**A Data Work Group Meeting Notes**

**Date:** Wednesday, April 28, 2021

**Time:** 11:00a-12:00p EST (10:00-11:00a hora de Pereira)

1. Daniela Ocaña provided instructions on how to utilize the Zoom platform.
2. Dr. Matt Courser thanked the team for attending the meeting and provided an overview of today’s agenda:
	1. Brief discussion on student survey
	2. Review of new version of the baseline survey
3. Student Survey
	1. PIRE thanked WG members for sharing insight, samples, and information on efforts.
	2. After last week’s meeting, PIRE learned that due to the Covid-19 situation in Colombia, most schools have returned to online / virtual platforms. Current data collection efforts have been planned, but the Observatory and partners are thinking through on how to collect student data while things are virtual.
	3. With that said, once the pandemic allows us to collect student/youth data PIRE and WG will revisit that idea.
	4. WG member asked if we could return to the UNODC and Icelandic Survey in Bogota. They adapted it to adolescents and also administered it online. WG member suggested PIRE talking to UNODC since they administered the survey online and had really interesting survey results.
	5. Dr. Courser responded that PIRE will continue to follow-up on that as we move forward. It will take time to adapt to online administration.
	6. WG member explained the school administrators could help to implement the survey online since they are already in communication with students.
4. Baseline Survey – Process Overview
	1. Dr. Courser explained that WG members’ input has helped PIRE with the challenge of identifying what to measure and how to shorten the instrument to realistically field it with respondents and ensure successful administration.
	2. When PIRE initially timed the survey, it took a little over 60 minutes to complete. Ideally, it needs to be reduced to 40-45 minutes. The version the WG looked at last week had about 180 items, so the task now is to identify about 60 questions that need to be removed from the baseline instrument.
	3. When PIRE has a final version, we will re-time. The survey vendor will also be pilot testing it in the field.
	4. Dr. Courser explained that he will talk through the 58 items PIRE, with input from WG, has suggested to remove from the questionnaire. The PIRE team received important feedback from WG members, and it helped PIRE think through the purpose of the instrument and gather a diverse number of perspectives on what is most important for this baseline survey.
	5. The PIRE team reviewed each item one by one, spent time talking about the primary focus of the questionnaire and what we absolutely have to measure with the baseline questionnaire.
	6. Dr. Courser explained that the most important purpose of the baseline is to measure drug use and criminal behavior, and as we can drivers/associations of drug use and criminal behavior.
5. Baseline Survey – Review

Per WG member feedback, Dr. Courser shared the following recommendations and suggestions to the questionnaire:

* 1. Remove health insurance items. It is important and related to access to care and treatment, but because we need to focus so tightly on drug use and criminal behavior, this may not be the best way to capture this information.
	2. Remove two items from neighborhood/home characteristics (e.g., satisfaction with n.hood and amount of time in n.hood). These measures are important but over time there will be other ways to capture this information.
	3. Combine three items into one by adding gang-related, organized crime, and substance use and trafficking response options to neighborhood crime item to help streamline the questionnaire.
	4. Reorder mental health items to help streamline.
	5. Remove items related to opinion on substance use because we are able to measure substance use directly.
	6. Eliminate question on whether participant has ever been offered substances.
	7. Eliminate items on tobacco and e-cigarette use. These items remain important but project focuses on illicit substances.
	8. Remove all lifetime use. Focus attention on 12 month and past 30-day use.
	9. Remove AUDIT scale. These items are most useful for projects that focus on alcohol use. Some of the project will focus on that, but greater focus will be on illicit drug use and criminal behavior.
	10. Change substance use lifetime measure to 12 month use and incorporate a skip logic.
	11. Remove injection drug use items and related health outcome items. These behaviors are difficult to capture in a household survey. The Observatory and its partners will soon be collecting data on this behavior, focusing their efforts on hidden populations.
	12. Remove some of the marihuana items – particularly, how much they spend, number of joints and cost. We are looking for baseline use and it is unlikely that we will be implementing interventions that reduce the actual cost of marihuana. Focus will be on drug demand reduction.
	13. Similar recommendation for cocaine, extasy, heroin and basuco cost per value use. Again, interventions will not focus efforts on costs. Interventions will focus on preventing use, treating use, and helping residents of Pereira enter and maintain recovery.
	14. Remove some extasy items (e.g., pills consumed in one day, mixing substances)
	15. Remove a few of the community support and engagement items. These items are important measures of resilience and social capital, but as we need to reduce the length of the survey, we would recommend that we look for other ways to collect this information.
	16. PIRE will add a measure on how Covid-19 has affected mental health.
1. WG Member Responses to Changes to Baseline
	1. WG member suggested incorporating the SRQ so that we can compare the baseline survey data with the data collected from the Encuesta Nacional de Salud Mental. WG member also suggested that the PIRE team meet with members of the department of mental health to adjust the mental health items.
	2. Dr. Courser responded that if we are unable to collect data on those items, we will look for other ways to collect that information.
	3. WG member suggested eliminating some response options to number 12, as they are not relevant to Pereira. Suggest eliminating the response option “hurto de cabezas de ganado.”
	4. WG member suggested that we need to stay focused on the variables that are directly related to drug consumption and that cannot be gathered by other sources. Some of the other areas could be gathered through other information sources.
	5. WG member asked to reconsider not eliminating health insurance items; this directly affects treatment. Also reconsider including items directly related to heroin and injection drug use since Pereira is a city who has high levels of heroin use.
	6. WG member asked to reconsider not eliminating ecig use items, because ecigs are being more frequently used and can be used to use illicit substances.
	7. WG member suggested adding items on stigma, discrimination, and access to services.
	8. Dr. Courser stated that particularly with stigma, it is an important construct and multi-faceted. As part of this project, we need to understand more about stigma in Pereira- what drives it, what factors influence it. Asking about it with just a couple of questions is challenging. We will need to look at it, but in a way that allows us to do justice to it.
	9. WG member asked, “How will PIRE handle underreporting of drug use?” WG member has recently developed a report on this.
	10. PIRE is interested in seeing those reports of underreporting of drug use. To address underreporting, the survey will be administered using tablets as opposed to one-on-one interviews to reduce socially desirable responses. Over time, look for opportunities that provide more information on underreporting in Colombia.
2. Next Steps
	1. PIRE will be following up on these comments and create next version of instrument. PIRE will also begin review process with institutional review board.
	2. PIRE will share next version of instrument, results from IRB, and methodology with WG members.
	3. Next meeting will be on May 12th to allow PIRE to move forward with incorporating feedback to the questionnaire and begin IRB application.
	4. Topics that will be discussed in future meetings: other current data collection efforts, other data available, and in upcoming months, collaborate with intervention implementation WG and discuss ideas on how to collect intervention measures and constructs and the student/youth survey data collection.