you are planning to use with the DbB and gather the documentation required (the items, item responses, coding conventions organized by measure that you will be using in your instruments). This information will be needed before the instruments can be coded.
- ?? Review the instruments you plan to use and look for commonalities (such as “demographics,” “30 Day Use,” etc.) that could be developed into measures that are shared across instruments. The more shared measures you can use across instruments, the easier it will be at a later date to do data analysis across performance units.

**Step 5:** organize your measures and instruments. The work table below may be useful in organizing the items that you will be entering into the DbB system.

Measure: \_\_\_\_\_

No.	Name	Question Type				Question Text	Help Text	Code-book	Required		Var Name	Ans. Code or Lower Limit	Answer Text or Upper Limit
		numeric	Text\Essay	Multiple Choice	Scale				Check All That Apply	yes			

A spreadsheet version of this form might be useful, as it would provide space for the text that is required. This form is provided in *Appendix B—Forms*, in a landscape format with additional space for text. Following is an example of the form filled out. You may be able to print out a list of variables, question text, etc. from your current data system and then add additional information, such as measure grouping. You should need to use this form only for those questions which are not already part of an instrument that you are planning to use, for example to add new questions to an existing survey instrument.

Measure: Individual/Peer - Favorable Attitudes Toward Alcohol

Name	Q Type	Question Text	Help Text	Code book	Req?	Var name	Ans Code or lower limit	Answer Text or upper limit
Favorable attitude to drink	Multiple Choice	How wrong do you think it is for someone your age to drink beer, wine or hard liquor (for example, vodka, whiskey or gin) regularly?	Consider any amount of drink (one drink, many drinks) in your answer. Consider drinking under any condition (at home, with friends).		yes	favdrink	1 2 3 4	Very wrong Wrong A little bit wrong Not at all wrong
Number of drinks per week	Numeric (integer)	On the average, how many alcoholic drinks do you have in a week?	Count any drink—wine, beer, liquor.		no	numdrnk	0	70
Teen Drink Scale	Scale	On a scale of 1 to 3, how much do you agree with the statement "teens should not drink alcohol."			no	Drnkscl	1 2 3	Don't agree at all Don't agree or disagree Agree strongly
Last Drink Description	Text	Please describe the last time that you had an alcoholic drink, if applicable--were you with other teens or your family? Was it a party? Were adults supervising?	Please type in a short answer that describes the scene of your drinking. Do not include names of any person present.		no	drnkscn	0	500 char

**Name**—refers to a short name for the question which describes the content for the question.

**Question Type**—the type of question (e.g. text, multiple choice, etc.)

**Question Text**—the text prompt that is used to solicit a response.

**Help Text**—the additional explanation for the question that can be used to further explain what is meant by the question. This is optional. For on-line questionnaires and surveys, this text can be viewed by the user if they need additional help understanding the question.

**Codebook**—explains the coding choices for the answer. Optional.

**Required**—a yes/no field that determines if the question is required. If no, the person filling in the data can leave that blank; if yes, the question must be answered before the record can be entered into the database.

**Variable Name**—the variable name which will be used for storing the answer. This name will be used in downloads of data into statistical software packages, such as SYSTAT and SPSS. Each variable name must be different (unique). Short, descriptive variable names are best. You may need to determine the maximum size of the variable names supported in your statistical software package before naming variables. Variable names should contain only alphanumeric characters without punctuation or spaces.

**Answer Code or Lower Limit**—for variables that will accept any numeric value, enter in the lowest value accepted (optional). For multiple choice or scale questions, enter in the answer code value (see example following). These values will be assigned to the variable

when the data is entered in (e.g. if the choice made is “Very Wrong”, the variable favdrink will hold the value 1).

**Answer Text or Upper Limit**—for variables that will accept any numeric value, enter in the largest value accepted (optional). For multiple choice or scale questions, enter in the answer text (see example following). These values will be displayed in the multiple choice or scale for the question responses.

In the software, the questions will be entered into an online version of the form:

**Add/Edit a Question**

Question Type: Multiple-Choice

Name \*: Favorable Attitudes Toward Drink

Question Text \*: How wrong do you think it is for someone your age to drink beer, wine or hard liquor (for example, vodka, whiskey or

Help Text: Consider any amount of drink (one drink, many drinks) in your answer. Consider drinking under any condition (at home,

Codebook: Very Wrong--you think it is very wrong for a person your age to drink, no matter what the circumstances

Required: No

SPSS/SAS Variable Name \*: favdrink

You may create as many answer choices as you wish.

Answer Code	Answer Text
1	Very wrong
2	Wrong
3	A little wrong
4	Not wrong at all

Add Five More Answers

## 2.5 Categorizing Measures

Each measure you add to your copy of the measures repository should be categorized into one or more categories to assist staff in locating the measure. Some ideas of categories include:

- ?? General Assessment Domains (Community Factors, Environment Factors, Family Factors, Individual/Peer Factors, Institutional Factors)
- ?? Content Categories (e.g. Biological Individuality, Cultural/Ethnographic, Economic Factors, Environmental Conditions, Geographic Factors, Health/Illness Status, Life Event & Historical Context, Organization and Organizational System Factors, Psychosocial Functions, Religion/Spirituality)
- ?? Source of Information (e.g. Key Informant, Self Report, Non-Person Measurement Device)

- ?? Measure Sets (e.g. CSAP Core Measures, GPRA, State Block Grant, SYNAR)
- ?? Service Domain (e.g. Prevention of Substance Abuse, Promotion of Mental Health, Treatment of Mental Health Problems/Disorders, Treatment of Substance Abuse)
- ?? Targeted Age Group (Parents of Young Children, Elementary School Youth, Teenagers, Young Adults, Older Adults)
- ?? Targeted Settings (School, College, Home, Prisons)

**Step 6:** make a list of the categories that you will use for measures. For each category, decide on a set of values, as in the examples above. Also, note whether the category choices are exclusive or not—for example, you may have measures that are part of more than one different targeted setting, and so “targeted settings” should be non-exclusive for your evaluation system.

**Step 7:** make a table that includes categories and the measures that fall into the categories. Note that some measures may fall into more than one category.

## 2.6 Developing Instruments and Instrument Categories

Instruments are collections of measures.

**Step 8:** to prepare for data entry into your system, you should develop and fill out a chart that lists the measures to be included in each of the instruments that you will be using, similar to the one provided below:

Instrument Name	Description	Measures Included

**Step 9:** develop appropriate instrument categories. Instrument categories can be independent of measure categories. The purpose of developing and using instrument categories is to make it easier to search for instruments appropriate for different purposes. Examples of categories include:

- ?? Associated Projects or Programs
- ?? Associated Funding Sources
- ?? General Assessment Domains (Community Factors, Environment Factors, Family Factors, Individual/Peer Factors, Institutional Factors)
- ?? Evaluation Design (pre/post-test random assignment, longitudinal survey, etc.)
- ?? Evaluation Type (outcome evaluation, process evaluation, etc.)
- ?? Evaluation Target (parents, young children, etc.)
- ?? Measure Sets (e.g. CSAP Core Measures, GPRA, State Block Grant, SYNAR)
- ?? Service Domain (e.g. Prevention of Substance Abuse, Promotion of Mental Health, Treatment of Mental Health Problems/Disorders, Treatment of Substance Abuse)
- ?? Targeted Settings (School, College, Home, Prisons)

Make a list of the instrument categories you will be using for your system, similar to the one above, and decide whether the categories are non-exclusive. Below is a sample table that includes an instrument, categories, and measures:

Name	Description	Instrument Categories	Measures Included
Youth Attitudes toward ATOD	This instrument is to be used with high school youth and was designed as an online form. It examines attitudes towards ATOD use and patterns of use.	Targeted Setting: High School, Evaluation Target: High School Students, Evaluation Type: Outcome, Service Domain: Prevention of Substance Abuse	<ol style="list-style-type: none"> <li>1. Demographics</li> <li>2. Individual/Peer-rebelliousness Scale</li> <li>3. Individual/Peer-attitudes towards alcohol</li> <li>4. Individual/Peer-attitudes towards tobacco</li> <li>5. Individual/Peer-attitudes towards illicit drugs</li> <li>6. ATOD 30-day use</li> </ol>

### 3 System Administration Setup

#### 3.1 Setting Up Security Levels and Groups

The Database Builder software is designed to make it easy for you to manage secure access to data entry and retrieval from the data systems. Data security is built into the system and is based on two concepts: user security levels and user groups. By setting up a security hierarchy and assigning databases and users to the various levels, you control what data each user has access to. By creating groups with rights to different features of the system, and assigning users to these groups, you determine what functions each user can access. Together, these two features can be used to establish which data sets users may read, report upon, enter, edit or be denied access to on your system.

**Step 10:** the simplest method of organizing the security is to begin by creating an organizational chart for the individuals/groups that will be requiring access to the system. An example is shown in figure 3.

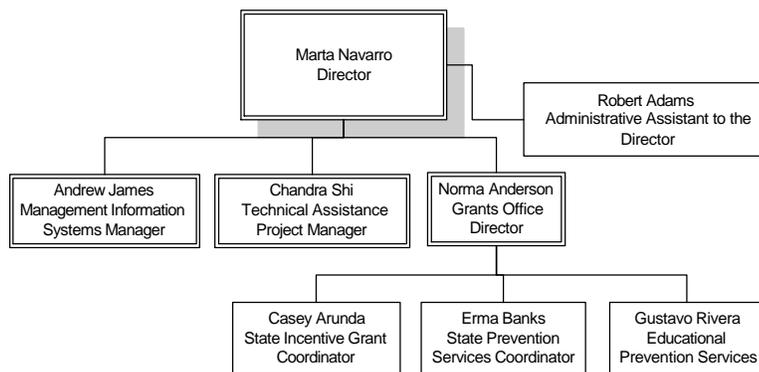


Figure 2. SOPS Org Chart.

##### 3.1.1 Setting Up Groups

**Step 11:** next, think about the groups of people within each level of the org chart that will need to be given access. Consider: what features will each person or group of people need to have access to, and what datasets, instruments and measures will they need?

Users can be given access to specific instruments and measures. They can also be given access to specific cohorts and measurement points, which will be discussed in a later section

of this manual. However, it is easiest to create *user groups* that define the type of access that a larger group of users will have to specific features of the software, and define a set of *security levels* to which the various measurements and instruments will belong, and later modify these rights for those specific users that are exceptions to the rules.

Create a set of user groupings. A “grouping” is used to assign a level of access to program features. Users can be assigned to a group, then later switched to another group. For each group, you will need to specify level of access to various features. There are three levels of access: disabled (no access), view (read only), and full (read and write access). The following table lists the features:

<b>Group name:</b>			
<b>Enter/Edit Data:</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Enter New Data			
Edit/Review Data			
<b>Create Reports:</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Reports			
Download			
<b>System Administration</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Users			
User Grouping			
Permissions			
Security Levels			
<b>Measures &amp; Instruments</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Measures and Instruments			
<b>Evaluation Plans</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Cohorts			
Measurement Point/Series			

Two groups are essential: the System Group (with full access to all features) and Disabled Group (with disabled access to all features). The former is needed to make sure that someone can maintain the system, the latter is needed to disable users temporarily (e.g. they have taken a leave of absence). Usually, the system administrator and the MIS staff are made part of the system group. Other groups may depend on roles that are used in your organization; below are a few examples:

<b>Group name: Data Entry Clerks</b>			
<b>Enter/Edit Data:</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Enter New Data			X
Edit/Review Data			X
<b>Create Reports:</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Reports			X
Download			X
<b>System Administration</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Users	X		
User Grouping	X		
Permissions	X		
Security Levels	X		
<b>Measures &amp; Instruments</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Measures and Instruments	X		
<b>Evaluation Plans</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Cohorts	X		
Measurement Point/Series	X		

Group name: Evaluators			
Enter/Edit Data:	Disabled	View	Full
Enter New Data			X
Edit/Review Data			X
Create Reports:	Disabled	View	Full
Reports			X
Download			X
System Administration	Disabled	View	Full
Users	X		
User Grouping	X		
Permissions	X		
Security Levels	X		
Measures & Instruments	Disabled	View	Full
Measures and Instruments			X
Evaluation Plans	Disabled	View	Full
Cohorts			X
Measurement Point/Series			X

Group name: Program System Administration			
Enter/Edit Data:	Disabled	View	Full
Enter New Data			X
Edit/Review Data			X
Create Reports:	Disabled	View	Full
Reports			X
Download			X
System Administration	Disabled	View	Full
Users			X
User Grouping			X
Permissions			X
Security Levels			X
Measures & Instruments	Disabled	View	Full
Measures and Instruments		X	
Evaluation Plans	Disabled	View	Full
Cohorts			X
Measurement Point/Series			X

### 3.1.2 Setting Up Security Levels

**Step 12:** now, consider your data. You will be assigning your security levels in such a way that you can compartmentalize data access. Individuals can be given access to only those instruments and measures appropriate for their evaluation needs. Each instrument (and each measure) will be assigned to a single, specific security level. Nest the layers; a given user will have:

- ?? Full access to any data that they have entered into the system (they will be able to read, write and edit the data)
- ?? Full access to any data at any level *lower* (descendant)
- ?? Insert access to a data set at a *higher* (ancestor) level than their own (the user can read, write and edit only their own data at the higher level, but not read, write or edit data of any other user)
- ?? Read only access to data in their same level
- ?? No access to data in any other branch of the security tree

In the example in Figure 3, the *Security Root* has access to all data. *Program Group* has access to *Department of Alcohol and Drug Programs*, *Educational Prevention Services*,

*State Incentive Grant, State Prevention Services and SYNAR, and any of the subgroups within those groups. Within the Department of Alcohol and Drug Programs, there are three additional groups: data entry and two programs. Those working within DADP Program I will not see the data from DADP Program II. Those in the Department of Alcohol and Drug Programs will see all of the data from DADP Data Entry, DADP Program I and DADP Program II, but none of the data from other groups at the same level: Educational Prevention Services, State Incentive Grant, etc.*

<u>Security Root</u>
<u>Program Group</u>
<u>Department of Alcohol and Drug Programs</u>
<u>DADP Data Entry</u>
<u>DADP Program I</u>
<u>DADP Program II</u>
<u>Educational Prevention Services</u>
<u>State Incentive Grant</u>
<u>State Prevention Services</u>
<u>SYNAR</u>
<u>System</u>
<u>Transfer</u>

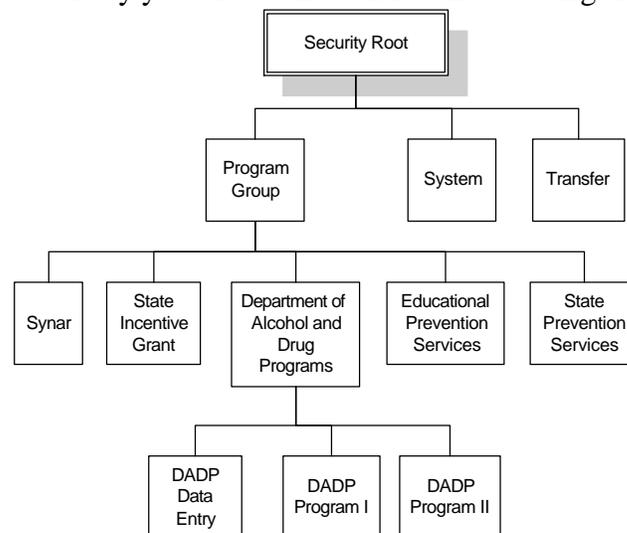
Figure 3. Example of Security Levels as Displayed by the DbB.

If this is confusing, try conceptualizing the security as an organizational chart “tree” (see Figure 4). For those of you that are kinesthetic or visual thinkers, try this: place your pencil tip on the box “Department of Alcohol and Drug Programs.” We will trace the security tree both up and down the branches. Assume you are a particular user that had their security set for that level. In that box your pencil tip is touching—that is, at that security level—you can create, read, write, edit and delete any data that you yourself entered into the system. You can also *read* any data that another user, with security level set to that same box, entered into the system. Moving up the tree (to “Program Group”), you can create records and can read, write, edit or delete their *own* records, but cannot see or modify any other user’s data. Moving up one more level to the Security Root, you have the same rights as for data at the “Program Group” level.

Put your pencil back into the “Department of Alcohol and Drug Programs” box. Move down a branch to a connected box below. You can read, edit, or delete data in that box, regardless of who created the record. So a “Department of Alcohol and Drug Programs” user can enter data, edit data, delete data at the “DADP Data Entry” level, the “DADP Program I” level, and the “DADP Program II” level.

Put your pencil back into the “Department of Alcohol and Drug Programs” box. Move up a branch and then down again to the “Educational Prevention Services” box. You will be unable to see or modify any data there.

In summary: any time your pencil moves *up* that branch from where it starts, you can create records and can read, write, edit or delete your own records, but cannot see or modify any *other* user’s data. Any time your pencil moves *down* that branch from where you start, you have all rights to those data. Any time your pencil *goes up and then down* to a different branch of the tree, you have no access rights to those data (you cannot edit them, enter data into them, or report on them—you cannot see them at all). And data entered into your box by another user is only readable by you. You can override these settings for any individual user.



**Figure 4. Security Tree Example.**

**Why is this concept important?** Understanding how security works for the system will help you optimize the organization of your security to make sure that each person or group requiring access to particular information can gain that access, without compromising data. You will be assigning security levels to users, who can be given access to as many different security levels as they need. You will be assigning security levels to your measures and instruments as well as to cohorts and measurements points.

Create a security tree for your data system. As you develop your tree, think in terms of the data sets that you will be creating and who should be able to see and modify what information. Keep in mind that you can later grant permission to a particular person to have access to any data that you would like that person to have access to by giving them access to that security level, so as you organize it is less important to think of the exceptions and focus instead on the bulk of the users of your system.

**Step 13:** make a list of all of the users of the system. You will need to include the following information:

Identity/Login Information	
* Full Name	Cindi Clerk
* User ID	123456
* Password	
* Retype Password	
* User Grouping	Date Entry Clerks
Notes (4000 characters max)	This is a test entry for a clerk.
Contact Information	
Organization Name	State Prevention Systems
Street Address	123 Any Old Street NW
Mailing Address	
City	Any City
State	WA
Zip Code	90909
Email Address	cindi@mystateprevserv.org
URL	www.mystateprevserv.org
Phone	(800)999-9090
Fax	(999)999-7788
Security Level	
<input type="checkbox"/> Security Root (Administrator Access) <ul style="list-style-type: none"> <li><input type="checkbox"/> Program Group                         <ul style="list-style-type: none"> <li><input type="checkbox"/> Department of Alcohol and Drug Programs                                 <ul style="list-style-type: none"> <li><input type="checkbox"/> DADP Data Entry</li> <li><input checked="" type="checkbox"/> DADP Program I</li> <li><input type="checkbox"/> DADP Program II</li> </ul> </li> <li><input type="checkbox"/> Educational Prevention Services</li> <li><input type="checkbox"/> State Incentive Grant</li> <li><input type="checkbox"/> State Prevention Services</li> </ul> </li> <li><input type="checkbox"/> SYNAR</li> </ul>	
* Security Level	

**Figure 5. Example of the User Information Screen.**

**Full Name**—required. This name will normally be the full or legal name of the user, and does not need to be unique. The maximum length is 120 characters.

**User ID**—required, unique to each user. The maximum length is 16 characters. Your organization may already have a User ID for staff. Use of social security numbers is not recommended.

**User Grouping**—required. This defines the level of access the user has to each module within the application.

**Password**—required. The password does not need to be unique. In the login view, the password being entered is hidden. The password must be at least six characters long and must include at least two of the following: lower-case letters, upper-case letters, numbers, or punctuation. The maximum length is 16 characters.

**Notes**—optional. The maximum length is 4000 characters.

**Contact Information**—optional. Organization name, street, email and mailing address, site URL, phone and fax numbers.

**Security Level**—required. Each user must be assigned to one or more security levels.

### 3.1.3 How Grouping and Security Levels Work Together to Define Access

Following are some examples of security decisions and grouping made by organizations.

**Example 1:** The State of Iowa implemented the Database Builder with 28 recipients. For the needs of their State and their capacity, they decided to implement the security as a single, flat layer. They added all measures and instruments at the root level of the security tree, and placed all the users at the system level. All users were added to the same group, and this group was given full data and report access, and disabled system administration, measures and instruments, and evaluation plan access. In this way, all users have access to the data which they themselves enter for editing and viewing, read-only access to data that other users have entered, and no access to any other feature of the system. Then, they added two system administrators that both have complete access to all features. These system administrators share responsibility for adding and editing users, setting up and maintaining evaluation plans, and maintaining measures and instruments. They also review the data that is entered into the system and oversee the training of data entry people for the system. Their work with evaluation plans and the Database Builder is only one small part of what they do in their positions.

**Example 2: SOPS.** The SOPS group needs a much more complex system than that shown in example 1. This group has sufficient staff to set up and run the DbB on their own servers located in their State Office building. Their MIS staff made sure that the current policies concerning physical access were appropriate, and that the bandwidth, power supply and other requirements for a robust system were met before they decided to house the servers.

Refer back to Figure 4, page 18 to see how the security tree was designed for their project. In addition to the groups provided as examples in this workbook (Program System Administration, Evaluators, Data Entry Clerks, and Disabled) they added the group “Designers”, with full access to the measures and instruments and to cohorts and measurement point/series, and view access to all other features.

Instruments were assigned to the highest level at which they would be used; for example, they had been required by CSAP, their Federal partner, to use the CSAP GPRA Participant Outcome Measures for Discretionary Programs-Youth instrument, a questionnaire addressing

respondent behavior and attitudes toward drug use, for any youth-based projects funded by CSAP. This instrument, already part of the repository for DbB, was placed at the security level “Program Group”, as they intended to use it for the State Incentive Grant projects (as it had CSAP funding), as well as in the Department of Alcohol and Drug Programs (see Figure 4). Though the projects in the Department of Alcohol and Drug Programs did not have CSAP funding, they wanted to use the same instruments across various programs, to make it easier to compare program outcomes during future analyses.

SOPS has evaluators at many different levels and needed to assign them to the appropriate level. Refer to Figure 2 on page 14 for these examples. At the state-level, Marta Navarro, the director, needs to have read access to all data on the system, so she was assigned to the Evaluators group and assigned to the Security Root security level. Her administrative assistant, Robert Adams, is quite experienced with data systems, and will back up the top level system administrator when needed, and was assigned to the Program System Administration group and the Security Root security level.

Norma Anderson, the Grants Office Director, has an administrative assistant, Gloria Stevens, who will be in charge of the data systems for the nine data collection efforts that are coordinated through the Grants Office. Each of the instruments associated with these efforts has been assigned to the State Systems Group security level.

*Now, a quick exercise to keep you on your toes and check your understanding of the security and group structures—imagine this scenario: Norma Anderson needs to have Casey Arunda’s office, Erma Banks’s office, and Gustavo Rivera’s office set up and maintain users, measures and instruments, and evaluation plans. Unfortunately, past experience has taught her that Erma is hopeless when it comes to data systems: every data collection she has touched has gone awry, and she cannot be trusted to do careful entry or review the entry of data in the system, nor to supervise her staff in this area. Four instruments have been set up under the “Department of Alcohol and Drug Programs” security level which falls under Erma’s responsibilities. Fortunately, Gustavo’s program is well funded and furthermore he has a sysadmin, Rebekka, who is very competent and has agreed to do the administration for Erma’s programs. Question: how should you set up Rebekka so that she has the access she needs to perform the system administration tasks for both her department and for Erma’s department? How should Erma be set up? (Note: there is not one correct answer to this exercise, but many. One option is provided at the end of the workbook, but no peeking until you try it yourself!)*

**Example 3: NMADA.** The National Mothers Against Drug Abuse (fictitious) organization—is a small organization with the goal of educating other mothers across the U.S. about the dangers of drug abuse. They have recently obtained a grant that will support them as they gather survey information from families across the U.S.

They began by examining their current resources. Though they have a data server and local area network, their one technology person on staff met with their decision-making team and told them that he did not recommend hosting the system on site for three main reasons: first,

the available bandwidth to the server room was insufficient to handle the “hits” on the system, secondly, with only one person on staff there was not sufficient staff available to set up and maintain the system, and thirdly, there was insufficient physical security to the server room, as many people had keys to the room and it was used for other purposes, making it difficult to assure that no one could obtain a copy of the data when he was not there to supervise. For these reasons NMADA decided to have the system hosted for them offsite.

NMADA has only one survey instrument that they need to maintain at this time. The instrument was assigned to the root level of the security hierarchy, making it accessible to every other security level on the system.

They decided to create four user groups: Program System Administration, Evaluators, Data Entry Clerks, and Disabled, as per the examples in this workbook.

They assigned their one system administrator to the Program System Administration group, along with their one technology staff person. The program administrator and the external evaluator hired by the grant were assigned to the Evaluators group. All other users were added to the Data Entry Clerks group. Security levels were also kept simple. Fifteen entries were created at a level one step below the Security Root, corresponding to the states in which the grant is active: Arkansas, Arizona, California, etc. Each of the coordinators for state projects was assigned to the Data Entry Clerk group, and assigned to the security level named for the state in which they worked.

Using this scheme, they assured that the director and evaluator would be able to create reports on any of the data in the system. The system administrator would be able to resolve any problem with data or users, as would the technical staff person if an emergency arose and the system administrator was not available. The staff at each state site would be able to enter data and report on their own data, but not see data from any other state. In this way the evaluator could choose to report back, in a quarterly newsletter, only that information that had been synthesized and approved for distribution.

## **4 Evaluation Plans**

### ***4.1 Delegation of Tasks***

You will need to establish various structures related to evaluation plans within the system once it has been installed and set up. You may decide that the decision-making process related to evaluation plans needs to be carried out by a different team than the team that has completed the previous steps outlined in this workbook. If so, it might be helpful to that team to have access to the planning documents you created up to this point, as well as a copy of this workbook.

The Database Builder is capable of supporting many different types of evaluation plans. You may want to review some of the basic designs that are described in *Appendix C—Commonly Used Evaluation Designs*.

In this section of the workbook we discuss the planning that is needed to set up groups of subjects/respondents (cohorts) and the planning and organization required for collected longitudinal data sets.

## 4.2 Cohorts

Respondents are the people or organizations that will provide responses to items in an instrument. Subjects are those people or organizations about whom responses are provided to items in an instrument (for example, the mother of a three year old child may provide responses about her child in a survey). Subjects and respondents are often participants in your programs. Cohorts are a group of individuals who share some common characteristic or experience; for example, a birth cohort—a group of individuals born during a particular year or period, a high-risk cohort (as determined by a survey instrument to determine high-risk and low-risk individuals), a treatment cohort—a group that began a treatment at about the same time and received the same treatment (e.g. had the same teachers for the period of time the prevention program was being implemented). Because individuals may be members of several cohorts, it is critical that the defining characteristic of the cohort be made explicit, and individual respondent records created within each cohort. Cohorts must be defined before measurement points (a point in time where a specific instrument is administered to one or more respondents/subjects in a specific cohort) can be defined and before data can be collected.

Each cohort consists of a group of respondents/subjects who share characteristics from the point of view of the evaluation. Each cohort must be associated with one (and only one) security level.

### 4.2.1 Identification Measure

Each cohort requires an *identification measure*; the identification measure is used to capture identification, classification, or cohort grouping data as determined by the evaluation design. Often, the identification measure consists of identifying information that would most likely be the same for a given respondent no matter how many times they filled out a survey. For example, an identification measure for a survey might consist of two questions: When is your birth date? What's your race? The answers to these questions are not expected to change over time.

The evaluator participating in your planning process will be able to explain to your group, in more detail, what identification measures need to be established for your evaluation plan. The measures will be determined, in part, by the way that you would like to be able to disaggregate data for reporting purposes (which is why we emphasize report planning at the beginning of this workbook.) Your evaluator will also be familiar with the literature on prevention research

**Note:** as more States begin using the DbB to collect and report data, CSAP, through the CSAP Data Coordinating Center (DCC), will be able to gather data into larger cells (providing larger *n*'s for analysis) and giving more power to the analysis. In addition, this will allow States to have National norms to compare their own program results against, increasing the capability of the analysis to pinpoint exceptional implementation as well as problem areas.

and will be able to help you create identification measures that will allow to measure the real differences between groups, both before and after treatment.

The identification measure would be used in conjunction with one or more other measures. The questions in the identification measure would only have to be asked the first time the person filled out the survey and not on subsequent surveys, though it can also be set up so that the questions in the identification measure are asked each time, depending on your evaluation design.

It is also possible to set up an identification measure containing no questions, for example when subjects are randomly assigned to a group, and the grouping does not depend on answers to specific questions. In the software, this is accomplished by creating an identification measure containing no questions.

The main benefit of using an identification measure occurs with large cohort groups when the design calls for respondents entering the study at various different times. The identification measure can ensure that each respondent is asked the same set of identification, stratification, and/or demographic questions the first time data is collected from that respondent, without having to ask these questions of every respondent every time data is collected.

Similarly, the identification measure can be used to ask the same set of identification, stratification, and/or demographic questions every time data is collected about respondents in the cohort, regardless of what instrument is used for the data collection, and without having to create a new version of the instrument that specifically includes the questions.

Identification measures are used for sorting and filtering data that you have collected, in order to answer research questions such as “for which sub-groups was the treatment most effective? e.g. more effective for girls than boys? for whites than Hispanics? for younger teens than older teens? for those in group A than in group B?”

The Database Builder software has been designed in such a way that only one identification measure can be selected for each cohort. For example, a cohort group may consist of all new entrants into a program during a given enrollment period; each subsequent enrollment period is used to create a new cohort. In this case the identification measure would be the enrollment date. Another example is age grouping; the identification measure would be age in this case, and respondents would be grouped into a cohort based on an age category.

The grouping of subjects/respondents into cohorts in your data collection efforts will be determined by your evaluation needs; the method of accomplishing this grouping into cohorts within the DbB software package is through the use of identification measures. Your evaluator will be able to determine the best items to use in the identification measures that your evaluation system will require.

### 4.2.2 Numbering Respondents

Respondents are typically assigned a number to make the data analysis easier. Your evaluator will help you decide on the numbering scheme for your respondents:

- ?? No ID numbering scheme to be used
- ?? Use an external numbering scheme (your staff will enter in these numbers manually)
- ?? Use an internal numbering scheme (either randomly assigned numbers or sequential numbering, assigned on the fly by the system as respondents are added)

**Tip:** if you want to combine data collected in a different data system with data collected in the DbB for the same participants, be sure to use the same (external) numbering scheme, so

**Step 14:** Define cohorts for your measurements using a table similar to the one provided below:

Abbrev	Name	Description	Sec. Level	ID Measure	ID each measure?	Numbering	Following group over time?
					Yes/no	Internal/external/none	Yes/no
					Yes/no	Internal/external/none	Yes/no
					Yes/no	Internal/external/none	Yes/no
					Yes/no	Internal/external/none	Yes/no
					Yes/no	Internal/external/none	Yes/no
					Yes/no	Internal/external/none	Yes/no
					Yes/no	Internal/external/none	Yes/no

For example, you might have a table with entries similar to these:

Abbrev	Name	Description	Sec. Level	ID Measure	ID each Meas.?	Num-bering	Following group over time?
C1	Cohort 1	5 <sup>th</sup> graders 2004 cohort	Grants office	Grade Level	no	external	Yes
C2	Cohort 2	8 <sup>th</sup> graders 2004 cohort	Grants office	Grade Level	no	external	Yes
B1980	Birth Cohort years 1980-1990	All those in study born between 1-1-1980 and 12-31-1990	System	Birth date	yes	Internal	Yes

### 4.3 Measurement Points/Periods and Series

A *measurement point/period* is a point or period in time in which a specific instrument is administered to one or more respondents or subjects in a specific cohort. The measurement may be taken at a specific date or time point, or may be an open-ended range of dates in a period. Measurement points/periods can be stand-alone, or part of a longitudinal series of measurements. When measurement points are collected for a longitudinal study, a *measurement series* must be defined. A measurement series is a group of two or more measurement points/periods occurring in a specific order. The measurement points reflect a

common cohort, but need not use a common instrument. For example, a measurement series may be composed of three measurement points: a pre-test, a post-test, and a follow-up. Longitudinal studies (following the same group over time), repeated measures designs, cross-sectional and time series designs all make use of measurement series data within the Database Builder tool for tracking.

If you are planning to collect data for a cohort over a period of time, you will need to define specific measurement points for data collection and identify them in such a way that will make it possible to analyze the data. A measurement point/period requires:

- ?? A name to identify the measurement.
- ?? An abbreviation (a short text string used as a value or encoded representation of this particular measurement point to be used in data downloads, or in tables where the measurement point needs to be expressed in compact form).
- ?? The security level for the measurement point.
- ?? The instrument to be used.
- ?? The start and end dates (optional). These dates will be used to make specific measurement points available for data input. A measurement point is *open* for data entry if the current date is between the start and end dates. If the start date is missing, response data may be entered at any time up to the end date. If the end date is missing, response data may be entered at any time after the start date. If both are missing, then the measurement point is always open for data entry.
- ?? The cohort from whom (about whom) data is being collected—any respondents created during data entry for this measurement point are created as members of the cohort; alternatively, data may be entered for existing respondents in the cohort.

Depending on the evaluation design and the preference of the evaluators, respondents may be created prior to data entry (pre-defined), or created as response data are entered (ad-hoc). Some evaluations will allow both methods of respondent creation to be used.

**Step 15:** set up a table with information about the points/periods similar to the one below:

Name	Abbrev	Description	Security Level	Instrument	Cohort	Ad-hoc	Start date	End date
						Ad-hoc/pre-defined/both		
						Ad-hoc/pre-defined/both		
						Ad-hoc/pre-defined/both		
						Ad-hoc/pre-defined/both		

An example of this table filled out might include entries such as:

Name	Abbrev	Description	Security Level	Instrument	Cohort	Ad-hoc	Start date	End date
C1S1	C1S1	2004 5 <sup>th</sup> graders cohort in 5 <sup>th</sup> grade		Elem ATOD Attitudes	C1	pre-defined	6/1/04	12/1/04

C1S2	C1S2	2004 5 <sup>th</sup> graders cohort in 8 <sup>th</sup> grade		MS ATOD Attitudes	C1	pre-defined	6/1/07	12/1/07
C1S3	C1S2	2004 5 <sup>th</sup> graders cohort in 11 <sup>th</sup> grade		HS ATOD Attitudes	C1	pre-defined	6/1/10	12/1/10

**Step 16:** for a measurement series, specify a set measurement points/periods for a specific cohort, and name that set. Create a table such as the one displayed below:

Cohort	Name	Abbrev	Description	Measurement Series to include

For example:

Cohort	Name	Abbrev	Description	Measurement Series to include
C1	Long Term Study of ATOD attitudes in Youth	LTS	This is a study over 9 years of attitude change in youth...	C1S1, C1S2, C1S3

**Example:** Iowa has found that their implementation of the software went very smoothly, and data entry people were able to work with the system after a single half hour training session conducted over the telephone. They attribute their success, in a large part, to the fact that they considered very carefully how they would set up their evaluation plan and paid special care in naming instruments, cohorts, measurement points and series; this careful naming means that it is clear to users which measurement point to choose, which cohort to select, and so on, preventing data from being entered incorrectly.

**Next steps:** Once you have completed the steps in this workbook, you are ready for the implementation of the Database Builder. If you are installing the DbB on your own server, your IS group will use the information you provide as your starting point. Your system administrator(s) will be able to use the information you provide to configure and set up the system, adding users and instruments to the system. Your staff may want to glance through the Administrator’s Guide and User’s Guide to get an idea of how the information provided in the charts will be input into the system. You should probably review the configuration of the system and review reports before the system is in use to make sure that the settings are appropriate—it is much easier to make the changes early in the process, and much more confusing to users and more difficult to manage if you wait until the system is in wide use.

**Tip**—Michigan has implemented the DbB software, and offers this advice: set up sample instruments and reports and run through the entire process, including entering data into the system. Review all of the results and look for ways to streamline the process before you begin your real implementation. Start small, and add more instruments later as the process is better understood. This approach will lead to a better planned and implemented system.

*An answer to the exercise posed in section 3.1.3. Erma will need view access to all of her department's data, but should not be given write access. Create a group (let's call it "Program Reviewers" or something equally innocuous) with full access to reports and view access to everything else. Assign her to the highest security level she will need to have access to (at least to the "Department of Alcohol and Drug Programs" security level, but higher if she needs it). She will be able to do her job in terms of reviewing data, but will not be able to mess it up.*

*Rebekka will need access to all features of the system, including the ability to modify measures and instruments. Create a new group (naming it something like "Special Systems Group" so that you will not assign others accidentally to this group). Give the group Full access to all features. Assigning her security level will be trickier. You don't want to put her at the "Program Group" level, as she will then have access to everything below that. On the other hand, she needs access to her own department (Educational Prevention Services) as well as Erma's department. In this case, you could either create two different Rebekka users (Rebekka and Bekka, for example) and assign one to each security level, or give Rebekka explicit access to those two levels of security.*

## 5 Appendices

### Appendix A—Staffing

**Agency Decision-Makers:** the group of individuals within your organization that will make decisions related to the implementation and set up of your DbB system. This team may vary in size from three to twelve or so individuals, according to the needs and capacity of your organization. Typically, this group consists of these persons or roles: the system administrator(s) that will be charged with maintaining the system, evaluator, a representative from your Information Systems department, the person/people in charge that sign off on any decision made, and any others your group decides are important to the decision-making process. The planning process will run more smoothly if you include a person with some experience or training in the DbB software. Qualifications for the team members include an understanding of the needs for database systems for the organization, of how database systems function and the uses of the data collected by the system, and an understanding of the organization. Initial planning meetings may require 10 to 30 hours of each person’s time; later meetings might require another full day over a period of a month or two.

**Evaluator:** the evaluator, who is also part of the agency decision-making team, will be involved in on-going data collection efforts and analysis of the data collected. Often evaluators are not full-time on one project, but spend time during the design planning phase of the evaluations and during the analysis phase, with occasional time spent during the data collection phases to review the process. and provide interim reports. Evaluators may be employed within an agency, or hired as contractors. Qualifications for this position include:

- ?? Experience with large databases.
- ?? Quantitative analysis capacity.
- ?? Experience in using software (such as SYSTAT or SPSS) to perform statistical tests.
- ?? Ability to distance himself/herself from the project enough to provide objective results.

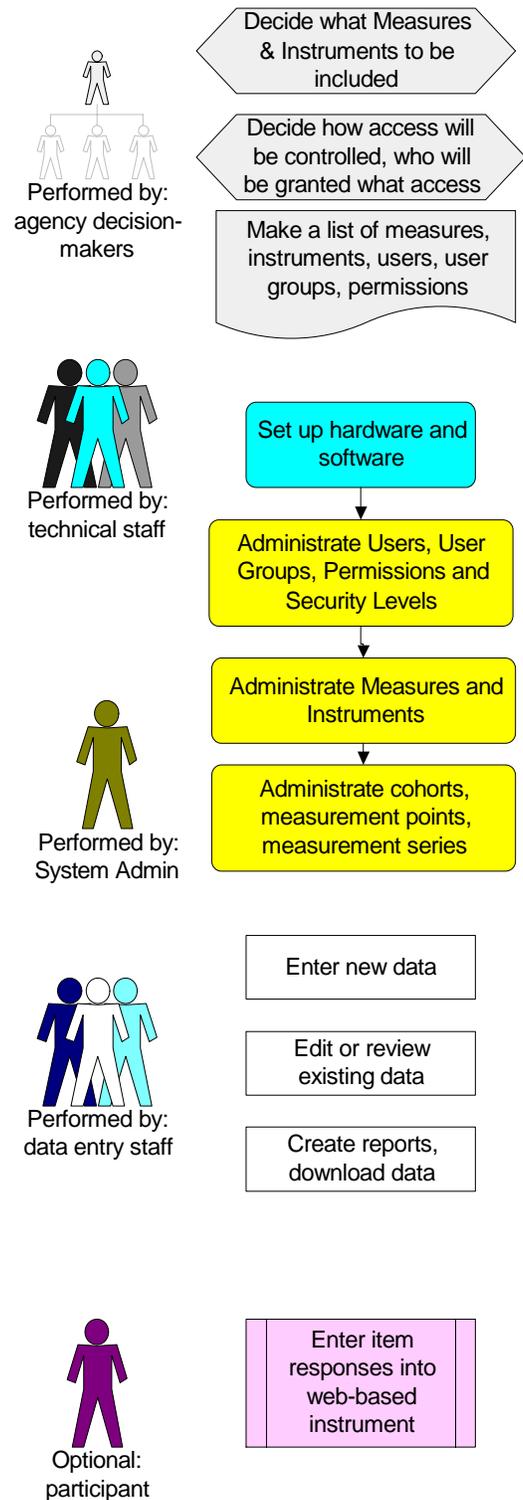


Figure 6. Staff and Responsibilities.

- ?? Ability to plan evaluations to meet feedback needs within the budget constraints.
- ?? Ability to communicate clearly orally and in writing.

**Technical Staff:** this is the individual or group of individuals that will be in charge of installing, setting up, and testing the installation of the DbB system. Usually a representative from this staff will be assigned to attend a few or all of the decision-making meetings related to the system before it is installed, and will be a liaison to the decision-making team after the system is up and running (e.g. to give feedback on plans for expanding the system.) This staff will be able to determine the optimum configuration including the number of servers required, cost of equipment, locations for servers and other related issues, based on your capacity planning. Qualifications for this staff are those typical for any MIS technical position: a good understanding of networking protocols and services; ability to set up and maintain database, web, firewall and local area network servers; ability to plan for and implement a backup system for databases. Time commitment for setting up the database may be 10 to 20 person hours. Maintenance may be 8 hours per month.

**System Administrator:** this is the individual or team in charge of making any changes in the administrative features of the software (adding users, modifying instruments, creating reports, etc.). The system administrator(s) typically perform these activities in conjunction with other job responsibilities. This position could be a fraction of a full time position up to more than one full time person, depending on the complexity and size of your system. If the responsibilities of reviewing data that has been entered into the database system, enforcing collection requirements for the agency, and data analysis are added, it might require multiple people to perform the tasks. Qualifications for the position include computer technical skills as well as management, statistics and prevention/treatment domain knowledge.

Computer technical skills include:

- ?? Ability to use software such as Microsoft Excel, word processing software, and general ability with web-based systems;
- ?? A working knowledge of databases and database systems is highly recommended, including understanding of terms such as “records”, “fields”, etc. Experience can be with Microsoft Access, or any other database system; and
- ?? An understanding of how to download, upload, and manage system files.

Statistical knowledge should include:

- ?? “Statistics 101” background, including understanding of the concepts of mean, median, standard deviations and statistical significance;
- ?? An understanding of sampling techniques and their applicability to the statistics gathered within the system; and
- ?? An understanding of how to synthesize, analyze and present data collected by the system, including knowledge of how to deal with outliers, incomplete records and data sets for which the basic statistical tests are not met.

Domain knowledge include:

- ?? An understanding of current research findings;

- ?? Knowledge of how to locate findings and to obtain general population statistics for comparison purposes; and
- ?? An understanding of the domain relevant goals and priorities of the Federal agency, State agency and local organizations involved in the current effort.

Management skills include:

- ?? An understanding of roles and responsibilities for individuals and departments within the organization;
- ?? A working knowledge of how to motivate others to complete tasks required for the database to be used effectively; and
- ?? An ability to communicate clearly the findings from the database system, present written reports, and knowledge of confidentiality issues related to the datasets and findings from the system.

In some cases the system administration role is split between a group of individuals, each with some of the skills required.

**Data entry staff:** this role is performed by any number of individuals tasked with entering data into the web-based DbB system. How data entry tasks will be split will be decided when you first meet to determine how the system will be used. Factors include:

- ?? How many programs will use the various instruments available in the system;
- ?? How many participants are served in the programs;
- ?? What computers are available at the sites for data entry into the system;
- ?? Who has been trained to use the system; and
- ?? Whether any of the programs will be using web-based terminals for program participants to enter data into the system using on-line questionnaires.

Qualifications for data entry personnel include: a general understanding of web-based computing (how to use the keyboard and mouse, what is a hyperlink and how to click on links, using drop-down fields and buttons, etc.), a basic understanding of the DbB system and terminology (can be provided in a four hour training session); an understanding of the instruments to be used in the program (can be provided in training).

**Participants:** in some organizations and in some cases, the data can be entered into the DbB system directly by the participant in the program, using on-line database access.

Qualifications include: a general understanding of web-based computing (how to use the keyboard and mouse, what is a hyperlink and how to click on links, using drop-down fields and buttons, etc.), and English language skills sufficient to allow reading of the online prompts and questions. The amount of time required to enter data into the system will vary according to the number of items in the instrument, but typically is less than 30 minutes.

## ***Appendix B—Forms***

**Steps 2-4:** list your evaluation goals, for each goal listed, create objectives and for each objective, create a set of tasks and determine who will be responsible for the task.

1	Goal:		
	1.1	Objective:	
		1.1.1	Task: _____ Who:
		1.1.2	Task: _____ Who:
		1.1.3	Task: _____ Who:
		1.1.4	Task: _____ Who:
	1.2	Objective:	
		1.2.1	Task: _____ Who:
		1.2.2	Task: _____ Who:
		1.2.3	Task: _____ Who:
		1.2.4	Task: _____ Who:
	1.3	Objective:	
		1.3.1	Task: _____ Who:
		1.3.2	Task: _____ Who:
		1.3.3	Task: _____ Who:
		1.3.4	Task: _____ Who:

	Goal:		
	Objective:		
		Task:	Who:
	Objective:		
		Task:	Who:



**Step 6:** make a list of the categories that you will use for measures. Note whether the category choices are exclusive or not. Examples are provided.

Category	Category Choices
1. General Assessment Domains [exclusive]	1a. Community Factors 1b. Environment Factors 1c. Family Factors 1d. Individual/Peer Factors 1e. Institutional Factors
2. Content Categories [non-exclusive]	2a. Biological Individuality 2b. Cultural/Ethnographic 2c. Economic Factors 2d. Environmental Conditions 2e. Geographic Factors 2f. Health/Illness Status 2g. Life Event & Historical Context 2h. Organization and Organizational System Factors 2i. Psychosocial Functions 2j. Religion/Spirituality
3. Source of Information [exclusive]	3a. Key Informant 3b. Self Report 3c. Non-Person Measurement Device
4. Measure Sets [exclusive]	4a. CSAP Core Measures 4b. GPRA 4c. State Block Grant 4d. SYNAR
5. Service Domain [non-exclusive]	5a. Prevention of Substance Abuse 5b. Promotion of Mental Health 5c. Treatment of Mental Health Problems/Disorders 5d. Treatment of Substance Abuse
6. Targeted Age Group [non-exclusive]	6a. Young Children 6b. Elementary School Youth 6c. Teenagers, Young Adults 6d. Older Adults
7. Targeted Settings [non-exclusive]	7a. School 7b. College 7c. Home 7d. Prison/Jail 7e. Community

Step 6 (continued)

Category	Category Choices





**Step 10:** Create an organizational chart including only those departments and individuals that will be requiring access to the DbB system.

**Step 11:** Create user groupings.

<b>Group name: Data Entry Clerks</b>			
<b>Enter/Edit Data:</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Enter New Data			X
Edit/Review Data			X
<b>Create Reports:</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Reports			X
Download			X
<b>System Administration</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Users	X		
User Grouping	X		
Permissions	X		
Security Levels	X		
<b>Measures &amp; Instruments</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Measures and Instruments		X	
<b>Evaluation Plans</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Cohorts		X	
Measurement Point/Series		X	

<b>Group name: Evaluators</b>			
<b>Enter/Edit Data:</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Enter New Data		X	
Edit/Review Data		X	
<b>Create Reports:</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Reports			X
Download			X
<b>System Administration</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Users	X		
User Grouping	X		
Permissions	X		
Security Levels	X		
<b>Measures &amp; Instruments</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Measures and Instruments			X
<b>Evaluation Plans</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Cohorts			X
Measurement Point/Series			X

<b>Group name: Program System Administration</b>			
<b>Enter/Edit Data:</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Enter New Data			X
Edit/Review Data			X
<b>Create Reports:</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Reports			X
Download			X
<b>System Administration</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Users			X
User Grouping			X
Permissions			X
Security Levels			X
<b>Measures &amp; Instruments</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Measures and Instruments		X	
<b>Evaluation Plans</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
Cohorts			X
Measurement Point/Series			X

**Step 11.**

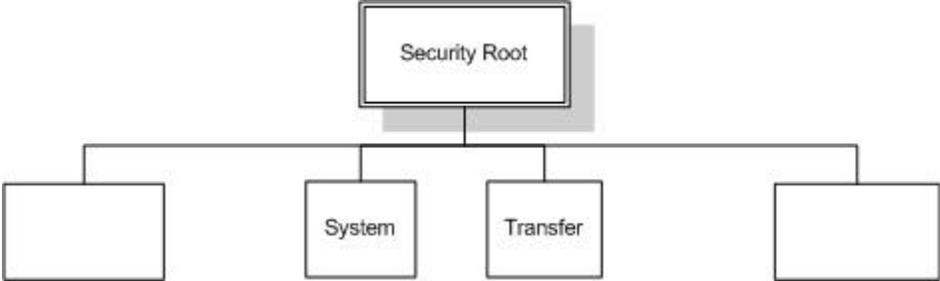
<b>Group name:</b>			
<b>Enter/Edit Data:</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
<b>Enter New Data</b>			
<b>Edit/Review Data</b>			
<b>Create Reports:</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
<b>Reports</b>			
<b>Download</b>			
<b>System Administration</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
<b>Users</b>			
<b>User Grouping</b>			
<b>Permissions</b>			
<b>Security Levels</b>			
<b>Measures &amp; Instruments</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
<b>Measures and Instruments</b>			
<b>Evaluation Plans</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
<b>Cohorts</b>			
<b>Measurement Point/Series</b>			

<b>Group name:</b>	
<b>Enter/Edit Data:</b>	<b>Disabled</b>
<b>Enter New Data</b>	
<b>Edit/Review Data</b>	
<b>Create Reports:</b>	<b>Disabled</b>
<b>Reports</b>	
<b>Download</b>	
<b>System Administration</b>	<b>Disabled</b>
<b>Users</b>	
<b>User Grouping</b>	
<b>Permissions</b>	
<b>Security Levels</b>	
<b>Measures &amp; Instruments</b>	<b>Disabled</b>
<b>Measures and Instruments</b>	
<b>Evaluation Plans</b>	<b>Disabled</b>
<b>Cohorts</b>	
<b>Measurement Point/Series</b>	

<b>Group name:</b>			
<b>Enter/Edit Data:</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
<b>Enter New Data</b>			
<b>Edit/Review Data</b>			
<b>Create Reports:</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
<b>Reports</b>			
<b>Download</b>			
<b>System Administration</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
<b>Users</b>			
<b>User Grouping</b>			
<b>Permissions</b>			
<b>Security Levels</b>			
<b>Measures &amp; Instruments</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
<b>Measures and Instruments</b>			
<b>Evaluation Plans</b>	<b>Disabled</b>	<b>View</b>	<b>Full</b>
<b>Cohorts</b>			
<b>Measurement Point/Series</b>			

<b>Group name:</b>	
<b>Enter/Edit Data:</b>	<b>Disabled</b>
<b>Enter New Data</b>	
<b>Edit/Review Data</b>	
<b>Create Reports:</b>	<b>Disabled</b>
<b>Reports</b>	
<b>Download</b>	
<b>System Administration</b>	<b>Disabled</b>
<b>Users</b>	
<b>User Grouping</b>	
<b>Permissions</b>	
<b>Security Levels</b>	
<b>Measures &amp; Instruments</b>	<b>Disabled</b>
<b>Measures and Instruments</b>	
<b>Evaluation Plans</b>	<b>Disabled</b>
<b>Cohorts</b>	
<b>Measurement Point/Series</b>	

**Step 12.** create a security tree for your data system.











## **Appendix C—Commonly Used Evaluation Designs**

**The following information is excerpted from the June 2000 edition of *Getting To Outcomes—Conference Edition* published by the Center for Substance Abuse Prevention.**

The **Post-Only** evaluation design makes it more difficult to assess change. Using this design, staff members deliver a program to the target group, *then* assess outcomes. The Post-Only design is the least useful method, because you are not able to compare post-program results with a measurement taken before the program began (called a baseline measurement). You can use this design when it is more important to ensure that participants reach a specific, designed outcome, than it is to know the degree of change.

The **Pre-and Post-program** evaluation design enables you to assess change by comparing the baseline measurement to the measurement taken after the program has been completed. In order to be comparable, a measurement that is done twice (before and after) must be the same exact measurement, done in the same way. Be sure to allow enough time for your program to cause change. Although this design may be improvement over the Post Program Only design, it still will not give you complete confidence that your program was responsible for the outcomes. There may be many other reasons for changes in your target group that have nothing to do with your program.

One way to increase confidence that your program was responsible for the outcomes is to assess another group, similar to your target group, that did NOT receive the program (a **Comparison Group design**). In this design, you assess both groups before the program begins, deliver the program to only one group, then assess both groups after the program ends. The challenge is to find a group similar to your target group demographically (e.g., gender, race/ethnicity, socioeconomic status, education), and in a similar situation that makes them appropriate for the program (e.g., both groups are adolescent girls at risk for dropping out of high school). The more alike the two groups are, the more confidence you can have that your program was responsible for the program outcomes. A typical example of a comparison group is a school where one class that participates in a program is compared to another class that does not participate.

**A Pre- and Post-program with a control group** will provide you with the greatest opportunity to claim that your program was responsible for changes in outcomes. In this design, you “randomly assign” people from the same overall target population to either a control group or a target group. In a random assignment each person has an equal chance of winding up in either group (i.e., flip a coin to assign each participant to a group). A control group is the same as a comparison group (a group of people who are like the program group but who do NOT participate in the program), but the decision of who will be in either group results from random assignment. It is possible to randomly assign entire groups (e.g., classrooms) to the program as well. This design is used predominantly by scientists to establish program effectiveness.

### Strengths and Weaknesses of Commonly-Used Evaluation Designs

Methods	Pros	Cons	Costs	Expertise Needed
Post-Only – Deliver program, assess program group	Easy to do, provides some information	Cannot assess change	Cheapest	Low
Pre-Post – Assess program group (baseline), deliver program, assess program group again	Still an easy way to assess change	Only moderate confidence that your program caused the change	Moderate	Moderate
Pre-Post with Comparison Group – Assess program group and comparison group (baseline), deliver program only to program group, assess program group and comparison group again	Provides good level of confidence that your program caused the change	Can be hard find group similar to the program group	High; Doubles the cost of the outcome evaluation	Moderate to high
Pre-Post with Control Group – Randomly assign people from the same target population to either the program group or control group, assess program group and control group (baseline), deliver program only to program group, assess program group and control group again	Provides excellent level of confidence that your program caused the change	Hard to find group willing to be randomly assigned; ethical issues of withholding beneficial program	High; Doubles the cost of the outcome evaluation	High

## ***Appendix D—Glossary***

**ATOD:** Alcohol, tobacco and other drugs.

**CASE:** A complete set of data collected from or about an individual respondent or subject.

**COHORT:** A group of individuals who share some common characteristic or experience (e.g., a birth cohort, a classroom). Because individuals may be members of several cohorts, it is critical that the defining characteristic of the cohort be made explicit.

**CSAP:** The Center for Substance Abuse Prevention, U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, a Federal agency.

**DATABASE BUILDER:** A software package developed by ORC Macro for the Center for Substance Abuse Prevention, used for developing, maintaining and administering data collection systems for ATOD prevention and treatment.

**DATABASE:** A collection of data arranged for ease and speed of search and retrieval.

**DCC:** Data Coordinating Center for CSAP, intended to provide the infrastructure and analytic and reporting services which will assist CSAP in centralizing and coordinating its program data (process, capacity, intermediate, and long-term outcomes), and providing, through analytic reports, information across broad CSAP programs on populations served, service characteristics, and outcomes, including the monitoring and analysis of performance measurements for GPRA and the Office of National Drug Control Policy. The DCC is also intended to promote the use of common data definitions, core process, and outcome measures and data collection strategies at the national, State, local, and project levels and across CSAP's grantee data coordinating centers.

**EXCEL:** A spreadsheet program that displays data in rows and columns sold by Microsoft, part of their Microsoft Office suite of productivity tools for Microsoft Windows and Macintosh. Excel is probably the most widely used spreadsheet in the world.

**IDENTIFICATION MEASURE:** A measure containing identifying information that would most likely be the same for a given respondent no matter how many times they filled out a survey, such as birth date and race. Identification measures are used to group respondents into cohorts, or to uniquely identify individuals.

**INSTRUMENT:** A group of measures, arranged in a definite order. The instrument would correspond to the questionnaire or survey packet that is administered to a group of respondents.

**IS:** Information Systems, the department within an agency or business that handles computing systems, networking, software, web service, etc. In some groups it is called Management Information Systems (MIS) or Information Technology (IT).

**ITEM:** A single statement, query or stem choice that the respondent will answer in a defined way. For example, a statement item might be "I have made a final decision to stay away from marijuana." The participant must then pick one of the three possible responses: "True", "False", or "I Don't Know".

**MDS:** The Minimum Data Set, software developed by the Center for Substance Abuse Prevention for collecting and reporting process data about a program, including the number of participants, the type of activity, gender, age and ethnicity of participants.

**MEASURE:** An ordered group of items, or sometimes a single item (such as "age"). Some measures may have psychometric properties of interest to the outcome of the evaluation. Others will be used to collect other data, such as demographics, cohort or grouping data, and other values of interest to the evaluation. Many pre-defined measures used in prevention research have been included in the Database Builder.

**MEASUREMENT POINT/PERIOD:** A point in time where a specific instrument is administered to one or more respondents/subjects in a specific cohort. The measurement point may be a specific date or time, or may be an open-ended range of dates.

**MEASUREMENT SERIES:** A group of two or more measurement points/periods occurring in a specific order. The measurement points reflect a common cohort, but need not use a common instrument. For example, a measurement series may be composed of three measurement points: a pre-test, a post-test, and a follow-up. Longitudinal studies (following the same group over time), repeated measures designs, cross-sectional and time series designs all make use measurement series data within the Database Builder tool for tracking.

**METADATA:** Data about data. Includes information describing aspects of actual data items, such as name, format, content, and the control of or over data.

**RPARTICIPANT:** Referred to as Respondent/Subjects within this system. Someone who provides responses (respondent) or about whom responses are provided (subject) to items in an instrument. Respondents and subjects may be program participants.

**PROCESS DATA (PROCESS EVALUATION):** An evaluation that examines the extent to which a program is operating as intended by assessing ongoing program operations and whether the targeted population is being served. CSAP has developed software for collecting and reporting on process data called the Minimum Data Set (MDS).

**RECORD:** A collection of the contents of a related group of database fields.

**REPOSITORY:** A centralized collection of data objects such as databases, metadata, data structures, descriptions, etc. In the database builder, the instrument repository contains a collection of data collection instruments used by ATOD prevention and treatment specialists and supports the storage and management of new instruments created by users of the system.

**RESPONDENT/SUBJECT:** Someone who provides responses (respondent) or about whom responses are provided (subject) to items in an instrument. Respondents and subjects may be program participants.

**RESPONSE:** The response to a specific item that was posed to a specific respondent at a specific measurement point. Item responses are coded as variables in the software, and are used in data analysis.

**SAMHSA:** Substance Abuse and Mental Health Services Administration, a Federal agency under the Department of Health and Human Services.

**SECURITY:** Technological and managerial procedures applied to computer systems to ensure the availability, integrity and confidentiality of information managed by the computer system. Physical security refers to security related to keeping computer equipment safe from access or sabotage, and data security refers to keeping data from being accessed, except by those with authority to view the data.

**SOPS:** An acronym for a fictitious state agency, the State Office of Prevention Services, used in this manual as an example of a “generic” state model for prevention management services.

**SPF SIG:** Strategic Prevention Framework State Incentive Grants. This SAMHSA program is intended to help States enhance the prevention infrastructure and service delivery system throughout the State.

**SUBJECT:** A person for whom responses are provided to items in an instrument, for example a three year old child for whom a parent is providing information in a survey.

**SYSTEM ADMINISTRATOR or SYSADMIN:** a person who administers a computer system and keeps it working. A sysadmin is in charge of adding/maintaining users, purging records, and performing other administrative tasks.

**USER GROUP:** A named collection of users with a defined set of permissions. User Groups are created with a set of default permissions before individual users are added to the group.

**USER:** Any person that has an individual login (account) on the Database Builder system.

## **Appendix E—Measures and Instruments in the Database Builder**

### Measures

#### **1. ADAS 30-Day Ecstasy Use Scale**

*Description:* Two questions used to characterize respondents' use of ecstasy.

#### **2. ADAS Current "Other Narcotics" Use Scale**

*Description:* Two questions used to characterize respondents' use of "other narcotics".

#### **3. ADAS Current Alcohol Use Scale**

*Description:* Six questions used to characterize respondents' current alcohol use.

#### **4. ADAS Current Cocaine/Crack Use Scale**

*Description:* Five questions used to characterize respondents' current cocaine/crack use.

#### **5. ADAS Current Downers Use Scale**

*Description:* Three questions used to characterize respondents' current use of downers.

#### **6. ADAS Current Drunkenness Scale**

*Description:* Five questions used to characterize respondents' current frequency and degree of alcohol intoxication

#### **7. ADAS Current Ecstasy Use Scale**

*Description:* Two questions used to characterize respondents' use of ecstasy.

#### **8. ADAS Current Hallucinogen Use Scale**

*Description:* Six questions used to characterize respondents' current Hallucinogen use.

#### **9. ADAS Current Heroin Use Scale**

*Description:* Three questions used to characterize respondents' current use of heroin.

#### **10. ADAS Current Inhalant Use Scale**

*Description:* Three questions used to characterize respondents' current inhalant use.

#### **11. ADAS Current Ketamine Use Scale**

*Description:* Two questions used to characterize respondents' use of ketamine.

#### **12. ADAS Current Marijuana Use Scale**

*Description:* Three questions used to characterize respondents' current marijuana use.

#### **13. ADAS Current Non-Medical Ritalin Use Scale**

*Description:* Two questions used to characterize respondents' non-medical use of ritalin

#### **14. ADAS Current PCP Use Scale**

*Description:* Three questions used to characterize respondents' current use of PCP.

**15. ADAS Current Uppers Use Scale**

*Description:* Five questions used to characterize respondents' current use of uppers/amphetamine.

**16. ADAS\* About Your Responses**

*Description:* Two questions regarding the veracity of responses.

**17. ADAS\* Alcohol Related Behavior, Attitudes, and Outcomes**

*Description:* Thirty-eight questions used to define respondents' use, attitudes toward, and consequences of alcohol.

**18. ADAS\* Combination Drug Use**

*Description:* Two questions on combination drug use.

**19. ADAS\* Consequences of Drug Use**

*Description:* Fourteen questions relating to the consequences of drug use.

**20. ADAS\* Drug Accessibility**

*Description:* Twelve questions on respondents' perceptions of the accessibility of various drugs.

**21. ADAS\* Drug Use - Context**

*Description:* Ten questions on respondents' use of drugs in various contexts.

**22. ADAS\* Friends Response to Drug Use**

*Description:* Six questions on respondents' perception of friends' responses to drug use.

**23. ADAS\* Friends' Drug Use**

*Description:* Seven questions on respondents' responses to friends drug use.

**24. ADAS\* Friends' Solicitation of Drug Use**

*Description:* Six questions on respondents' friends solicitation to drug use.

**25. ADAS\* Global Self Appraisal Regarding Drug Use**

*Description:* One question regarding past, present, and future use of drugs.

**26. ADAS\* Inhalant Use**

*Description:* Two questions on respondents' inhalant use.

**27. ADAS\* Marijuana and Other Illegal Drug Use - last 12 months**

*Description:* Twelve questions used to describe respondents' use of marijuana and other illegal drugs during the last 12 months.

**28. ADAS\* Marijuana Related Behavior, Attitudes, and Outcomes**

*Description:* Seven questions used to define respondents' use, attitudes toward, and consequences of marijuana use.

**29. ADAS\* Respondent Information**

*Description:* Age, sex, race/ethnicity and grade level of respondent.

**30. ADAS\* Respondent Perception - Degree of Use**

*Description:* Eleven questions on respondents' tobacco use.

**31. ADAS\* Response to Friends' Drug Use**

*Description:* Seven questions on respondents' responses to friends drug use.

**32. ADAS\* Tobacco Use**

*Description:* Six questions on respondents' tobacco use.

**33. ADAS\* Use of Various Drugs**

*Description:* Twenty-four questions on respondents' use of various drugs during the last 12 months and during the last month.

**34. Alcohol, Tobacco, and Other Drugs (ATOD) - 30-day use**

*Description:* Twelve questions on substance use from the Monitoring the Future Survey/30 Day Use.

**35. Alcohol, Tobacco, and Other Drugs (ATOD) - 30-day use - (CSAP Core Measure/CMIR2 ).**

*Description:* Monitoring the Future Survey/30 Day Use.

**36. Alcohol, Tobacco, and Other Drugs (ATOD) - Age of First Use - (CSAP CORE Measure/CMIR3)**

*Description:* National Household Survey on Drug Abuse/Age of First Use.

**37. Alcohol, Tobacco, and Other Drugs (ATOD) - Binge Drinking - (CSAP Core Measure/CMIR4 )**

*Description:* Monitoring the Future Survey/Dependency Scale.

**38. Alcohol, Tobacco, and Other Drugs (ATOD) - Dependency - (CSAP Core Measure/CMIR5).**

*Description:* Monitoring the Future Survey/Dependency Scale

**39. Alcohol, Tobacco, and Other Drugs (ATOD) - Problem Drinking - (CSAP Core Measure/CMIR6 ).**

*Description:* CAGE.

**40. ATOD-Related Suspensions/Expulsions**

*Description:* Under Development

**41. Attitudes Toward Drug Use**

*Description:* Seven questions from the Student Survey of Risk and Protective Factors/Respondent and Perceived Family Attitudes Toward Drug Use.

**42. Community - Neighborhood Attachment - (CSAP Core Measure/CMIR41).**

*Description:* Student Survey of Risk and Protective Factors/Neighborhood Attachment.

**43. Community - Opportunities for Prosocial Involvement - (CSAP Core Measure/CMIR45).**

*Description:* Student Survey of Risk and Protective Factors/Opportunities for Prosocial Involvement

**44. Community - Perceived Availability of Drugs and Handguns - (CSAP Core Measure/CMIR44).**

*Description:* Student Survey of Risk and Protective Factors/Perceived Availability of Drugs and Handguns.

**45. Community - Rewards for Prosocial Involvement.**

*Description:* Student Survey of Risk and Protective Factors/Rewards for Prosocial Involvement

**46. Community - Social Disorganization - (CSAP Core Measure/CMIR42).**

*Description:* Student Survey of Risk and Protective Factors/Social Disorganization

**47. Community-based perceptions - (CSAP Risk and Protective Factors Survey).**

*Description:* Community based perceptions - Taken from the CSAP Substance Abuse Risk and Protective Factors Student Survey (SARPF).

**48. CSAP GPRA attitudes and beliefs regarding substance use- adult (2005).**

*Description:* Questions addressing the attitudes and beliefs of adult respondents regarding the use and risks associated with the use of ATOD. They derive from the instrument CSAP GPRA Participant Outcome Measures for Discretionary Programs - Adults, an instrument approved by OMB for use in such programs through 2005.

**49. CSAP GPRA attitudes and beliefs - youth (2005).**

*Description:* 13 questions regarding the respondents beliefs and attitudes toward ATOD use.

**50. CSAP GPRA ACTITUDES Y CREENCIAS adult (2005).**

*Description:* Questions addressing the attitudes and beliefs of adult respondents regarding the use and risks associated with the use of ATOD. They derive from the instrument CSAP GPRA Participant Outcome Measures for Discretionary Programs - Adults, an instrument approved by OMB for use in such programs through 2005.

**51. CSAP GPRA ADMINISTRACIÓN DEL RECORD 2005**

*Description:* Client, program, and grant identification data.

**52. CSAP GPRA client demography (2005).**

*Description:* CSAP client demography.

**53. CSAP GPRA drug and alcohol use - adult - (2005).**

*Description:* Questions related to respondents ATOD use.

**54. CSAP GPRA drug and alcohol use - youth (2005).**

*Description:* Questions regarding clients' 30-day ATOD use.

**55. CSAP GPRA EDUCACIÓN, EMPLEO, E INGRESO 2005**

*Description:* Single question -- level of education completed as rendered in the current (2005) version of the CSAP GPRA measures instrument.

**56. CSAP GPRA education, employment, and income (2005).**

*Description:* Single question -- level of education completed as rendered in the current (2005) version of the CSAP GPRA measures instrument.

**57. CSAP GPRA family and living condition measures (2002).**

*Description:* Questions on the effect of substance use on the individual, and family attitudes regarding substance use.

**58. CSAP GPRA measures of drug and alcohol use (2002).**

*Description:* Questions related to 30 day use of various drugs and alcohol and age of use onset.

**59. CSAP GPRA PREGUNTAS DEMOGRÁFICAS (LAS PREGUNTAS 1-4 SOLAMENTE SE LE**

*Description:* CSAP GPRA PREGUNTAS DEMOGRÁFICAS (LAS PREGUNTAS 1-4 SOLAMENTE SE LE

**60. CSAP GPRA record management data (2002).**

*Description:* Records client and record identifier data.

**61. CSAP GPRA USO DE DROGAS Y DE BEBIDAS ALCOHÓLICAS (2005)**

*Description:* Questions related to respondents ATOD use.

**62. CSAP GPRA youth form/baseline demography (2002).**

*Description:* Baseline demography for CSAP GPRA review.

**63. CSAT Baseline Training Survey - Information Usefulness**

*Description:* Measures the usefulness of information from instructor.

**64. CSAT Baseline Training Survey - Overall Satisfaction**

*Description:* Overall satisfaction with training

**65. CSAT Baseline Training Survey - Rating of the Training**

*Description:* Indicates trainee's opinion of training components

**66. CSAT Baseline Training Survey - Trainee Demographics**

*Description:* Demographics of trainees

**67. CSAT Baseline Training Survey - Trainee Job Description**

*Description:* Trainee job description

**68. CSAT Baseline Training Survey - Training Improvement**

*Description:* Training improvement

**69. CSAT Baseline Training Survey - Training usefulness in work**

*Description:* Training usefulness in work

**70. CSAT GPRA Customer Survey - Meeting Information**

*Description:* Name, location and topic of meeting

**71. CSAT GPRA Customer Survey - Most Supportive Meeting Element**

*Description:* Openended question regarding most useful elements of the meeting

**72. CSAT GPRA Customer Survey - Most Supportive TA Event Element**

*Description:* Openended question regarding the degree to which the TA event in question supports respondent's work responsibilities

**73. CSAT GPRA Customer Survey - Most Supportive Training Event Element**

*Description:* Openended question intended to identify the trainees' estimate of the most helpful component of the training experience.

**74. CSAT GPRA Customer Survey - Participant/Attendee Characteristics**

*Description:* Five questions regarding attendee characteristics

**75. CSAT GPRA Customer Survey - Relevance and Anticipated Utility of the Training**

*Description:* Measure consists of 12 questions intended to measure the trainees' perceptions of the utility and applicability of training received.

**76. CSAT GPRA Customer Survey - Relevance and Anticipated Utility of TA**

*Description:* Thirteen questions regarding the relevance and utility of the TA event

**77. CSAT GPRA Customer Survey - Relevance and Anticipated Utility of the Meeting**

*Description:* Seven questions regarding the relevance and utility of meeting content

**78. CSAT GPRA Customer Survey - Relevance and Utility of TA: Follow-up**

*Description:* Measure consists of 12 questions intended to measure TA recipients' views on the utility and relevance of a prior TA event.

**79. CSAT GPRA Customer Survey - Satisfaction with Meeting**

*Description:* Measure consists of four questions related to general participant/attendee satisfaction

**80. CSAT GPRA Customer Survey - Satisfaction with TA Event**

*Description:* Four questions regarding Attendees' satisfaction with the TA event

**81. CSAT GPRA Customer Survey - Satisfaction with Training**

*Description:* Measure consists of 4 questions related to trainees' general satisfaction with the training received.

**82. CSAT GPRA Customer Survey - Suggestions for Improvement of Meetings**

*Description:* Attendee suggestions for meeting improvement

**83. CSAT GPRA Customer Survey - Suggestions for Improvement of TA**

*Description:* Openended question requesting suggestions for improvement of TA delivery.

**84. CSAT GPRA Customer Survey - Suggestions for Improvement of Training**

*Description:* Openended question to elicit trainee suggestions for training improvement.

**85. CSAT GPRA Customer Survey - Technical Assistance Event Information**

*Description:* Date, location and topic of the technical assistance

**86. CSAT GPRA Customer Survey - Training Event Information**

*Description:* Name, location and topic of training event

**87. Current Hallucinogen Use Scale**

*Description:* Five questions used to characterize respondents' current cocaine/crack use.

**88. Customer Service Event Information**

*Description:* Describes the time, location, etc. of the training event.

**89. Drug and alcohol use/CSAP clients - youth**

*Description:* During the past 30 days how many days have you used any alcohol?

**90. Drug-Related Crime**

*Description:* Under Development

**91. Drug-Related Workplace Injuries**

*Description:* Under Development

**92. Drug/alcohol usage - (CSAP Risk and Protective Factors Survey).**

*Description:* Questions relating to ATOD use taken from the CSAP Substance Abuse Risk and Protective Factors Student Survey (SARPF).

**93. Faith and Community Based Readiness Checklist: Building and Equipment**

*Description:* Four questions addressing the organizational facilities of the respondent program.

**94. Faith and Community Based Readiness Checklist: Concluding Questions**

*Description:* Four questions addressing the service population and program continuity of the respondent program.

**95. Faith and Community Based Readiness Checklist: Conduct of Service**

*Description:* Twenty-two questions addressing the conduct of services of the respondent program.

**96. Faith and Community Based Readiness Checklist: Finances**

*Description:* Fifteen questions addressing the financial readiness of the respondent program.

**97. Faith and Community Based Readiness Checklist: Leadership**

*Description:* Eleven questions addressing the leadership readiness of the respondent program.

**98. Faith and Community Based Readiness Checklist: Organization**

*Description:* Seven questions addressing the organizational readiness of the respondent program.

**99. Faith and Community Based Readiness Checklist: Personnel**

*Description:* Eleven questions addressing the personnel of the respondent program.

**100. Family - Family ATOD - History of Use (College Instrument) - (CSAP Core Measure/CMIR35 ).**

*Description:* FIPSE-Core Alcohol and Drug Survey/Family History of AOD Problems.

**101. Family - Family Involvement Opportunities for Prosocial Involvement - (CSAP Core Measure/CMIR39 ).**

*Description:* Student Survey of Risk and Protective Factors/Opportunities for Prosocial Involvement.

**102. Family - Family Relations/Cohesion - (CSAP Core Measure/CMIR31).**

*Description:* Family Relations Scale/Cohesion Scale.

**103. Family - Parent/Child Bonding (Parent Instrument) - (CSAP Core Measure/CMIR32 )**

*Description:* Parent-Child Affective Quality/Parent Report

**104. Family - Parent/Child Bonding (Student Instrument) - (CSAP Core Measure/CMIR33 ).**

*Description:* Student Survey of Risk and Protective Factors/Family Attachment Scale.

**105. Family - Parenting Practices (Student Instrument) - (CSAP Core Measure/CMIR36).**

*Description:* Student Survey of Risk and Protective Factors/Poor Family Management

**106. Family - Perceived Parental Attitudes Toward Youth ATOD Use - (CSAP Core Measure/CMIR38).**

*Description:* Student Survey of Risk and Protective Factors/Parental Attitudes Favorable Toward Drug Use.

**107. Family - Rewards for Prosocial Involvement - (CSAP Core Measure/CMIR40).**

*Description:* Student Survey of Risk and Protective Factors/Rewards for Prosocial Involvement Scale.

**108. Family Composition. (CSAP Core Measure - CMIR37)**

*Description:* Capable Families and Youth Family Form.

**109. Family factors - (CSAP Risk and Protective Factors Survey).**

*Description:* Series of 37 questions, taken from the CSAP Substance Abuse Risk and Protective Factors Student Survey (SARPF), dealing with family relationships, attitudes, and structures.

**110. Individual /Peer - Rebelliousness Scale - (CSAP Core Measure/ CMIR9 )**

*Description:* Student Survey of Risk and Protective Factors/Rebelliousness.

**111. Individual substance use/cocaine**

*Description:* Individual's use of cocaine

**112. Individual substance use/crack**

*Description:* Individual's use of crack cocaine

**113. Individual substance use/halucinogens**

*Description:* Individual's use of halucinogens

**114. Individual substance use/heroin**

*Description:* Individual's use of Heroin

**115. Individual substance use/inhalants**

*Description:* Individual's lifetime use of inhalants

**116. Individual substance use/injectible drugs**

*Description:* Ever, even once, used a needle to inject a drug

**117. Individual use of nonprescription pharmacotherapeutics/sedatives**

*Description:* Individual's use of sedatives

**118. Individual's Nonprescription use of pharmacotherapeutics/pain killers**

*Description:* Illicit use of pharmacotherapeutics/pain killers

**119. Individual's Nonprescription use of pharmacotherapeutics/stimulants**

*Description:* Individual's use of stimulants

120. Individual's nonprescription use of tranquilizers

*Description:* Illicit use of pharmacotherapeutics/tranquilizers

**121. Individual/ HIV Risk Taking**

*Description:* HIV/Drug Use Risk Taking Behavior

**122. Individual/Peer - Commitment to Not use Drugs - (CSAP Core Measure/CMIR16 ).**

*Description:* Tanglewood Research Evaluation/Commitment to Not Use Drugs.

**123. Individual/Peer - Perceived Risk of Drug Use - (CSAP Core Measure/CMIR15).**

*Description:* Student Survey of Risk and Protective Factors/Perceived Risk of Drug Use.

**124. Individual/Peer - Antisocial Attitudes (Belief in the Moral Order) - (CSAP Core Measure).**

*Description:* Student Survey of Risk and Protective Factors/Belief in the Moral Order.

**125. Individual/Peer - Assertiveness - (CSAP Core Measure/CMIR23).**

*Description:* Botvin Life Skills Training Evaluation/Assertiveness

**126. Individual/Peer - Decision Making Skills - (CSAP Core Measure/CMIR20).**

*Description:* Decision Making Skills

**127. Individual/Peer - Favorable Attitudes Toward Antisocial Behavior - (CSAP Core Measure/CMIR7).**

*Description:* Student Survey of Risk and Protective Factors/Favorable Attitudes Towards Antisocial Behavior.

**128. Individual/Peer - Favorable Attitudes Toward Drug Use - (CSAP Core Measure/CMIR12).**

*Description:* Student Survey of Risk and Protective Factors/Favorable Attitudes Toward Drug Use.

**129. Individual/Peer - Goal Setting Skills - (CSAP Core Measure/CMIR22 ).**

*Description:* Goal Setting Skills.

**130. Individual/Peer - Interaction with Antisocial Peers - (CSAP Core Measure/CMIR18).**

*Description:* Student Survey of Risk and Protective Factors/Interaction with antisocial Peers.

**131. Individual/Peer - Rosenberg Self-esteem Scale - (CSAP Core Measure/CMIR11)**

*Description:* Rosenberg Self-esteem Scale

**132. Individual/Peer - Stress Management Skills - (CSAP Core Measure/CMIR19).**

*Description:* Stress Mangement Skills.

**133. Individual/Peer -Disapproval of Drug Use - (CSAP Core Measure/CMIR13 ).**

*Description:* Monitoring the Future/Disapproval of Drug Use.

**134. Individual/Peer -Perceived Harm/Risk - (CSAP Core Measure/CMIR14)**

*Description:* Monitoring the Future/Perceived Harm.

**135. Individual/Peer: Beliefs About Peer Norms - (CSAP Core Measure/CMIR17)**

*Description:* Beliefs About Peer Norms.

**136. MDS - Basic infromation.**

*Description:* Staff, provider, service type

**137. MDS - Service statistics**

*Description:* Demographic characteristics of group served

**138. MDS - Session Information**

*Description:* Description of service provided

**139. MDS - User defined fields**

*Description:* MDS - Risk/protective factors, IOM category, Fundng source, Hours of service, Local zip code

**140. Most useful element of TA**

*Description:* What about the technical assistance was most useful in supporting your work responsibilities? Openended question intended to elicit the respondents perception of the most useful, work-related aspect of the TA.

**141. Number of Evidence-Based Programs and Strategies**

*Description:* Under Development

**142. Number of Persons Served**

*Description:* Under development from CSAP's Minimum Data Set and includes Total Number Served, and breakdowns by age, gender, race/ethnicity.

**143. Parent-School Involvement - (CSAP Core Measure/CMIR25).**

*Description:* Parent Involvement in School Interview.

**144. Parenting Practices (Student Instrument) Poor Discipline**

*Description:* Student Survey of Risk and Protective Factors/Poor Discipline

**145. Peer influences - (CSAP Risk and Protective Factors Survey.)**

*Description:* Peer influences - component of the CSAP Substance Abuse Risk and Protective Factors Student Survey (SARPF).

**146. Perceived Availability of Drugs**

*Description:* Four questions from the Student Survey of Risk and Protective Factors/Perceived Availability of Drugs.

**147. Perceived Harm From Substance Use**

*Description:* Fourteen questions from the Monitoring the Future Survey/Perceived Harm.

**148. Performance Partnership Grant (PPG) Community Domain.**

*Description:* Access and community response to abusable substances.

**149. Performance Partnership Grant (PPG) Family Domain.**

*Description:* Parental attitudes and family management.

**150. Performance Partnership Grant (PPG) Individual Domain/disapproval of use.**

*Description:* Clients' degree of disapproval of use of several substances.

**151. Performance Partnership Grant (PPG) Individual Domain/perceived harm/risk of use.**

*Description:* Clients' perceptions of risk of use.

**152. Performance Partnership Grant (PPG) Individual Domain/perception of peer use of substances.**

*Description:* Series of question related to clients' perceptions of peer substance abuse and peer response to substance abuse.

**153. Performance Partnership Grant (PPG) School Domain.**

*Description:* Clients' attitudes toward school

**154. Prevention Planning Survey (PPS) Antisocial Behavior**

*Description:* Eleven questions regarding respondents' antisocial behavior.

**155. Prevention Planning Survey (PPS) Respondent Information**

*Description:* Age, sex, race/ethnicity and grade level of respondent.

**156. Prevention Planning Survey (PPS) Anger**

*Description:* Twelve questions regarding respondents' experience and management of anger.

**157. Prevention Planning Survey (PPS) Family Attitudes Toward Drugs**

*Description:* Ten questions on respondents' perception of family responses to drug use.

**158. Prevention Planning Survey (PPS) Friends' Attitudes Toward and Participation in School**

*Description:* Measure consists of 6 questions regarding friends' attitudes toward and participation in School.

**159. Prevention Planning Survey (PPS) Psychosocial Perceptions**

*Description:* Forty-six questions dealing with respondents' perceptions of feelings and psychosocial interactions.

**160. Prevention Planning Survey (PPS) Respondent Living Situation**

*Description:* One question regarding respondent's living situation.

**161. Prevention Planning Survey (PPS) Respondents' Attitudes Toward and Participation in School**

*Description:* Measure consists of 1 question regarding respondents' attitudes toward and participation in School.

**162. Prevention Planning Survey (PPS) Safety/Available Activities**

*Description:* Measure consists of 4 questions regarding respondents' perceptions of safety at school, safety at home, and available activities.

**163. Prevention Planning Survey (PPS) School and Social Environment**

*Description:* Twenty-eight questions regarding respondent's school and social environments.

**164. Prevention Planning Survey (PPS) Social Network/Relationship Quality**

*Description:* Measure consists of 26 questions regarding respondents' relationships with family and friends

**165. SAMHSA National Outcome Measure: Parental Participation**

*Description:* Under Development

**166. Satisfaction of meeting quality**

*Description:* How satisfied are you with the overall quality of the meeting?

**167. School - Academic Failure SSRPF - (CSAP Core Measure/CMIR27)**

*Description:* Student Survey of Risk and Protective Factors/Academic Failure.

**168. School - Education Expectations and Aspirations - (CSAP Core Measure/CMIR28)**

*Description:* Monitoring the Future/Education Expectations and Aspirations Scale.

**169. School - School Bonding/Commitment - (CSAP Core Measure/CMIR29).**

*Description:* Student Survey of Risk and Protective Factors/Little Commitment to School.

**170. School - School Safety/Dangerousness Scale - (CSAP Core Measure CMIR26).**

*Description:* Youth Risk Behavior Survey (Year 1997)/School Safety/Dangerousness Scale.

**171. School Attendance**

*Description:* Under Development

**172. School information and respondent demography - (CSAP Risk and Protective Factors Survey).**

*Description:* School information and respondent demography.

**173. Sense of Community Index - (CSAP Core Measure/CMIR43)**

*Description:* Sense of Community Index (SCI)

**174. Services Provided Within Cost Bands**

*Description:* Under Development

**175. Treatment Services Review - Alcohol and drug problem area (14-day/TSR4).**

*Description:* Screening questions for AOD problems.

**176. Treatment Services Review - Client information/administrative (14-day/TSR1).**

*Description:* Questions related to client ID and service administration.

**177. Treatment Services Review - Employment and support problem area (14-day/TSR3).**

*Description:* Employment and counseling for employment.

**178. Treatment Services Review - Family relationships problem area (14-day/TSR6).**

*Description:* Questions related to family relationships

**179. Treatment Services Review - Legal problem area (14-day/TSR5).**

*Description:* Questions relating to illegal activity and legal problems.

**180. Treatment Services Review - Medical problem area (14-day/TSR2).**

*Description:* Physical medical problems or general counseling sessions.

**181. Treatment Services Review - Psychological problem area (14-day/TSR7).**

*Description:* Questions related to psychological problems.

**182. YRBS/HS AIDS education.**

*Description:* One question regarding AIDS or HIV information from the school.

**183. YRBS/HS body weight.**

*Description:* 7 questions relating to perceptions and behaviors regarding body weight.

**184. YRBS/HS depression/suicide.**

*Description:* Questions related to affective state and suicide.

**185. YRBS/HS diet.**

*Description:* 7 questions relating to the respondent's dietary behavior during the preceeding 7 days.

**186. YRBS/HS history of use of various drugs.**

*Description:* Separate questions on past use of several drugs.

**187. YRBS/HS individual demography.**

*Description:* Age, race, sex etc.

**188. YRBS/HS individual substance use/alcohol.**

*Description:* Individual's use of alcohol.

**189. YRBS/HS individual substance use/marijuana.**

*Description:* Individual's use of marijuana.

**190. YRBS/HS individual substance use/tobacco.**

*Description:* Cigarette use.

**191. YRBS/HS physical activity.**

*Description:* 7 questions about respondent's physical activity.

**192. YRBS/HS safety practices.**

*Description:* YRBS/HS Individual safety related behaviors.

**193. YRBS/HS sexual behavior.**

*Description:* 8 questions about sexual behavior.

**194. YRBS/HS violence-related behaviors.**

*Description:* Individual violence-related behavior and attitudes toward violence - 11 items.

**Instruments****1. American Drug and Alcohol Survey**

*Description:* A broad based survey instrument intended to measure drug related attitudes and behaviors of male and female respondents.

**2. CSAP GPRA Client Outcome Measures for Discretionary Programs - Youth Form (2002).**

*Description:* Client outcome measures, record management data questionnaire for use in outcomes measurement of CSAP funded prevention programs. The instrument is recommended for use in a pre-test/post-test design.

**3. CSAP GPRA Participant Outcome Measures for Discretionary Programs - Youth - (2005).**

*Description:* Questionnaire addressing respondent behavior and attitudes toward drug use. Designed for use as an outcomes evaluation tool in CSAP funded substance abuse prevention programs.

**4. CSAP GPRA Participant Outcome Measures for Discretionary Programs - Adults (2005).**

*Description:* Questionnaire designed to gather outcome data on participants in CSAP funded substance abuse programs. The instrument is approved for such use by the OMB through 2005.

**5. CSAP Substance Abuse Risk and Protective Factors Student Survey (SARPF).**

*Description:* A broad based questionnaire used to assess students' attitudes, perceptions, and behavior regarding ATOD use.

**6. CSAT Follow-up Meeting Satisfaction Survey - Modified for PrevTech Application**

*Description:* This is a follow-up survey intended to measure the post meeting satisfaction level among attendees. The instrument is OMB approved through 12/31/2004.

**7. CSAT Baseline Meeting Satisfaction Survey - Modified for PrevTech Application**

*Description:* This is a survey intended to gather participant responses immediately following a formal meeting or presentation. Questions address consumer perspectives on the utility and quality of presentations, applicability of material to attendees' professional activities and demographic descriptors of attendees. The instrument is OMB approved through 12/31/2004.

**8. CSAT Baseline Technical Assistance Satisfaction Survey - Modified for PrevTech Application**

*Description:* This survey instrument consists of questions to determine the degree to which CSAT provided TA satisfied the needs of the recipients. The instrument is OMB approved through 12/31/2004

**9. CSAT Baseline Training Satisfaction Survey**

*Description:* Twenty-four questions intended to measure trainee satisfaction with CSAT sponsored training.

**10. CSAT Baseline Training Satisfaction Survey - Modified for PrevTech Application**

*Description:* This survey is designed to gather participant responses immediately after a training event. Questions address trainees' perspectives on the utility and quality of training received and applicability of training to trainees' professional responsibilities, as well as demographic descriptors of the trainee group. The instrument is OMB approved through 12/31/2004.

**11. CSAT Follow-up Technical Assistance Satisfaction Survey - Modified for PrevTech Application**

*Description:* A survey instrument intended to assess the longer term satisfaction of CSAT TA recipients with technical assistance events. The instrument is OMB approved through 12/31/2004.

**12. Faith and Community Based Readiness Checklist**

*Description:* An instrument intended to help grassroots faith and community based organizations begin to determine their preparedness to seek federal support for thie social service programs.

**13. MDS3 - Modified for PrevTech Application**

*Description:* Essential Minimum Dataset Tool

**14. Performance Partnership Grant: Required Measures/Outcome**

*Description:* CSAP required measures for PPG funded programs

**15. Prevention Planning Survey (PPS)**

*Description:* A broad based survey instrument intended to measure drug prevention needs in populations of school age children and young adults.

**16. Student Information+Rosenberg Self-Esteem Scale**

*Description:* A 10-item scale to measure respondent's self esteem/Personal information items drawn from the SSRPF

**17. Treatment Services Review (14 Day).**

*Description:* Series of questions to characterize treatment services delivered by one or more provider settings. Addresses medical problem areas, employment and support problem areas, alcohol and drug problem areas, alcohol and drug testing, legal problem areas, family relationships problem areas, and psychological problem areas.

**18. Youth Risk Behavior Survey - High School (2003) YRBS-HS - Modified for PrevTech**

*Description:* Survey of drug and health related behavior among high school students.

## ***Appendix F—Evaluation Types***

There are many types of data that may be collected for evaluations, including process data, outcome data, and cost data. The Database Builder software focuses on collection of outcome data, though it can be used to collect other types of data as well. The MDS software, which can be run on the same server as the Database Builder, focuses on process evaluations related to the dosage (e.g. number of sessions) and demographics (the race, gender and age of participants). A brief explanation of various types of evaluations, and the data that is collected for them, is provided in this appendix.

*Process Evaluations* focus on how a program was implemented and operates. It identifies the procedures undertaken and the decisions made in developing the program. It describes how the program operates, the services it delivers, and the functions it carries out. It addresses whether the program was implemented and is providing services as intended. However, by additionally documenting the program's development and operation, it allows an assessment of the reasons for successful or unsuccessful performance and provides information for potential replication.

*Outcome evaluations* are used by management to identify the results of a program's effort. It seeks to answer the question, "What difference did the program make?" It provides management with a statement about the net effects of a program after a specified period of operation. This type of evaluation provides knowledge about: (1) the extent to which the problems and needs that gave rise to the program still exist, (2) ways to ameliorate adverse impacts and enhance desirable impacts, and (3) program design adjustments that may be indicated for the future.

*Impact Evaluations* ask this question: "What effect did the intervention activity have on components of the system in which the activity was targeted?" Both negative and positive outcomes that are corollary to the intervention objective may occur. Structured collection of such impact information can provide important information to the planning of subsequent intervention activities. Interviews with officials of the system can yield some impact information, while more in-depth study of particular aspects of the system--such as dropout rates or attendance in a school system--may be instructive.

*Return on Investment (ROI)* evaluations are not currently performed often in prevention work, probably because there is little data currently collected on the costs and savings for prevention. However, some work in this area has been done by CSAP DCC. The ROI is a return ratio that compares the net benefits of a project, versus its total costs. For example, if a project has an ROI of 200%, the net benefits derived from the project are double those of the expected total costs to implement the project. As such, the ROI calculation represents the relative value of the project's cumulative net benefits (benefits less costs) over the analysis period, divided by the project's cumulative total costs, expressed as a percentage.

## ***Appendix G—Reporting Software***

There are a number of off-the-shelf reporting software programs available on the market that can be used with the Database Builder to complete your reporting needs. These can be divided into two general categories: statistical analysis/reporting software that works with downloaded datasets from your databases, and online data reporting tools that work with live data on your system.

Perhaps the best known of the former tools are SYSTAT, SPSS, and Microsoft Excel. SYSTAT and SPSS are used for data analysis, providing complete statistical analysis features, and are most often used by professional evaluators as they require considerable training and experience. Excel, a spreadsheet program, is used for simple statistical analysis and for sorting and producing graphs and charts. Microsoft Access, a database program, can also be used by those with experience for producing reports, and can import data from Excel spreadsheet files.

Of the latter tools, there are many commercial software packages that can be used to develop reports from live data. Perhaps the best known is Crystal Reports (<http://www.businessobjects.com>), which provides a family of reporting products ranging in price from \$500 to \$5,000. Crystal Reports is well known in the technical field, and there are numerous training programs, workshops, books, and technical support companies backing up the software. Custom reports can be developed quickly with this product, and it is easy to locate programmers that can create report templates as required, which can then be modified by your organization.

## Appendix H—National Outcome Measures

### SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION NATIONAL OUTCOME MEASURES

OUTCOME	TREATMENT		PREVENTION
	Mental Health	Substance Abuse	Substance Abuse Prevention
Abstinence from Drug Use/ Alcohol Abuse	not applicable	Change in percentage of clients abstinent at discharge compared to the number/ proportion at admission <sup>2/</sup>	30-day substance use (non-use/reduction in use) <sup>2/</sup> Availability of alcohol and tobacco. Availability of other drugs <sup>1/</sup> Percentage of program participants and percentage of population who perceive drug use as harmful. <sup>2/</sup> Attitude toward use among program participants and among population at large
Decreased Mental Illness Symptomatology <sup>1/</sup>	Decreased symptomatology <sup>1/</sup>	not applicable	not applicable
Increased/Retained Employment or Return to/Stay in School	Profile of adult clients by employment status, increased school attendance (children) <sup>1</sup>	Change in percentage of clients employed at discharge compared to the percentage at admission	Increase in school attendance <sup>1</sup> ; Decrease in ATOD-related suspensions/expulsions <sup>1</sup> ; Decrease in drug-related workplace injuries <sup>1</sup>
Decreased Criminal Justice Involvement	Profile of client involvement in criminal and juvenile justice systems <sup>1</sup>	Change in percentage of clients with criminal justice involvement at discharge compared to the percentage at admission	Reduction in drug-related crime <sup>1</sup>
Increased Stability in Family and Living Conditions	Profile of clients' change in living situation (including homeless status)	Percentage of clients in stable living situations at discharge compared to the number/proportion at admission (i.e., housing)* <sup>1</sup>	Increase in parent participation in parenting skills building <sup>1</sup>
Increased Access to Services (Service Capacity)	Number of persons served by age, gender, race and ethnicity <sup>2</sup>	Unduplicated count of persons served <sup>1/2/</sup> Penetration rate – Numbers served compared to those in need <sup>1/</sup>	Number of persons served by age, gender, race and ethnicity
Increased Retention in treatment – substance abuse	not applicable	Length of stay <sup>1/</sup> Unduplicated count of persons served* <sup>2</sup>	not applicable
Reduced utilization of psychiatric inpatient beds – mental health	Decreased rate of readmission to state psychiatric hospitals within 30 days and 180 days <sup>1/2/</sup>	not applicable	not applicable
Increased Social Supports/Social Connectedness <sup>3/</sup>	TO BE DETERMINED (Initial indicators and measures have not yet been identified)	TO BE DETERMINED (Initial indicators and measures have not yet been identified)	TO BE DETERMINED (Initial indicators and measures have not yet been identified)
Client Perception of Care <sup>2/</sup>	Clients reporting positively about outcomes <sup>2/</sup>		
Cost Effectiveness <sup>2/</sup>	Number of persons receiving evidence-based services <sup>1/2/</sup>	Percentage of States providing substance abuse treatment services within approved cost per person bands by the type of treatment <sup>1/2/</sup>	Increase services provided within cost bands <sup>1/2/</sup>
Use of Evidence-Based Practices <sup>2/</sup>	Number of evidence-based practices provided by State <sup>2</sup>		Increase services provided within cost bands <sup>1/2/</sup> Total number of evidence-based programs and strategies funded by SAPTBG <sup>2/</sup>

<sup>1/</sup> Developmental

<sup>2/</sup> Required by OMB PART Review

<sup>3/</sup> SAPTBG (SAPTBG) (SAPTBG)