

Data Interpretation Topical Discussion Guide

Interpreting Physical Health School Climate Survey Data

Introduction

This *Discussion Guide* provides suggestions to help you use your school climate data to make meaningful interpretations about the topic of Physical Health within your state, district, or school, taking into account the viewpoints of the people who took the survey in your state, district, or school (i.e., instructional staff, noninstructional staff, and parents/guardians).¹ It accompanies the School Climate Improvement Resource Package (SCIRP) *Data Interpretation Guide*, which contains information, support, and resources to help you interpret and use your survey results, using the U.S. Department of Education (ED) School Climate Surveys (EDSCLS) model of school climate domains and topic areas as a framework. We encourage you to read the full *Data Interpretation Guide* before using this *Discussion Guide* so that you have a better understanding of the model and types of results you will see.

This document is intended for use by EDSCLS users as well as users of other school climate surveys, which often include a topic area similar in composition to the Mental Health topic area in the EDSCLS. Directions specific to EDSCLS users are denoted in this guide with the EDSCLS logo (right).



This guide, along with the <u>Data Interpretation Guide</u>, can help you derive meaning from your state's, district's, or school's Physical Health results, which you can use to identify areas for improvement.^{2,3} In the following sections, you will find:

- A definition of physical health as it relates to school climate.
- Guiding questions to help you think through your Physical Health data from a multi-tiered perspective—universal and targeted (Click on <u>Data Interpretation Guide</u> and the <u>Reference Manual</u> to find additional information on multi-tiered approaches).
- Guiding questions organized by data types (Physical Health scale scores and item-level Physical Health data):
 - Initial and deeper guiding questions about physical health for districts (Appendix A)
 - Initial and deeper guiding questions about physical health for schools (Appendix B)

¹ EDSCLS users should note that no Physical Health scale was produced for students; however, it was produced for instructional and noninstructional staff. The student items were thus dropped from the survey.

This document provides strategies applicable to public schools and districts, including charter authorizers, charter management organizations, education management organizations, individual charter schools, charter local education agencies, and private schools

Information in this *Discussion Guide* has been updated to reflect a change in the reporting of scale scores. Beginning with the release of the EDSCLS platform Virtual Machine (VM) 3.0 in December 2017, the platform reports benchmarked scale scores, allowing users to compare scale score levels across the EDSCLS domains and topic areas. Note that the scale scores themselves cannot be compared across domains; only the levels in which they fall can be compared in this way.

- A link to a <u>Physical Health</u> webpage that includes resources on interventions that districts and schools can implement immediately to address specific areas of need as well as longer term resources for improving physical health.⁴
- Additional guiding questions for those wishing to use average (mean) Physical Health values:
 - Initial and deeper guiding questions about physical health for districts using average (mean) Physical Health values (Appendix C)
 - Initial and deeper guiding questions about physical health for schools using average (mean) Physical Health values (Appendix D)

Schools and districts also are required to report information about school climate pursuant to the U.S. Department of Education's Civil Rights Data Collection (CRDC). Information collected by the EDSCLS or other similar surveys may help schools and districts prepare their responses to the CRDC survey. More information about the CRDC can be found at ocrdata.ed.gov.

What Is Physical Health?

For the purposes of interpreting data, we have defined physical health as the physical well-being of the school community and its members. Environments that enhance student learning require attention to the physical health and safety needs of the entire school community. Research demonstrates that academic achievement improves in schools where students are physically healthy and feel physically safe. Ultimately, a healthy school community is the foundation for a comprehensive, high-quality education.

You can find a brief overview of physical health as it relates to school climate here.

Guidance for Districts and Schools

1. Examining Physical Health Data Overall: Focus on a Universal Approach

You can use your Physical Health scale scores to focus on a universal approach to improving physical health. <u>Scale scores</u> (described in detail in the *Data Interpretation Guide*) are the premier way that the EDSCLS as well as many other school climate surveys measure school climate. A scale score, which combines multiple survey items related to different aspects of a topic area such as Physical Health, is a more robust measure than just attempting to measure that topic by asking about it with a single item.



Beginning with the release of the EDSCLS platform VM 3.0 in December 2017, the way the EDSCLS platform reports scale scores changed. Based on psychometric benchmarking, the scale scores are anchored into fixed cut scores across EDSCLS domains and topic areas, allowing users to compare all scale score levels no matter the topic or domain

(i.e., you can compare benchmarked scale score levels for topic areas within and across the three EDSCLS domains: Engagement, Safety, and Environment). The platform produces graphs showing

States that host the EDSCLS can use the same recommendations as given for districts; states also will be able to compare data across their districts, as well as across their schools.



three "performance" levels into which the benchmarked scale scores may fall: Least Favorable, Favorable, and Most Favorable.⁵



CAUTIONS: You cannot compare the scale scores themselves across domains; only the levels in which they fall can be compared in this way. (However, you can compare the scores themselves within domains.) Also, you cannot compare older "legacy" scale scores to newer benchmarked scale scores.

Because any EDSCLS data produced by platforms lower than VM 3.0 are not recalibrated, the scale scores they produced, called "legacy" scores, cannot be compared to the new benchmarked scale scores. If you want to preserve a trend line, you can convert your older legacy scores from prior years to benchmarked scale scores and then compare across years. You will find information on how to convert legacy scores to benchmarked scores at https://safesupportivelearning.ed.gov/edscls/benchmarks.

After you have these data for your district's or school's staff, and you have read the <u>Data Interpretation</u> <u>Guide</u>, you can use initial guiding questions in Appendix A (for districts) and in Appendix B (for schools) to help make meaningful interpretations of your results.



If you are a **district**, click on <u>Appendix A</u> to go to initial guiding questions for overall Physical Health scale scores.



If you are a **school**, click on <u>Appendix B</u> to go to initial guiding questions for overall Physical Health scale scores.

Average (mean) topic area values (see "Appendix C. Average (Mean) Topic Area Values" in the *Data Interpretation Guide*) also can be used to focus on a universal approach to improving physical health. As described in the *Data Interpretation Guide*, average (mean) topic area values can be used to gauge how favorably respondents perceive the topic.⁶



Because of the brevity of the parent/guardian survey, the EDSCLS was not designed to produce Physical Health scale scores for parents; however, parent results can be examined at the item level, which is discussed in the section <u>Digging Deeper Into the Data by Using Item-Level Data</u>.



If you are a **district**, click on <u>Appendix C</u> to go to initial guiding questions for overall average (mean) Physical Health values.

Average (mean) topic area values are not directly available from the EDSCLS platform but can be calculated from raw survey data. Click on Appendix C of the Data Interpretation Guide to go to information about calculating, using, and interpreting average (mean) topic area values.



The EDSCLS platform produces graphs showing three "performance" levels into which the benchmarked scale scores may fall: Least Favorable (scale scores below 300): The most likely answer to each positively valenced question in the scale is disagree or strongly disagree; the most likely answer to each negatively valenced question in the scale is agree or strongly agree. Favorable (scale scores 300–400): The most likely answer to each positively valenced question in the scale is agree; the most likely answer to each negatively valenced question in the scale is strongly agree; the most likely answer to each positively valenced question in the scale is strongly agree; the most likely answer to each negatively valenced question in the scale is strongly disagree. (See the Data Interpretation Guide for further information.)



If you are a **school**, click on <u>Appendix D</u> to go to initial guiding questions for overall average (mean) Physical Health values.

2. Examining Physical Health Data Across Staff Respondent Characteristics: Focus on a Targeted Approach

Physical Health scale scores broken out by respondent characteristics provide a richer set of data, a way to see how perceptions of physical health differ across subgroups of staff.



Benchmarked scale scores are produced for EDSCLS users for the following subgroups.⁷

- Staff (instructional and noninstructional) scale scores per topic area can be examined by:
 - Gender and
 - Race/ethnicity.

Note: In the event of a possible disclosure risk that would allow a respondent or small subgroup of respondents to be identified (e.g., if there is only one Asian teacher in the school), the EDSCLS platform will suppress the results for that subgroup (i.e., results for that subgroup will not be shown). (To understand how a small subgroup perceives school climate, see the *Reference Manual* for tips on conducting interviews and focus groups.)

Examining staff perceptions of physical health in your district or school by respondent characteristics can be extremely useful, not only in understanding the areas of strength and weakness in your school environment, but also in targeting interventions. For example, if perceptions of physical health differ by staff characteristics (gender, race/ethnicity), this will help you highlight areas of where you may want to examine perceptions further.

Supports should be designed to improve school climate for the students who are most in need regardless of the subgroup(s) to which they belong. Targeting supports based on need as opposed to membership in a subgroup will support compliance with relevant civil rights laws.



If you are a **district**, click on <u>Appendix A</u> to go to initial guiding questions for Physical Health scale scores **by respondent characteristics**.



If you are a **school**, click on <u>Appendix B</u> to go to initial guiding questions for Physical Health scale scores by respondent characteristics.

Average (mean) topic area values also can be used to focus on a targeted approach to improving physical health.



If you are a **district**, click on <u>Appendix C</u> to go to initial guiding questions for overall average (mean) Physical Health values by respondent characteristics.



Yes! As noted earlier, the EDSCLS parent data do not include Physical Health scale scores or average (mean) topic area values; however, parent/guardian item-level data can be used to consider how parents perceive specific areas of physical health.

Note that the EDSCLS platform does not produce crossed demographics (e.g., Asian females). Users can obtain crossed demographics analytically by downloading the raw data file. Also note that the Physical Health data did not form a scale for students that can be used for analytical purposes.





If you are a **school**, click on <u>Appendix D</u> to go to initial guiding questions for overall average (mean) Physical Health values by respondent characteristics.

3. Digging Deeper Into the Data by Using Item-Level Data: Focus on a Targeted Approach

After you have examined your scale scores (and average [mean] Physical Health values, if you wish to use them), looking at item-level data may help you to dig deeper to target specific areas or issues. (See the *Data Interpretation Guide* to learn more about examining item-level data.) Item-level results can often provide districts and schools with concrete information on physical health that may be more actionable, warranting more immediate implementation of interventions found on the Physical Health webpage, as well as planning and preparation for longer term interventions and strategies.



Sites using the EDSCLS can produce percentage distributions and item averages (means) for each item in the survey that is included in the Physical Health scale produced by the platform as well as any important Physical Health items that are not in the scale but have been kept on the survey as stand-alone items.

These guiding questions include suggestions for examining item-level data about how:

- a. A Physical Health item is perceived by individual respondent groups;
- b. A Physical Health item is perceived across respondent groups, but only for items worded *exactly* the same way for each group (called *comparable items*); and
- c. Physical Health items organized by content (called an *item content group*) are perceived across respondents.

These types of guiding questions are detailed here.

A. Examining Physical Health Items Within a Respondent Group

You can compare individual Physical Health items with each other within an individual respondent group (instructional staff, noninstructional staff, or parents/guardians). Comparing items in this way may provide districts and schools with concrete examples of physical health that may be more actionable, warranting more immediate implementation of interventions found on the Physical Health webpage, as well as planning and preparation for longer term interventions and strategies.

However, we strongly encourage you not to focus excessively on a single item rather than the more robust construct (topic area) of which it is a part. If you focus change efforts solely on behaviors and attitudes as defined by specific items, you may run the risk of a form of unintentional "teaching to the test" in which you are able to show growth with respect to specific items even though perceptions of the underlying topic area have not changed.



When comparing the averages (means) of individual items, it is important to make sure that you are comparing "apples to apples." Sometimes a high average (mean) item value represents a positive perception and sometimes a high average (mean) item

value represents a negative perception, depending on how the item response options of 1-4 are



valenced, or directed. If you want to compare item averages (means), go to the *Data Interpretation Guide* section on <u>item valence and reverse-coding</u> to access important information you will need before comparing them.⁸



For sites using the EDSCLS, negatively valenced items are marked for you in the EDSCLS codebook and survey item lists (questionnaires) at https://safesupportivelearning.ed.gov/edscls/administration and in Table 1 below.

B. Comparing Physical Health Items Across Respondent Groups if Worded Exactly the Same Way

Item frequencies and averages (means) can be examined across respondent groups, *but only if* the items are worded exactly the same way. This approach is helpful in cases where differences between groups or subgroups of respondents were found in the Physical Health scale scores (or average [mean] values, if applicable). For example, both instructional staff and noninstructional staff are presented with the item "This school provides the materials, resources, and training necessary for me to support students' physical health and nutrition." Because the survey items are identical, you can compare the responses of instructional staff to the responses of noninstructional staff on this item.

C. Considering Physical Health Item Content Groups

Although looking at scale scores and items in the survey is important in examining and interpreting your data, it may be overwhelming to examine all of the items at once, and you may want to look at them in chunks or groups by substantive content. You are free to use groups of items of similar substantive content that are important to your district or school. We provide examples from the EDSCLS in Table 1, although similar groupings may be found in other school climate surveys.

Table 1 displays items included in the EDSCLS Physical Health scale from all respondent groups as well as any important stand-alone items that have been retained. In the table, we suggest the following areas of focus using the Physical Health items in the EDSCLS: School-Wide initiatives; Physical Activity; and Nutrition.

Note that all of the items in Physical Health are positively valenced; therefore, item averages (means) within this topic area can be directly compared.





Table 1. Item Content Groupings for the Physical Health Topic Area

School-Wide Initiatives

Instructional staff	This school places a priority on students' health needs.
Instructional staff	This school provides the materials, resources, and training necessary for me to support students' physical health and nutrition.
Noninstructional staff	This school provides the materials, resources, and training necessary for me to support students' physical health and nutrition.
Noninstructional staff	This school places a priority on students' health needs.

Physical Activity

Instructional staff	This school places a priority on students' physical activity.
Noninstructional staff	This school places a priority on students' physical activity.

Nutrition

Instructional staff	This school places a priority on making healthy food choices.
Noninstructional staff	This school places a priority on making healthy food choices.
Parent	Students have enough healthy food choices at this school.

These content areas provide an example of how you can examine Physical Health items in a meaningful way across respondent groups. Identifying differences in the perceptions across respondents within the same block of items may be especially helpful in targeting action items for improvement.⁹

For example, at least one question on each survey (i.e., instructional staff, noninstructional staff, parents) asks respondents about Nutrition, as follows:

Instructional staff	This school places a priority on making healthy food choices.
Noninstructional staff	This school places a priority on making healthy food choices.
Parent	Students have enough healthy food choices at this school.

Note that these groupings are different than those for scale scores or average (mean) topic area values, which were derived analytically. The groupings in Table 1 are based on items with similar substantive content or areas of focus that may prove more actionable for districts and schools.



Looking at these items in tandem may provide you with more in-depth information on whether your district or school needs to place more emphasis on nutrition. If you find that parent responses on the Nutrition item grouping are not as you would like (or if you find a discrepancy between the perceptions of different respondent groups), you may want to think about the following question:



What can my district or school do to provide a greater focus on nutrition at school?

Similarly, there are survey items that group together as School-Wide Initiatives. Looking at the results for this item content group may help you to gauge how well your Physical Health school-wide initiatives are perceived. If you find that responses are not as favorable as you would like (or if you find a discrepancy between the perceptions of different respondent groups), consider the following:



What can my district or school do to better ensure that our Physical Health improvement efforts are addressing the needs of students, staff, and parents?

What policies and procedures are currently in place in my school to enhance physical health? What new policies and procedures need to be implemented? Which policies and procedures should we consider modifying or eliminating? What are our state requirements in this area? What are our obligations under federal civil rights laws in this area?

Note: In all cases, you must comply with your obligations under federal civil rights laws and any applicable state requirements.



Appendix A: Guiding Questions for Districts

You can use the guiding questions in this appendix to help use your data to focus on universal and targeted approaches to Physical Health. In this appendix, you will find:

- Initial guiding questions (scale scores);
- Deeper guiding questions (overall);
- Deeper guiding questions (focused on interventions); and
- Other questions to consider.

Initial Guiding Questions (GQs): District Scale Scores

Scale scores are the premier way that the EDSCLS as well as many other school climate surveys measure school climate. A scale score, which combines multiple survey items related to different aspects of a topic area, is a more robust measure than just attempting to measure the topic by asking about it with a single item. For more information on scale scores, please see the *Data Interpretation Guide*.

Using benchmarked scale scores, you can compare the levels in which topic area scores fall within and across individual respondent groups (instructional staff and noninstructional staff) and within and across domains (Safety, Environment, and Engagement). These comparisons will help you make meaningful interpretations of your data.

For more information, please see <u>Appendix A</u> in the *Data Interpretation Guide* for benchmarked scale score interpretations.

Consider using the EDSCLS Data Analysis Worksheet to guide your analysis and interpretation of scale scores.

A Universal Approach

GQ1. What does our **instructional staff** Physical Health scale score tell us about how these staff perceive physical health in our district?

For example, you can examine:

- How do the instructional staff Physical Health scale scores compare across schools in our district?
- How does our district's instructional staff Physical Health scale score compare with our state's score (if available)?
- How does our district's instructional staff scale score compare with our district's instructional staff scores on other topic areas within the Environment domain—is it relatively low or high, or in the middle?
- Districts that use the EDSCLS can examine how the instructional staff benchmarked scale score levels compare across schools, compare with the district, with other topic areas within and across domains, and across respondent groups.

GQ2. What does our **noninstructional staff** Physical Health scale score tell us about how these staff perceive physical health in our district?

For example, you can examine:

How do the noninstructional staff Physical Health scale scores compare across schools in our district?



- How does our district's noninstructional staff Physical Health scale score compare with our state's score (if available)?
- How does our district's noninstructional staff scale score compare with our district's noninstructional staff scores on other topic areas within the Environment domain—is it relatively low or high, or in the middle?
- Districts that use the EDSCLS can examine how the noninstructional benchmarked scale score levels compare across schools, compare with the district, with other topic areas within and across domains, and across respondent groups.

A Targeted Approach

GQ3. What do the district Physical Health scale scores by **respondent characteristics** tell us about how different subgroups perceive physical health in our district?

For example, you can examine:

- How the perceptions of physical health compare across various subgroups of instructional staff (e.g., Black or African-American staff versus Asian staff)?
- How the perceptions of physical health compare across various subgroups of noninstructional staff (e.g., males versus females)?
- Districts that use the EDSCLS can examine how topic area benchmarked scale score levels compare across respondent groups and across respondent subgroups.

Now that you have considered these questions, what would you like to do next? You can:

 Click on <u>item-level data</u> to see how item-level results can help provide you with concrete examples of physical health that may be more immediately actionable.

Taking a deeper look within a single respondent group will allow for a more thorough picture of that group's perceptions. You also can:

- Click on deeper learning questions to help you to put all your data (survey, administrative, and qualitative) into context.
- Click on <u>Physical Health</u> to go to a webpage with suggestions for interventions that can be implemented immediately
 as well as longer term strategies and interventions.

Examining the deeper guiding questions will help you more thoroughly put your data into context and use them moving forward, whereas the webpage will provide suggestions on strategies and interventions that may be implemented immediately.

If you have calculated average (mean) Physical Health values, you also can:

■ Click on <u>average (mean) Physical Health values</u> to look at Physical Health values across respondent groups.



Deeper Guiding Questions (DGQs) About Data for Districts

A Universal Approach

- DGQ1. Are there other district-level databases that can give us additional information about what is going on across stakeholders in the district and what actions to take (e.g., administrative data such as incident data, attendance/truancy data, graduation rates, office discipline referrals and disciplinary actions, as well as other data such as Youth Risk Behavior Surveillance System survey data, if available)? (Click on the *Reference Manual* for more information on aligning indicators.)
 - a. Do they show the same picture of school climate as your district school climate survey data?
 - b. What additional information do these data give us?
 - c. How can we use these data to help us understand universal physical health needs in our district?
- DGQ2. Based on our overall Physical Health scale score, should we consider physical health a priority for improvement in our district?

A Targeted Approach

- DGQ3. Are there other district-level databases that can tell us more about **subgroups of students** and **staff** needing support in physical health (e.g., administrative data such as incident data, attendance/truancy data, graduation rates, office discipline referrals and disciplinary actions, as well as other data such as Youth Risk Behavior Surveillance System survey data, if available)?
 - a. Do they show the same picture of school climate as your district school climate survey data for these subgroups?
 - b. What additional information do these data give us?
 - c. How can we use these data to help us understand targeted physical health needs in our district?
- DGQ4. If we are using a three-tiered system of support in our district, what do these data tell us about our use of resources within that system? Are our practices and programs addressing the needs identified by our data?
 - a. What are our district's Tier 1 resource distribution needs? Tier 2 needs? Tier 3 needs?
- DGQ5. Based on our scale scores **by respondent characteristics**, should we consider the physical health in our district a priority for improvement?

Other Questions to Consider

- DGQ6. How can we drill down to further understand what students and other stakeholders think about physical health needs in our district (e.g., convene focus groups of students, staff, parents/ guardians; conduct student fishbowls and facilitated discussion sessions)?
- DGQ7. Based on our answers to these questions, what conversations do we need to have about using our resources, and with whom should we have them?



Deeper Guiding Questions About Interventions¹⁰ for Districts A Universal Approach

- DGQ8. What interventions pertaining to physical health are currently in place in our district, and how can we best evaluate whether these interventions are working?
- DGQ9. How can we ensure that these physical health interventions are implemented with fidelity?
- DGQ10. How do we know which interventions are effective?
 - a. How can we best evaluate whether these interventions are working?

A Targeted Approach

- DGQ11. If we are using a three-tiered system of support in our district, what interventions pertaining to physical health have been shown to work that should be continued or expanded at each tier?
- DGQ12 What interventions pertaining to physical health have been shown to work in other districts, per-tier, and what are the conditions under which they work?
- DGQ13. What resources do we need to improve physical health for our students, per-tier, in our district?
- DGQ14. What interventions pertaining to physical health have worked or are working and should be continued or expanded for students at higher levels of risk in our district?
- DGQ15. What new interventions pertaining to physical health can be introduced and implemented that will either provide new support or complement what is already being done at each tier?
 - a. Why do we think these interventions would be more effective than current or past efforts?
- DGQ16. How can we sustain (institutionalize) tiered support for improving conditions pertinent to physical health in our district?

¹⁰ Click on the <u>Reference Manual</u> for information about interventions such as best practices, strategies, and programs; multi-tiered systems of support; and fidelity of implementation.



Other Questions to Consider

- DGQ17. How can we best fold training for implementing physical health interventions into professional development efforts?
 - a. Which training efforts have been successful or unsuccessful in the past?
 - b. Why were some efforts more successful than others?

Now that you have considered these questions, what would you like to do next?

- Click on <u>item-level data</u> to see how item-level results can help provide you with concrete examples of physical health that may be more immediately actionable.
- Click on <u>Physical Health</u> to go to a webpage with suggestions for interventions that can be implemented immediately
 as well as longer term strategies and interventions.

If you have calculated average (mean) Physical Health values, you also can:

■ Click on <u>average (mean) Physical Health</u> values to look at Physical Health values across respondent groups.



Appendix B: Guiding Questions for Schools

You can use the guiding questions in this appendix to help you use your data to focus on universal and targeted approaches to physical health. In this appendix, you will find:

- Initial guiding questions (scale scores);
- Deeper guiding questions (overall);
- Deeper guiding questions (focused on interventions); and
- Other questions to consider.

Initial Guiding Questions: School Scale Scores

Scale scores are the premier way that the EDSCLS as well as many other school climate surveys measure school climate. A scale score, which combines multiple survey items related to different aspects of a topic area, is a more robust measure than just attempting to measure the topic by asking about it with a single item. For more information on scale scores, please see the *Data Interpretation Guide*.



Using benchmarked scale scores, you can compare the

levels in which topic area scores fall within and across individual respondent groups (instructional staff and noninstructional staff) or within and across domains (Safety, Environment, and Engagement). These comparisons will help you make meaningful interpretations of your data.

For more information, please see <u>Appendix B</u> in the *Data Interpretation Guide* for benchmarked scale score interpretations.

Consider using the EDSCLS Data Analysis Worksheet to guide your analysis and interpretation of scale scores.

A Universal Approach

GQ1. What does our **instructional staff** Physical Health scale score tell us about how these staff perceive physical health in our school?

For example, you can examine:

- How does our school's instructional staff Physical Health scale score compare with our district's score (if available)?
- How does our school's instructional staff Physical Health scale score compare with our state's score (if available)?
- How does our school's instructional staff Physical Health scale score compare with our school's instructional staff scores on other topic areas within the Environment domain—is it relatively low or high, or in the middle?
- Schools that use the EDSCLS can examine how the instructional staff benchmarked scale score levels compare with those of the district (if available), with other topic areas within and across domains, and across respondent groups.



GQ2. What does our **noninstructional staff** Physical Health scale score tell us about how staff perceive physical health in our school?

For example, you can examine:

- How does our school's noninstructional staff Physical Health scale score compare with our district's score (if available)?
- How does our school's noninstructional staff Physical Health scale score compare with our state's score (if available)?
- How does our school's noninstructional staff Physical Health scale score compare with our school's noninstructional staff scores on other topic areas within the Environment domain— is it relatively low or high, or in the middle?
- Schools that use the EDSCLS can examine how the noninstructional staff benchmarked scale score levels compare with those of the district (if available), with other topic areas within and across domains, and across respondent groups.

A Targeted Approach

GQ3. What do the school Physical Health scale scores by respondent characteristics tell us about how each subgroup perceives physical health in our school?

For example, you can examine:

- How do the perceptions of physical health compare across various subgroups of instructional staff (e.g., Black or African-American staff versus Asian staff)?
- How do the perceptions of physical health compare across various subgroups of noninstructional staff (e.g., males versus females)?
- Schools that use the EDSCLS can examine how topic area benchmarked scale score levels compare across respondent groups and across respondent subgroups.

Now that you have considered these questions, what would you like to do next? You can:

 Click on <u>item-level data</u> to see how item-level results can help provide you with concrete examples of physical health that may be more immediately actionable.

Taking a deeper look within a single respondent group will allow for a more thorough picture of that group's perceptions. You also can:

- Click on deeper guiding questions to help you to put all your data (survey, administrative, and qualitative) into context.
- Click on <u>Physical Health</u> to go to a webpage with suggestions for interventions that can be implemented immediately
 as well as longer term strategies and interventions.

Examining the deeper guiding questions will help you more thoroughly put your data into context and use them moving forward, whereas the webpage will provide recommendations on strategies and interventions that may be implemented immediately.

If you have calculated average (mean) Physical Health values, you also can:

Click on <u>average (mean) Physical Health values</u> to look at Physical Health values across respondent groups.



Deeper Guiding Questions About Data for Schools

A Universal Approach

- DGQ1. Are there school-level databases that can give us additional information about what is going on across stakeholders in the school and what actions to take (e.g., administrative data such as incident data, attendance/truancy data, graduation rates, office discipline referrals and disciplinary actions, as well as other data such as Youth Risk Behavior Surveillance System survey data, if available)? (Click on the *Reference Manual* for more information on aligning indicators.)
 - a. Do they show the same picture of school climate as your school's school climate survey data?
 - b. What additional information do these data give us?
 - c. How can we use these data to help us understand universal physical health needs in our school?
- DGQ2. Based on our overall Physical Health scale scores, should we consider physical health a priority for improvement in our school?

A Targeted Approach

- DGQ3. Are there other school-level databases that can tell us more about **subgroups of students or staff** needing support in physical health (e.g., administrative data such as incident data, attendance/truancy data, graduation rates, office discipline referrals and disciplinary actions, as well as other data such as Youth Risk Behavior Surveillance System survey data, if available)?
 - a. Do they show the same picture of school climate as your school's school climate survey data?
 - b. What additional information do these data give us?
 - c. How can we use these data to help us understand targeted physical health needs in our school?
- DGQ4. If we are using a three-tiered system of support in our school, what do these data tell us about our use of resources within that system? Are our practices and programs addressing the needs identified by our data?
 - a. a. What are our school's Tier 1 resource distribution needs? Tier 2 needs? Tier 3 needs?
- DGQ5. Based on our scale scores **by respondent characteristics**, should we consider physical health in our school a priority for improvement?

Other Ouestions to Consider

- DGQ6. How can we drill down to further understand what students and other stakeholders think about physical health needs in our school (e.g., convene focus groups of students, staff, parents/guardians; conduct student fishbowls and facilitated discussion sessions)?
- DGQ7. Based on our answers to these questions, what conversations do we need to have about using our resources, and with whom should we have them?



Deeper Guiding Questions About Interventions¹¹ for Schools

A Universal Approach

- DGQ8. What interventions pertaining to physical health are currently in place in our school, and how can we best evaluate whether these interventions are working?
- DGQ9. How can we ensure that these physical health interventions are implemented with fidelity?
- DGQ10 How do we know which interventions are effective?
 - a. How can we best evaluate whether these interventions are working?

A Targeted Approach

- DGQ11. If we are using a three-tiered system of support in our school, what interventions pertaining to physical health have been shown to work that should be continued or expanded at each tier?
- DGQ12. What interventions pertaining to physical health have been shown to work in other schools, per-tier, and what are the conditions under which they work?
- DGQ13. What resources do we need to improve physical health for our students, per-tier, in our school?
- DGQ14. What interventions pertaining to physical health have worked or are working for students in our school at higher levels of risk that should be continued or expanded?
- DGQ15. What new interventions pertaining to physical health can be introduced and implemented that will either provide new support or complement what is already being done at each tier?
 - a. Why do we think these interventions would be more effective than current or past efforts?
- DGQ16. How can we sustain (institutionalize) tiered support for improving conditions pertinent to physical health in our school?

¹¹ Click on the *Reference Manual* for more information about interventions such as best practices, strategies, and programs; multi-tiered systems of support; and fidelity of implementation.



Other Questions to Consider

- DGQ17. How can we best fold training for implementing physical health interventions into professional development efforts?
 - a. Which training efforts have been successful or unsuccessful in the past?
 - b. Why were some efforts more successful than others?

Now that you have considered these questions, what would you like to do next? You can:

- Click on <u>item-level data</u> to see how item-level results can help provide you with concrete examples of physical health that may be more immediately actionable.
- Click on <u>Physical Health</u> to go to a webpage with suggestions for interventions that can be implemented immediately
 as well as longer term strategies and interventions.

If you have calculated average (mean) Physical Health values, you also can:

■ Click on <u>average (mean) Physical Health values</u> to look at Physical Health values across respondent groups.

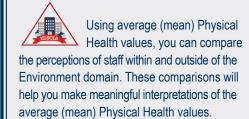


Appendix C: Additional Guiding Questions: District Average (Mean) Physical Health Values

You can use the guiding questions in this appendix to help you use your data to focus on universal and targeted approaches to physical health. In this appendix, you will find:

 Additional guiding questions (average [mean] Physical Health values)

Average (mean) Physical Health values (on a scale of 1–4) can help you gauge how favorably respondents perceive the topic area. Click on the <u>Data Interpretation Guide</u> to go to more information on average (mean) Physical Health values and an explanation of the scale of 1–4.



See <u>Appendix C</u> of the *Data Interpretation Guide* for more information on interpreting average (mean) topic area values for EDSCLS users.

A Universal Approach

GQ1. What does our **instructional staff** average (mean) Physical Health value tell us how these staff perceive physical health in our district?

For example, you can think about these comparisons:

Comparing across respondent groups:

■ How does our instructional staff average (mean) Physical Health value compare with the average (mean) Physical Health value for noninstructional staff in our district?

Comparing across topic areas:

- How does our instructional staff average (mean) Physical Health value compare with the instructional staff average (mean) value of other topic areas of interest, within and outside of the Environment domain?
- GQ2. What does our **noninstructional staff** average (mean) Physical Health value tell us about how these staff perceive physical health in our district?

For example, you can think about these comparisons:

Comparing across respondent groups:

■ How does our noninstructional staff average (mean) Physical Health value compare with the average (mean) Physical Health value for instructional staff in our district?

Comparing across topic areas:

How does our noninstructional staff average (mean) Physical Health value compare with the noninstructional staff average (mean) value of other topic areas of interest, within and outside of the Environment domain?



A Targeted Approach

GQ3. What do our average (mean) Physical Health values **by respondent characteristics** tell us about how **instructional staff** perceive physical health in our district?

For example, you can think about these comparisons:

Comparing across topic areas:

■ How does the average (mean) Physical Health value for certain subgroups of instructional staff (e.g., Asian instructional staff) compare with that subgroup's average (mean) values on other topic areas within the Environment domain (e.g., Asian instructional staff average [mean] values on Mental Health)?

Comparing across respondent subgroups:

How does the average (mean) Physical Health value for certain instructional staff subgroups (e.g., Black or African-American instructional staff) compare with that subgroup of noninstructional staff (i.e., Black or African-American noninstructional staff)?

GQ4. What do our average (mean) Physical Health values by **respondent characteristics** tell us about how **noninstructional staff** perceive physical health in our district?

For example, you can think about these comparisons:

Comparing across topic areas:

■ How does the average (mean) Physical Health value for certain subgroups of noninstructional staff (e.g., male noninstructional staff) compare with that subgroup's average (mean) values on other topic areas within the Environment domain (e.g., male noninstructional staff average [mean] values on Mental Health)?

Comparing across respondent subgroups:

How does the average (mean) Physical Health value for certain noninstructional subgroups (e.g., Asian noninstructional staff) compare with that subgroup of instructional staff (i.e., Asian instructional staff)?

Now that you have considered these questions, what would you like to do next? You can:

■ Click on <u>item-level data</u> to see how item-level results can help provide you with concrete examples of physical health that may be more immediately actionable.

You also can:

- Click on <u>deeper learning questions</u> to help you to put all your data (survey, administrative, and qualitative) into context.
- Click on <u>Physical Health</u> webpage to go to suggestions for interventions that can be implemented immediately as well as longer term strategies and interventions.

Examining the deeper guiding questions will help you to more thoroughly put your data into context and use them moving forward whereas the webpage will provide recommendations on strategies and interventions that may be implemented immediately.

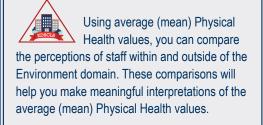


Appendix D: Additional Guiding Questions: School Average (Mean) Physical Health Values

You can use the guiding questions in this appendix to help you use your data to focus on universal and targeted approaches to physical health. In this appendix, you will find:

 Additional guiding questions (average [mean] Physical Health values)

Average (mean) Physical Health values (on a scale of 1–4) can help you gauge how favorably respondents perceive the topic area. Click on the <u>Data Interpretation Guide</u> to go to more information on average (mean) Physical Health values and an explanation of the scale of 1–4.



See <u>Appendix C</u> in the *Data Interpretation Guide* for more information on interpreting average (mean) topic area values for EDSCLS users.

A Universal Approach

GQ1. What does our **instructional staff** Physical Health average (mean) value tell us about how these staff perceive physical health in our school?

For example, you can think about these comparisons:

Comparing across respondent groups:

■ How does our instructional staff average (mean) Physical Health value compare with the average (mean) Physical Health value for noninstructional staff in our school?

Comparing across topic areas:

- How does our instructional staff average (mean) Physical Health value compare with the instructional staff average (mean) value of other topic areas of interest, within and outside of the Environment domain?
- GQ2. What does our **noninstructional staff** average (mean) Physical Health values tell us about how staff perceive physical health in our school?

For example, you can think about these comparisons:

Comparing across respondent groups:

■ How does our noninstructional staff average (mean) Physical Health value compare with the average (mean) Physical Health value for instructional staff in our school?

Comparing across topic areas:

How does our noninstructional staff average (mean) Physical Health value compare with the noninstructional staff average (mean) value of other topic areas of interest, within and outside of the Environment domain?



A Targeted Approach

GQ3. What do our average (mean) Physical Health values by **respondent characteristics** tell us about how instructional staff perceive physical health in our school?

For example, you can think about these comparisons:

Comparing across topic areas:

■ How does the average (mean) Physical Health value for certain subgroups of instructional staff (e.g., Asian instructional staff) compare with that subgroup's average (mean) values on other topic areas within the Environment domain (e.g., Asian instructional staff average [mean] values on Mental Health)?

Comparing across respondent subgroups:

- How does the average (mean) Physical Health value for certain instructional staff subgroups (e.g., Black or African-American instructional staff) compare with that subgroup of noninstructional staff (i.e., Black or African-American noninstructional staff)?
- GQ4. What do our average (mean) Physical Health values by respondent characteristics tell us about how noninstructional staff perceive physical health in our school?

For example, you can think about these comparisons:

Comparing across topic areas:

■ How does the average (mean) Physical Health value for certain subgroups of noninstructional staff (e.g., male noninstructional staff) compare with that subgroup's average (mean) values on other topic areas within the Environment domain (e.g., male noninstructional staff average [mean] values on Mental Health)?

Comparing across respondent subgroups:

How does the average (mean) Physical Health value for certain noninstructional subgroups (e.g., Asian noninstructional staff) compare with that subgroup of instructional staff (i.e., Asian instructional staff)?

Now that you have considered these questions, what would you like to do next? You can:

Click on <u>item-level data</u> to see how item-level results can help provide you with concrete examples of physical health that may be more immediately actionable.

You also can:

- Click on deeper learning questions to help you to put all your data (survey, administrative, and qualitative) into context.
- Click on <u>Physical Health</u> to go to a webpage with suggestions for interventions that can be implemented immediately
 as well as longer term strategies and interventions.

Examining the deeper guiding questions will help you more thoroughly put your data into context and use them moving forward, whereas the webpage will provide recommendations on strategies and interventions that may be implemented immediately.



Disclaimer

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