Using Needs Assessment to Drive Decision Making

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Learning Objectives

- Describe with concept of need assessment and how it applies to SDFS programming
- Identify and learn to access various types of local data relevant to SDFS prevention efforts
- Interpret and summarize data into key findings
- Consider how to prioritize key findings for SDFS
- Use prioritized key findings to develop SDFS outcome goals
- Anticipate and plan to address common roadblocks in effective SDFS needs assessment and goal development
What is Needs Assessment?

- **Identify challenges and strengths** related to youth alcohol, tobacco and other drug (ATOD) use and violence/safety in the schools and community.

- **Identify gaps in resources** to address identified challenges.
## How Does Needs Assessment Fit in SDFS Programming?

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<th>The Terrain</th>
<th>The Journey</th>
<th>The Destination</th>
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<td>Resources/Inputs</td>
<td>Activities &amp; Outputs</td>
<td>Outcome Goal(s)</td>
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<td>What principles/needs are guiding this program?</td>
<td>What are the basics needed to accomplish our goals?</td>
<td>What do we have to do to insure our goals will be met?</td>
<td>What can we accomplish in one or two years?</td>
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### Needs Assessment
- Identify challenges and strengths; identify existing and needed resources to address challenges.

### Process Evaluation
- Monitor various aspects of programming: planning, training, implementation, participation, and stakeholder reactions.

### Outcome Evaluation
- Assess short- and long-term changes in the program participants.

### Long-term Outcomes/Impact
- What is our broad vision for the future?
What Does Good Needs Assessment Look Like?

- **Maximum clarity** in understanding challenges and strengths and identifying gaps in resources to adequately address challenges.
Needs Assessment: Gaining Maximum Clarity

Why here?

Why?

Risk Factors

Protective Factors

What?

Risk Behaviors

Contextual Factors
Types of Local Data for SDFS

- **Risk behaviors** are behaviors that:
  - contribute to the leading causes of morbidity and mortality among youth and adults,
  - often are established during youth,
  - extend into adulthood,
  - are interrelated, and
  - are preventable
Types of Local Data for SDFS

Example risk behaviors:

- Behaviors that contribute to violence and unintentional injuries
  - Gun and weapon carrying
  - Recent physical fighting
- Tobacco use
  - Recent (past 30-day) use, lifetime use, regular use
- Alcohol and other drug use
  - Recent use and lifetime use
Types of Local Data for SDFS

- What risk behaviors seem most prevalent in your district/community?
- How do you know?
Types of Local Data for SDFS

- **Risk factors**

   Any circumstances that increase youths’ likelihood of engaging in risky behaviors.
Protective factors

Any circumstances that promote healthy youth behaviors and decrease the chance of engaging in risky behaviors.
Types of Local Data for SDFS

- What risk and protective factors seem connected to the prevalent risk behaviors in your district/community?

- How do you know?
Types of Local Data for SDFS

- **Contextual factors:**
  Local community conditions that help explain why things are the way they are.
  - History
  - Norms
  - Economy
  - Geography
  - Boundaries
  - Demographics
  - Supply and Demand

- Politics
- Policies
- Issues around planning
- Prevention infrastructure/workforce
- Resources
What contextual factors seem connected to the prevalent risk/protective factors in your district/community?

How do you know?
Sources of Local Data for SDFS

Examples from the SDFS Application:

- **Evaluation(s)** of SDFS goals and objectives
- **Reports on support services for students** (e.g., student assistance referrals)
- **Law enforcement data** (e.g., number of youth arrests, types of violations)
- **Student self-report survey results** of ATOD and/or violent behavior (e.g., Michigan Profile for Healthy Youth - MiPHY)
- **Student discipline reports** for violence, safety,
- **Student suspension and dropout data**
- **Referrals to outside agencies** for treatment services
- **Focus groups and interviews**
- **Health data** (e.g., students with drug-related problems treated/referred at a teen health center)
Needs Assessment Checklist

1. Maximize the clarity of the needs assessment
   - Involve your SDFS Advisory Council.
   - Include “data” people on the SDFS Advisory Council.
   - Include risk behaviors (ATOD and violence), risk/protective factors, and contextual factors.
   - Use data that are:
     - reliable and valid.
     - from a variety of sources.
     - quantitative (e.g., statistics) and qualitative (e.g., compelling stories).
     - collected over multiple time periods (trend data).
     - comparable to regional, state, and/or national sources (benchmark data).
   - Use common, meaningful, user-friendly metrics (e.g., %s).
Needs Assessment Checklist

2. **Keep the process focused and productive**
   - Identify one risk behavior problem at a time.
   - Avoid blame.
   - Avoid naming specific solutions.
   - Define the problem by the behaviors and conditions that affect it.
   - Reflect school/community concerns as heard during the assessment process.
   - Keep good notes.
Needs Assessment Checklist

3. **Identify key risk behavior(s)**
   - **Review** results on ATOD and violence risk behaviors
   - **Ask** the group to brainstorm a list of the most problematic risk behaviors.
   - **Discuss** any connections between risk behaviors using evidence from data – take notes.
   - **Vote** on the top two or three risk behaviors – take notes about why.
   - **Report** each top risk behavior as a problem statement, with accompanying evidence.
   - **Example:** “Too many young adults are using marijuana. Among high school students, self-reported marijuana use in the past 30 days has increased 5% over the past four years (2004: 15% vs. 2008: 20%) and now exceeds the state average of 18%.”
Needs Assessment Checklist

4. For each risk behavior, answer the question, “But why (this risk behavior)?”

- **Review** available data on risk and protective factors.
- **Write** the key risk behavior in the middle of a large piece of flip chart paper. Use a separate page for each risk behavior.
- **Ask** the group to brainstorm a list of risk/protective factors linked to the risk behavior(s) by asking, “But why (this risk behavior)?”
- **List** the risk/protective factors on the flip chart next to the risk behavior.
- **Vote** on the top two or three risk/protective factors. Take notes about why.
4. (continued) “But why (this risk behavior)?”

- **Write** a summary of the data, including statistics, associated with the top risk/protective factors.

- **Example:** “High levels of marijuana use among high school students seems linked to their perceptions of easy access to marijuana and low perceived harm in using marijuana. Both of these risk factors were higher for high school students in 2008 (perceived easy access: 35%; perceived harm: 40%) than in 2004 (perceived easy access: 45%; perceived harm: 50%).
Needs Assessment Checklist

5. For each risk/protective factor, answer the question, “But why here (in our community)?”

- **Review** available data on contextual factors.
- **Use** the results of the “But why?” exercise and select an identified risk/protective factor.
- **Ask** the group to brainstorm contextual factors linked to the risk/protective factor by asking, “But why here in our community?”
- **List** the contextual factors on the flip chart next to the risk/protective factor.
- **Vote** on the top two or three contextual factors. Take notes about why.
5. (continued) “But why here (in our community)?”

- **Write** a summary of the data, including statistics, associated with the top contextual factors.

- **Example:** “High school students perceptions of easy access to marijuana seem connected to a lot of drug dealers who are not students in the district, but have been seen by students and staff near after-school events and who have made friends with several of our district students. Our students’ perceptions of little or no harm from using marijuana can be attributed to several factors: (a) less emphasis on the dangers of marijuana use in our new health education curriculum (vs. the old curriculum), (b) a large influx of new students in the district (over 100) who have not been exposed in previous grades to any health lessons about the dangers of marijuana use, and (c) a lower percentage of new students who felt connected to school (35%) compared to students in the district for at least two years (58%).
6. **Determine which risk behavior(s) will be the focus of your SDFS grant by considering:**

- **Importance:** How important is this behavior to key stakeholders?
- **Impact:** How much will a change in this risk behavior improve the health and safety of our youth?
- **Effort:** How much in human and physical resources and expertise is needed to reduce this risk behavior among our youth?
- **Collaboration:** Can the behavior be addressed more effectively by having other sectors (e.g., health community) lead or collaborate in the effort?
Zooming in on the SDFS grant

- Write Needs Assessment Summary
- Develop Outcome Goal(s)
- Select Program(s)
Zooming in on the SDFS grant

Write Needs Assessment Summary

- Complete SDFS needs assessment checklist
- Access the SDFS application in the Michigan Electronic Grant System (MEGS).

Go to Section 2, “Summary of Needs Assessment…”

- Section “2b”: list each targeted risk behavior and for each, insert the narrative summaries from Step 4 (“But Why?”) and Step 5 (“But Why Here?”) of the needs assessment checklist.
- Section “2a”: attach/insert the “problem statement” for each targeted risk behavior from Step 3 of the needs assessment checklist.
Zooming in on the SDFS grant

Develop Outcome Goal(s) - See handout

1. What constitutes an outcome goal for the SDFS Program?

2. Why must the outcome goal include so much information?

3. Does each participating local education agency (LEA) need an outcome goal?

4. Is a consortium required to have an outcome goal?

5. Are nonpublic schools required to have needs assessment, goals, and evaluation?

6. How many outcome goals are required? Do I have to have outcome goals for drug use prevention and violence prevention?
Zooming in on the SDFS grant

Develop Outcome Goal(s) - See handout

7. I’m not sure what percentage of change expected in attitude/behavior. What should I do?

8. How broad/narrow should my target population be?

9. What should I consider in selecting a program?

10. What types of measures can I use to assess outcomes?

11. Where can I find measures to assess my outcome goal(s)?

12. Can I develop my own measure or customize an existing measure?
Questions?