Chapter 3: Needs Assessment and Curriculum Development

“Just as good physicians get to know their patients and make diagnoses before undertaking treatment, good planners must get to know the population under study and define its problems before recommending actions” (Butler, 2001).

After reading this chapter, the reader will be able to:

- Describe the demographic characteristics of the target population.
- Collect existing information about the substance abuse problem and risk factors in the target group’s community and school/organization.
- Obtain—through interviews with community leaders and school/organization officials—additional information and opinions regarding the community’s and school’s substance abuse problem, risk factors, and prevention efforts.
- Gather specific information on knowledge, attitudes, and beliefs from the target population through surveys and focus groups.
- List institutional resources that are available for substance abuse prevention efforts.
- Organize the collected information on the target group and institutional resources to identify, select, and implement interactive activities.
- Select from the list of candidate activities and materials those that will be included in the prevention curriculum.

Overview

This chapter provides prevention leaders with the necessary tools to identify the characteristics of the target group, its substance abuse problems, and the institutional resources available for substance abuse prevention. With the assistance of the Curriculum Builder, this chapter will also guide the prevention leader in the development of a customized substance abuse prevention curriculum. When entered into the Web-based Curriculum Builder, the information collected through the needs assessments will be used to automatically identify interactive activities that meet the needs of the target population, thus creating a customized prevention curriculum within the scope of available time and financial resources.

The tasks of the prevention leader include:

- Conducting a needs assessment to determine the most relevant information about the target population and its immediate environment.
- Selecting activities according to recommended content areas, emphasizing areas deemed appropriate by needs assessment findings.
- Considering the National Health Standards (for classroom teachers with mandated health education requirements) and the learning styles each activity engages.
- Ensuring that the substance abuse prevention activities and materials that accompany them are customized to as many of the target population’s demographic characteristics as possible.

Combining the above steps will help ensure that the substance abuse prevention curriculum is comprehensive and holds greater potential for being effective.

The forms used for the collection of information are part of the Curriculum Builder, the tool within the Curriculum Guide (Web site) that walks users through the process of needs assessment, interpretation of data, and selection of activities for the curriculum.

Needs Assessment

Balancing the Need for Information With Time and Financial Constraints

In any endeavor, there are ideal approaches for which the additional time and effort required bring the promise of more successful outcomes. The process of undergoing a needs assessment is no different. Ideally, prevention leaders will have either access to a needs assessment conducted at the school or district level (the availability of which has increased with requirements of the Safe
and Drug-Free Schools Act) or the motivation, time, and financial resources to conduct one. The result in either case is an improved understanding of the prevention needs of the target population. Substance abuse prevention activities based on this understanding will have a greater likelihood of achieving their desired effects.

However, prevention leaders are likely to be faced with time and financial constraints that do not permit a comprehensive approach to needs assessment. While there may be sufficient motivation, this motivation must be balanced against competing priorities and demands on limited resources.

Prevention leaders who are limited to only basic needs assessment options should be reassured that even these should result in a substance abuse prevention curriculum that is more customized to a particular target population than are other available curriculum options. It is also not unreasonable to first build a curriculum using the prevention leader’s current understanding of the target group and revisit the needs assessment process later in order to improve efforts for subsequent, similar target groups.

Likewise, prevention leaders who have the resources to conduct more comprehensive needs assessments will likely gain substantially from such additional efforts. The resulting curriculum will be better customized to the needs of the target group by including community-, school/organization-, and classroom-based data that reflect more specifically the risks faced by each audience. Specific substance use data can also be incorporated into activities—particularly those focused on normative beliefs—thus helping youth develop a less exaggerated understanding of the extent to which their peers are using substances. In addition, when armed with target-population-specific data, the prevention leader may feel more prepared and motivated to be thorough in assembling and implementing a curriculum, further enhancing the likelihood of achieving desired results. The data collection process itself may have secondary benefits as well, creating allies in substance abuse prevention in the source institution and/or community.

**Types of Information**

The following categories form the comprehensive basis on which prevention curricula can be built:

- Demographics (gender, age, race/ethnicity, geographic location) and intervention setting (school or organization).
- Risk and protective factors for substance abuse.
- Substance abuse problems, including knowledge, attitudes, beliefs, and behaviors.
- Institutional information (e.g., drug policies, approval process for use of new educational materials, available resources).

Ideally, information should be gathered at three levels: community, school/organization, and class/group. If information on demographics is already available, further research and data-gathering requirements for demographics may be minimal. Other information—such as the substance use problems affecting the target group or risk factors in the community—may, however, require greater collection efforts. For example, it may be necessary to conduct research on existing sources of information about the community (e.g., reports from the police department), conduct interviews with school/organization officials and community leaders, and/or conduct surveys and focus groups with members of the target population. As discussed above, the degree of complexity of the information-gathering task will depend on the amount of time and effort the prevention leader can provide.

**Demographics and Setting**

The demographic characteristics of the target group (gender, age, race/ethnicity, and geographic location) will guide the selection and implementation of interactive activities. Most activities are classified by grade level or age. In recent years, an increasing—although still limited—number of activities have been customized to specific ethnic/cultural groups, and a few are designed to address issues related to other demographic characteristics, such as the geographic location of the target group (e.g., inner city/urban, suburban, or rural). In addition, most activities are designed for both female and male youth, although some activities may be more applicable to one gender than the other. Many substance abuse prevention materials, however, (e.g., videos, CDs) are customized to address demographic characteristics of the target group or specific types of substance abuse. These materials generally are used in combination with interactive activities.
Data collected by the prevention leader will most likely be at the class/group level. However, other sources of information, such as school district- or communitywide data, may have to be extrapolated to the target audience.

**Risk and Protective Factors**

Risk and protective factors for substance abuse are numerous and relate to different aspects of an individual’s life (community, school, family, peers, and self). A composite of these factors determines an individual’s overall risk for or resistance to substance abuse. (See Chapter 4 for a more comprehensive review on risk and protective factors.)

A general knowledge of the risk and protective factors to which the target group is exposed can be a helpful tool in determining which substance abuse prevention content areas to stress in the curriculum and, thus, which interactive activities to select and implement.

Environmental factors tend to play a more universal role in increasing risk of substance abuse than risk factors that are specific to individuals, such as school performance and behavioral disorders. Environmental factors associated with increased risk for substance abuse are those that indicate that substance abuse is accepted and/or the norm in a given setting. Examples may include:

**School Risk Factors**

- Pro-drug-use norms.
- Availability of drugs in or near the school.
- Poor school academic climate.

**Community Risk Factors**

- Lack of positive afterschool academic programming.
- Lack of positive afterschool and weekend recreational programming.
- Low levels of law enforcement of underage use of both legal and illegal drugs; beliefs that substance abuse is generally tolerated.
- Easy access to drugs.
- Misperceptions of the extent and acceptability of substance-abusing behaviors in school, peer, and community environments.
- Poverty.

Such environmental risk factors will not necessarily predict substance abuse problems, but it is safe to say that exposure to any combination of them may create a need for substance abuse prevention, primarily by enhancing youths’ protective factors, which may be as important as addressing other prevention content areas.

Other risk factors relate to school bonding/climate and/or academic performance. Failing grades or lack of motivation to do schoolwork, for example, can signal the need for programs that enhance protective factors within the scope of the school environment (e.g., activities that help build a sense of self-worth or set goals for the future).

As discussed in Chapter 2, prevention programs can be classified by the different levels of prevention needs and approaches based upon the target population’s likelihood of developing substance abuse problems. Thus, universal programs target general populations at average or moderate risk and are not selected based upon risk characteristics; selective programs target subsets of the total population considered to be at risk for substance abuse by virtue of their membership in a particular population segment (e.g., children of alcoholics, school dropouts, runaway youth); and indicated programs target specific at-risk individuals who exhibit early signs of substance abuse and other problem behaviors associated with substance abuse. Based on the target population, these programs are intended to reflect the intensity and duration of the prevention effort, and the level at which personal risk factors for substance abuse are targeted will vary.

Full assessment of the risk and protective factors of individuals in the target group is conducted only in indicated prevention programs. Personal risk is generally not assessed in selective prevention programs, except as it involves belonging to a high-risk group. Likewise, risk and protective factors are not assessed in universal programs. Thus, assessment of personal risk factors will depend on the type of prevention program being implemented. Personal risk factors, including those related to a specific at-risk group, are targeted in selective and indicated programs through the various services the programs offer, including those services that may use interactive activities (e.g., life-skills training). The provision of guidelines for the selection of a substance abuse prevention program or full assessment of personal risk and protective factors is beyond the scope of this Handbook.
Information on environmental risk factors that render the target group vulnerable to substance abuse can be collected at the community and school/organization levels through interviews and existing data. Information on risk factors associated with school bonding and academic performance can be collected through surveys and focus groups with members of the target population.

Most activities that make up a substance abuse prevention curriculum focus on individual and interpersonal rather than environmental change. However, environmental risk factors that place youth in the target population at increased risk may be offset by enhancing protective factors in general.

Substance Abuse Problems, Including Knowledge, Attitudes, Beliefs, and Behaviors

Information on the nature and extent of substance use at the community, school, and target population levels is helpful to both the selection of interactive activities—since some activities address specific drugs (e.g., content analysis of cigarette advertisements)—and the implementation of those activities. Collecting substance abuse information directly from the target population:

- Provides insight into what members of the target population know about drugs and their effects.
- Tells how they feel about the use of drugs and the resulting problems.
- Reveals their perceptions regarding both the harmfulness and tolerance of substance abuse.
- Reveals the extent to which they are involved in the use of substances.

Such information provides insight into the vulnerabilities of the target population to substance abuse and its associated negative outcomes.

Information on the substance abuse problem affecting the target population can be obtained through surveys and focus groups conducted with that population and/or inferred from other data sources. Other information on substance use problems can be gathered through interviews with members of the community and school personnel. Information as to which drugs are most widely used, including the prevalence of substance abuse, trends in substance abuse, and settings in which substance abuse occurs, as well as drug-related crime and drug-related health issues at the community level, are often available from existing sources (e.g., reports from the local health and police departments). Records on substance abuse incidents in the targeted school/organization might also be available in the institution’s main office.

Institutional Information

In addition to collecting information regarding the target population itself, it is important to gather information on the target group’s school or youth organization. This information should include:

- School/organization policies related to substance abuse.
- The approval process for use of new educational materials on substance abuse prevention.
- Lessons learned from previous prevention efforts.
- Resources available for substance abuse prevention.

School/Organization Policies Related to Substance Abuse

As stated in Chapter 2, it is important to be familiar with and follow the institution’s policies regarding substance use. It is important to know whether policies are clear, if they are communicated to the staff and youth, and if they are enforced. Unclear policies and lack of or poor enforcement not only represent environmental risk factors but can also seriously undermine substance abuse prevention efforts. It also helps to be well informed about the consequences of breaking the institution’s drug policies, since this information may be useful in implementing activities regarding drugs and their relation to the law and school policy.

The Approval Process for Use of New Educational Materials

It is important to know whether there is a process for obtaining approval for the use of new educational materials related to substance abuse prevention and, if so, determining who is responsible for administering and monitoring the process, what the process involves, and how long it takes to secure approval.
Resources Available for Substance Abuse Prevention

Resources available for substance abuse prevention efforts constitute a key element in the selection of interactive activities. These resources include:

- **Time**: Knowing how much time can be devoted to substance abuse prevention and how this time is distributed throughout the school year is important to the selection of curriculum activities because: (1) some activities may require longer sessions than others; and (2) it provides a framework within which the prevention leader can prioritize activities so that the curriculum includes appropriate time for and emphasis on all content areas and engages a variety of learning styles.

- **Money**: The availability of financial resources is important in determining the extent to which activities and materials can be purchased. Many activities and materials are free, and the *Curriculum Guide* allows prevention leaders to search for materials according to cost.

- **Facilities/equipment**: Information on available equipment and facilities, such as overhead projectors, VCRs, DVD players, etc., is also important. The Curriculum Builder will identify only activities and materials that match the facilities and equipment available to the prevention leader.

- **Personnel**: Certain activities may require more than one leader; thus, it is important to know whether teachers’ aides, parent volunteers, student teachers, counselors, and/or other institutional personnel may be available to assist in these activities.

The Information-Gathering Process

The preceding section discussed types of information to collect and why. This section describes how to collect this information via four methods:

- Using existing sources.
- Conducting interviews.
- Administering surveys.
- Conducting focus groups.

These methods are intended to provide relevant information (substance abuse statistics; youth knowledge, attitudes, beliefs, and behaviors; and risk factors) and are designed to gather information at different levels (community, school/organization, group/class). In general, the information will be collected informally and will not require scientific analysis. Informal interpretation of the data, however, will provide a good understanding of the target group. It is recommended that the collected data be shared with the school/organization administration.

The Curriculum Builder contains printable (PDF) forms for recording information from various sources. Information from reports or informational sheets obtained from the Internet and various community sources can then be entered into the electronic forms, which directly incorporate the collected data into the automated process for identifying activities appropriate for the target population.
**Method 1: Using Existing Sources**

Because some of the information sought may already have been compiled, it is important to obtain as much existing information as possible from the target group’s community and school. This includes information on recent substance abuse statistics; prevalence of substance abuse by age, drug, race, and gender; trends; risk factors; community leaders; and other topics. The following questions can be used as guidelines:

- What are the main substances being used by young people in the target group’s community? (What drugs do youth have in their possession when they are arrested? What are their ages? What do they report as their drugs of choice when they are admitted for drug treatment? What new drugs are emerging in the target group’s community?)

- What environmental risk factors for substance abuse do young people in the target group’s community face? Not everyone will share these risk factors, but it is important to try to find the ones that affect the largest segment of the target population.

- What are the protective factors for youth in the target group’s community?

- What other information do experts think is needed? (What are the results of previous prevention efforts? What has been learned from those efforts?)

**The Target Group’s School/Organization**

The best place to start looking for existing information is in the administrative office of the target group’s school or organization. This is especially true of demographic information, which is routinely collected on forms and/or in databases by most schools and many organizations. Many schools also have reports and records on substance abuse and related information on file. Some schools participate in national and/or local surveys related to substance abuse. Such information may be available in the main office.

**The Internet**

A surprising amount of data can be obtained via the Internet. Web sites of the local police department, health department, school district, and other local government sites may contain useful data. For instance, police departments often have district reports of drug-related crimes that can provide data on arrest rates for various drugs in the target group’s area. If the information is not directly available on the Internet, it can usually be obtained by contacting the person or office listed for assistance. Search guidelines and a list of potentially helpful Web sites are found below. Some sites may have data at local levels or links to local sites with comparable data from the target group’s area. If Internet access is a problem, many libraries have Internet access and reference librarians who can help find online information.

**Searching the Internet for Substance Abuse Information on the Target Group’s Community**

**Formulate an Internet search strategy:**

First, decide how likely the topic is to be addressed on the Internet.

Next, decide how current the materials should be. For purposes of this Handbook, substance abuse information less than 2 years old is optimal. Expect to find current information on the Internet; however, do not assume that it will be updated frequently.

**Then:**

Choose a type of Internet resource. Information can be obtained from local government Web sites; however, searches can also include local nonprofit organizations that work in the target group’s community. Once the information desired has been defined, search engines and directories can point users to potentially appropriate Web sites.

**Narrow the search:**

The search engine will automatically narrow the search, but if too many “hits” are returned (e.g., health department), try to perform a more specific search by adding another term (e.g., New York City health department). Almost all search engines feature a link to an “advanced search,” with instructions on how to combine or eliminate terms. Most search engines rank the occurrence of terms so that entering “drug statistics” will result in pages with the most matches for both terms first. Usually, the search engine...
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Method 2: Interviews

Interviews can be used to obtain specific information from individuals who have information others do not. Interviews need not be extensive or time consuming (they can take place in a few minutes during a break, over the telephone, or even via fax or e-mail) and can aid in obtaining information in three areas:

- The substance abuse problem and risk factors in the target group’s community and school/organization
- Drug policies and regulations of the target group’s institution
- Incidence of illicit drug, alcohol, and tobacco use in the population since 1971.

http://ojjdp.ncjrs.org/

The Office of Juvenile Justice and Delinquency Prevention (OJJDP) is a source for youth-focused publications and other resources available from OJJDP, other agencies within the Office of Justice Programs, other Federal Government entities, and agencies and organizations around the country and the world.

http://factfinder.census.gov

This link is part of the National Drug Control Policy’s Web site and is a listing of all Federal drug data sources.

http://www.oas.samhsa.gov/

The National Survey on Drug Use and Health (NSDUH) is an annual survey conducted by the Substance Abuse and Mental Health Services Administration (SAMHSA). This survey has been the primary source of estimates of the prevalence and incidence of illicit drug, alcohol, and tobacco use in the population since 1971.

Helpful Internet Sites

http://www.childstats.gov

This Web site offers easy access to Federal and state statistics and reports on children and their families, including population and family characteristics; economic security; health; behavior and social environment; and education.

http://www.monitoringthefuture.org/

Monitoring the Future is an ongoing study of the behaviors, attitudes, and values of American secondary school students, college students, and young adults. Each year, a total of some 50,000 8th-, 10th- and 12th-grade students are surveyed (12th graders since 1975 and 8th and 10th graders since 1991).

http://www.whitehousedrugpolicy.gov/drugfact/sources.html

This link is part of the National Drug Control Policy’s Web site and is a listing of all Federal drug data sources.

http://www.oas.samhsa.gov/

The National Survey on Drug Use and Health (NSDUH) is an annual survey conducted by the Substance Abuse and Mental Health Services Administration (SAMHSA). This survey has been the primary source of estimates of the prevalence and incidence of illicit drug, alcohol, and tobacco use in the population since 1971.

http://ojjdp.ncjrs.org/

The Office of Juvenile Justice and Delinquency Prevention (OJJDP) is a source for youth-focused publications and other resources available from OJJDP, other agencies within the Office of Justice Programs, other Federal Government entities, and agencies and organizations around the country and the world.

http://factfinder.census.gov

This link is part of the National Drug Control Policy’s Web site and is a listing of all Federal drug data sources.

http://www.oas.samhsa.gov/

The National Survey on Drug Use and Health (NSDUH) is an annual survey conducted by the Substance Abuse and Mental Health Services Administration (SAMHSA). This survey has been the primary source of estimates of the prevalence and incidence of illicit drug, alcohol, and tobacco use in the population since 1971.

Step 1: Become familiar with relevant topics, potential interviewees, and the organizations with which they are affiliated.
Step 2: Prepare a list of questions (include as many of the questions printed on the PDF interview forms as possible) and rehearse the course of the interview. Hints for preparing questions include:

- Organize questions from general to specific. Ask “easy” questions first; then, progress to more specific questions. This technique is especially helpful for in-person or telephone interviews because it helps build rapport. For example, when interviewing a police chief (or other police spokesperson), general questions might include: “How long have you worked in this position?” “What did you do before (if anything)?” and “Why did you choose this profession?” Then, more specific questions can be asked, such as “How many minors are arrested for possession of illegal drugs each year?” and “What is the most common drug youth are arrested for?” Toward the end of the interview, questions that involve some reflection, like, “Based on your involvement with youth who are arrested for drugs and youth who participate in substance abuse prevention programs, what would you say are effective strategies to prevent substance abuse among young people?”

- Supplement questions with follow-ups. Follow up relevant ideas and topics even when these are not on the original list of questions. For example, a police chief may mention that youth in the target group’s community are arrested most often for possession of marijuana and that a number of youth have been taken to the psychiatric hospital after smoking fry or illy, a marijuana cigarette soaked in embalming fluid that contains PCP (Elwood & Moore, 1998). Since this item is not on the standard list of drugs, follow-up questions asking for a description of the drug, who uses it, and its effects would be appropriate.

Step 3: Schedule a time for the interview. Call the person to be interviewed and explain the nature of the interview. Ask whether a meeting in person or via telephone is preferred. Some busy people may request an e-mail interview; agree to this only as a last resort, because it does not allow the same level of responsiveness (e.g., follow-up, clarification) as an in-person or telephone interview. If the potential interviewee is too busy to do the interview, ask to speak with another person who is knowledgeable in the same area (e.g., instead of a police chief, an information officer may be available). This person may have comparable (or even better) information to offer and more time to devote to the interview.

**Important Information About Anonymity, Confidentiality, and Permissions**

Collecting data from children and adolescents is a delicate matter, whether as part of a survey or in a focus group. Federal organizations or federally funded organizations that collect information directly from children must first obtain parental permission. State and local laws and the policies of the organizations vary from setting to setting. Therefore, it is important to obtain permission to collect data from the appropriate sources. This might also require obtaining informed consent from a school/organization official, parents, and/or the youth themselves. Informed consent means that the person is aware of what is being collected and gives permission to be part of the data collection.

In addition, the privacy of the individuals from whom data are collected must be protected. This is especially true in the substance abuse prevention field, where very sensitive and potentially incriminating information is being collected. The best way to protect the privacy of individuals is to ensure their anonymity. Anonymity can be ensured only if no identifying information is collected in a survey. This will also improve the accuracy of the data collected, since respondents will feel free to respond truthfully, knowing that their responses cannot be traced back to them. To further ensure anonymity, consider collecting survey questionnaires in a large box so that participants feel comfortable that their survey cannot be traced back to them by the order in which it was collected. Anonymity is a more unrealistic aim in focus groups, but participants can be protected from excessive self-disclosure and disclosure of sensitive information by an astute facilitator, and the confidentiality of their responses can be assured. Group members should also be reminded that information discussed in the focus group is to remain confidential.

Step 4: Arrive on time. Plan to arrive a few minutes early for an in-person interview and have a pad of paper and pen ready. It may also be helpful to tape record the interview, provided the interviewee gives permission prior to the interview.

Step 5: Conduct introductions. Include an explanation about the purpose of the interview and what will be done with the information. Explaining the
The purpose of the interview serves two purposes: first, it allows the person to respond to questions in the context of the appropriate area of interest; and, second, it creates in the interviewee interest and a degree of investment in the project.

Step 6: Ask the prepared questions, but do not hesitate to ask other questions that arise as a result of answers to other questions.

Step 7: Wrap up the interview. Tie up any loose ends in the questions and thank the interviewee for his or her time.

Step 8: Review the interview notes and make sure they are legible. These notes will help determine the selection criteria for the development of the substance abuse prevention curriculum.

Method 3: Surveys

The information obtained through existing sources and interviews provides important and relevant information about the target population—at least from a community or organizational perspective. Surveys provide more specific information. Surveys are useful in gathering information on youths’ substance use prevalence and knowledge, attitudes, and beliefs.

There are several existing surveys that are used to assess the substance abuse prevention needs of youth. One example is the PRIDE Survey, available from the Parents’ Resource for Information and Drug Education. The PRIDE survey is a congressionally mandated assessment tool used to track substance abuse among youth in grades 4 to 6 and 6 to 12.

An initial step for prevention leaders is to determine whether PRIDE or another, similar survey has been conducted in the school attended by the target population and, if not, whether one has been conducted in the school district. If so, prevention leaders who do not have the resources to conduct a survey may be able to apply those findings to the target population. If these data have not been collected locally, surveys can be purchased from PRIDE (or similar groups), which will provide tabular reports of the results at no additional cost. More information about ordering surveys is available in the Needs Assessment section of the Curriculum Builder.

The PRIDE survey—and similar instruments—assesses much of the information a prevention leader would need to know about relevant risk and protective factors, substance abuse, attitudes, perceived harm, and social influences. Once this information is gathered, the prevention leader can examine findings and then identify the activities and materials most appropriate for the target group. Another benefit of information collected from these surveys is that it can be used as a tool to evaluate the effectiveness of the curriculum by measuring changes over time in a given population.

Finally, for a uniquely targeted survey, prevention leaders may wish to design their own instruments. A good source of information on preparing, conducting, and analyzing surveys can be found in The Practice of Social Research, 10th ed. (Babbie, 2004).

Method 4: Focus Groups

Prevention leaders who have conducted a survey of their target population are likely to have gathered a significant amount of information. However, those who want to clarify or deepen their understanding of issues uncovered by the survey can conduct focus groups. As with the survey data, focus group information can be invaluable in determining which prevention content areas, if any, need to be emphasized, as well as aiding in the selection and implementation of interactive activities.

A focus group interview is a structured group process conducted in order to obtain detailed information about a particular topic or issue. Researchers often conduct focus groups to gather information in an area about which relatively little is known. Data gleaned from focus group interviews are generally qualitative in nature, unlike survey data, which tend to be quantitative. Focus groups consist of a small group of participants, a facilitator (or moderator), and a recorder. Sessions are generally audiotaped for future reference, and the leader or assistant takes notes. Some individuals prefer to videotape the focus group; however, this is generally not recommended in the substance abuse prevention setting as some children and adolescents may be fearful of talking if they are being videotaped, and some school districts have restrictions on videotaping students.

The goal of focus groups is to garner as much information as possible. Open discussion is encouraged, but under conditions of complete confidentiality. Group interaction
Advantages of Focus Groups

- Focus groups can be relatively easy to conduct. They are an efficient way to interview a number of people at the same time, and results are obtained fairly quickly.
- Focus groups can be conducted whether or not a survey has been conducted; however, if a survey has been conducted, the results should be used to inform the discussion as to which questions in the Focus Group Facilitator’s Guide to ask and determine how to prompt for further input.
- Synergy of interaction, snowballing, spontaneity, and security of participants within the group yield freer and more in-depth responses. Views children and adolescents might not express in other settings are more likely to emerge in focus groups.
- The focus group leader can probe for clarification or greater detail; unanticipated but potentially fruitful lines of discussion can be pursued.
- Responses have high face validity and are likely to accurately reflect the respondents’ feelings about the question or issue. This is in contrast to questionnaires, where respondents might misinterpret a question or not understand it fully.
- Focus groups can work well with both homogeneous and diverse populations.

Limitations of Focus Groups

- The skill of the facilitator can have a significant impact on the discussion.
- Groups can be difficult to assemble, and care must be taken to provide a setting and conditions that are conducive to discussion.
- Focus groups lack the anonymity of surveys.
- Individual responses are not independent of one another.
- Control of the process is less than in individual interviews.
- An abundance of specific information is produced, some of which has little or no bearing on the topic, making analysis and summarization of results challenging.
- Because participants are not randomly sampled, the results cannot be generalized to the target population.

Steps for Conducting a Focus Group

This section will describe how to conduct a focus group and analyze the findings. The intent of the discussion is to provide a basic working knowledge of focus groups and techniques for analyzing the results. While the discussion is generalized to any focus group process, it should be kept in mind that within the context of this Handbook, the objective of a focus group should be to: (1) obtain information about the knowledge, attitudes, beliefs, and behaviors of the target population in order to decide which content areas of the substance abuse prevention curriculum to emphasize; and (2) gain insight into the target population to aid in selecting appropriate interactive activities.

Step 1: Select groups with the desired characteristics. The membership of each group should be homogeneous, representing a particular segment of the population, but group members (where possible) should not be close friends. The aim is to create conditions that promote both comfort and independence of thought in order to maximize discussion.

Focus groups can consist of 4 to 12 members, in addition to the facilitator and recorder. Smaller groups tend to be dominated by one or two members; larger groups inhibit participation by all members. Six to eight has been shown to be a good size for many types of group interactions, especially those with school-aged youth, yielding both a variety of viewpoints and good participation.

A time limit of approximately 45 minutes to 1 hour is desirable. Beyond 1 hour, group discussions with school-aged children tend to break down. For younger children, 30 to 45 minutes is optimal.

Step 2: Determine who will be in each group. Begin by identifying key population groups that are likely to represent different views of the topic at hand. For example, the population may be divided by physical characteristics (e.g., age, gender, ethnicity) or by areas of interest (e.g., athletes, vocational students), where these are thought to be relevant. Ideally, a focus group session
should be conducted for each relevant category identified.

Step 3: Identify and recruit participants. Once each sampling category has been identified, the children or adolescents for each group should be selected. In a small group, this might include most of the youth, but care should be taken to avoid putting close friends in the same group. Participation should then be confirmed with the participant, and permission should be obtained from the individual and his or her parent or guardian.

It is often desirable to provide incentives or support for participation. These may include any or all of the following: snacks or a meal following the discussion, an attractive location, transportation, a token gift, and/or feedback on discussion results.

Step 4: Design a moderator’s guide. The purpose of a moderator’s guide is to provide an overall direction for the discussion. It is not the equivalent of a survey instrument and need not be followed in detail or even necessarily in order. The guide provides the facilitator with topics and issues that are, to the extent possible, to be covered at some point during the group discussion. The guide is loosely structured and does not suggest potential responses.

When designing the guide, it is best to proceed logically from one topic to another and from the general to the specific. Also, to the extent possible, the questions that are most important to the goal of the session should be presented first.

The guide should start with an introductory statement that thanks the participants, outlines the objectives of the session, and contains clear ground rules for participation. Next, the topics to be covered should be listed. Questions should be unstructured, unbiased, nonthreatening, and simple. The guide should not be overly detailed or have too many questions; a good focus group interview guide consists of 20 questions or fewer. A sample guide is included in the Needs Assessment section of the Curriculum Builder. The questions included in the sample are offered as suggestions. It might be desirable to adjust the questions for relevancy to the group. Finally, the facilitator should have some guidance on handling potentially harmful information. For example, it would be necessary to determine how to handle a revelation by a focus group participant that he or she was involved in a serious crime.

Step 5: Facilitate and record the discussion. As mentioned previously, each focus group should have a facilitator and a recorder. The facilitator’s task is to make participants feel at ease and promote open communication on selected
topics by asking broad, often open-ended questions; probing for additional information when necessary; and keeping the discussion appropriately focused. The facilitator should generally follow the moderator’s guide, but participants should have ample opportunity to contribute opinions, experiences, and suggestions, and should be allowed to lead the discussion in new directions as long as the topic is relevant. Another role of the facilitator is to involve reticent participants and politely cut off those who are dominating the discussion.

**Sample Interpretation**

The following comments are made in your focus group with 8th graders during the discussion about the media and alcohol and other substance abuse:

- “Yeah, I see beer commercials on TV all the time. They are so funny.”
- “I really like the commercial with the dog dreaming about the beer.”
- “The dudes in that movie were all doing drugs.”
- “I saw a ‘rockumentary’ on this band, and all the guys in the band were doing drugs; a couple even o.d. and died. The rest of the band are cool now, though, and making millions of dollars.”
- “It seems like half the characters on TV drink beer, not to mention athletes and other people, so it must be okay.”

These comments touch on several content areas. The first three comments are related to the influence that television and movies have on youth today. These would be categorized within the “social influences” content area and indicate a need to address this area with activities that discuss the role of the media in portraying substance abuse. The last two comments also fall within the “social influences” category but should also be placed within the “perceived harm” category. These comments indicate that the youth may need to be exposed to additional activities that deal with the effects of alcohol and other drugs to overcome the notion that they are not harmful.

The recorder should tape record the discussion (with the permission of the participants) and make notes of comments, body language, and facial expressions. The moderator’s guide has sufficient blank space inserted between questions to record comments. Tape-recording serves as a backup to the recorder, who may not be able to capture every comment as it occurs. Following the session, the recorder will refer to the tape recording to verify information and extract key comments and quotations.

**Step 6:** Interpret and review the recorded information. Some of the information obtained in the focus groups may be objective. For example, participants may have reported that the most popular illegal drugs used by their high school students are methamphetamine and marijuana and that substance abuse prevention programs do not occur every year in the public schools.

Most of the information captured, however, will be subjective and will require interpretation. Look for themes, trends, and patterns in participants’ answers. Identify some general ideas that can be themes or “umbrellas” for the patterns and group the comments under each theme or umbrella. This can be accomplished by reading notes and creating an outline of the most important or most frequently repeated comments. From these, the main themes will emerge. Other statements can be categorized under each theme. This will create an outline of the focus group discussion based on theme and will make the data easier to interpret. The questions in the provided facilitator’s guide have been designed and organized with specific substance abuse prevention content areas (normative education, social skills, social influences, perceived harm, protective factors, and refusal skills) in mind. We recommend the use of these content areas as the basis for the themes and to organize the data accordingly.

It is generally useful to look at both quantitative and qualitative results. Quantitative results, such as the number of statements about a particular substance abuse or risk factor, should be factored into the focus group summary. Qualitative results are often representative comments from focus group participants and create a more vivid and precise image of participants’ opinions and practices. This information can be evaluated by reviewing the comments within the context in which they were presented. The focus group method is uniquely suited to present issues from the participants’ perspectives.
Curriculum Development

Using the Web-Based Curriculum Builder to Identify, Select, and Customize Appropriate Interactive Activities and Materials

The Curriculum Builder is the tool within the Web-based Curriculum Guide that uses information entered about the target population to select a list of interactive activities and prevention materials most appropriate for that group.

**Step 1: Setting & Demographics**

The first step in the Curriculum Builder involves entering basic information about the setting, age, gender, and race/ethnicity of the target group, as well as time, equipment, and financial resources available to the prevention leader.

**Step 2: Needs Assessment**

Next, information gathered from each of the needs assessments is entered into the corresponding Curriculum Builder forms. Based on the data entered, the Curriculum Builder will display a table with the target group’s environmental risk factors for drug use, the substance abuse problem in the target group, and the substance abuse prevention content areas that need to be emphasized in the curriculum.

**Step 3: Appropriate Activities**

In the third step of the Curriculum Builder, the program finds all the activities in the resource library that match the criteria entered for drug, grade, race/ethnicity, and language. The activities are then sorted by how well they match grade, drug, race/ethnicity, and geographic location criteria (e.g., if the curriculum was for 5th and 6th graders, activities that are coded for 5th and 6th graders will be ranked higher than activities coded for just 5th graders or just 6th graders). Finally, the Curriculum Builder separates all identified resources into two categories: “Best Matches” and “Somewhat Appropriate” activities.

Needs assessment forms in the Curriculum Builder.
Resources that match criteria for drug, grade, race/ethnicity, and language and match the requirements for price, running time, equipment, and geographic location are considered “Best Matches.” Resources that match criteria for drug, grade, race/ethnicity, and language but do not match the requirements for price, running time, equipment, or geographic location are considered “Somewhat Appropriate” activities.

This step involves reviewing and selecting activities from the list of “Best Matches” to include in the curriculum. The selection of individual interactive activities should be based on a number of criteria applied to the prevention curriculum as a whole. That is, the curriculum must:

- Be comprehensive, covering all of the recommended prevention content areas and engaging multiple learning styles.
- Emphasize content areas that need to be stressed based on the needs assessment of the target group.
- Be customized to the demographic characteristics and substance use problems of the target group.
- Comply with institutional substance use policies and resources that are available for substance abuse prevention.

Chapter 7 of the Handbook contains an example of how to select (and implement) interactive activities using a mock target group. This example should be reviewed before selecting the activities for a curriculum as it provides a complete description of the demographic characteristics of the mock target group as well as the substance abuse problem and risk factors for substance abuse associated with the target group. The information collected through mock needs assessments was analyzed and organized by prevention content area. Thus, this example will assist in understanding the rational process for activity selection.

During the process of selecting appropriate activities, it is also strongly recommended that Chapters 4, 5, and 6 of the Handbook be read. These chapters provide in-depth descriptions of drug-related issues that correlate with the characteristics and needs of the target population. Chapter 4 reviews the factors that place young people at risk for and protect them from substance abuse as well as descriptions of different youth groups according to gender, age, and geographic setting. Chapter 5 describes facts related to race, ethnicity, and culture and the associations of these factors with substance abuse risk. General cultural attributes of the primary ethnic groups are also described in this chapter. Chapter 6 describes the various drugs of abuse and their effects, as well as insights into the scope of the substance abuse problem, implications, and national trends for each drug type. By reading these chapters, a better understanding of the target group will be attained, which, in turn, will contribute to a better selection and implementation of activities for the curriculum, making the prevention intervention more meaningful to the particular group being addressed. At the end of each section in Chapters 4 and 5, there is a list of Practical Points that relate to each demographic characteristic of the target group and to various at-risk youth groups. At a minimum, these Practical Points should be reviewed and considered while selecting interactive activities and materials. A link to the specific Practical Points that apply to the target group characteristics entered in the Curriculum Builder...
can be found on this Web page (Step 3: Appropriate Activities) under “Instructions for Reviewing and Choosing Appropriate Activities.”

Once the time or money allotted to the curriculum is used up in the Curriculum Builder, selection of activities should stop and the completed curriculum reviewed. This can be done by clicking on the blue “Step 4: Customized Curriculum” button.

Step 4: Customized Curriculum

Step 4 of the Curriculum Builder allows for the revision and further customization of activities and provides the mechanism through which activities and materials can be either downloaded directly or ordered.

While the activities selected might already be customized to match one or more characteristics of the target group (e.g., an activity to fill in the blanks to create an “I Have a Dream” speech is already customized for race/ethnicity), further customization of the activities can be accomplished by:

- Customizing an aspect or subtopic of the activity (e.g., an activity to role-play a scientific process could be customized so that the “process” is the “effect of substances on the body,” where the specific substance(s) chosen for the role play is the one identified as the substance use problem of the target group).

- Selecting an accompanying substance use prevention educational material that is already customized to one or more characteristics of the target group (e.g., a video portraying peer pressure among rural youth to chew tobacco is tailored to a specific substance and to a rural community setting).

- Selecting a supplemental, noneducational material required for the implementation of the activity that reflects one or more demographic characteristic or substance problem of the target group (e.g., an activity requiring the analysis of prodrug media messages could be tailored by using magazines, CDs, videos, and/or TV programs that appeal to the culture/ethnicity and relate to the drug problem of the target group).

Based on these concepts, review each of the activities selected and determine its potential for further customization. The Curriculum Builder will also display a list of appropriate substance abuse prevention educational materials based on the characteristics of the target group. Materials from this list can be added to the curriculum.

Step 5: Curriculum Report

Step 5 allows for viewing and/or printing of a customized curriculum report. This comprehensive report includes all the information entered into the Curriculum Builder, the customized curriculum, and Practical Points (based on the demographic information supplied about the target audience) to assist in the implementation of the curriculum.

Contents:
- General Information
- Demographics and Settings
- Resources Available for Drug Use Prevention Efforts
- Institutional Information
- Completed Needs Assessments
- Needs Assessment Findings (Customizing Data from Forms)
- Implementation Information (Additional Data from Forms)
  - Reported Drug Data
  - School Leader Interview Notes
  - Community Leader Interview Notes
  - Focus Group Notes
- Practical Points
- Selected Activities/Materials

The Curriculum Report includes a summary of the entire curriculum-building process as well as relevant Practical Points from the Handbook.

Chapter 7 should be reviewed for tips and techniques on how best to implement the curriculum developed.

References


Center for Substance Abuse Prevention. (1994a). *Conducting focus groups with young children requires special considerations and techniques*.