**Data Work Group**

**Meeting Notes**

**Date:** Wednesday, April 14, 2021

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

1. Welcome from Dr. Matt Courser.
2. KUDOS instructions from Daniela Ocaña, OID Project Officer.
3. Dr. Courser discussed roadmap of WG meetings (today thru May 19)

* Today the agenda includes a review of baseline and discussion of IRB/ ethical review requirements in Pereira.
* April 21st, final review of baseline questionnaire and selecting essential items
* April 28, focus on secondary data sources and indicator data
* May 5, discuss what we know about interventions that will be implemented
* Meetings will be Wednesdays at 11:00a EST per feedback from WG members (this was the most popular time). If unable to make the meeting, meeting notes will be posted on ISSUP forum.

1. Summary of Feedback for Baseline Questionnaire (Sections 1-6)

* In the past week PIRE has received feedback and suggestions to improve baseline. Last evening, also received additional feedback from Ministry of Justice and Colombo Plan.
* Before survey goes into the field, PIRE will fix syntax/translation errors and back-translate the survey with local data collection agency to ensure comprehensibility.

Part I: Individual Household and Neighborhood Characteristics

* WG members suggested starting the questionnaire with basic demographics before asking household and neighborhood questions.
* WG members agreed that Item 4 (quality of life question) is too vague and subjective. Suggested focusing on asking about physical characteristics of the neighborhood and home instead to provide context. Also suggested using other items that are already included in the questionnaire (e.g., green spaces, transportation, etc.) to assess quality of life. Items need to be specific and objective.
* WG members suggested reviewing the existing National Study of Quality of Life (Estudio Nacional de Calidad de Vida) and include those items for comparison purposes.
* Keep in mind that all homes in Colombia have economic stratus rankings depending on the public utilities that the home receives (e.g., water, electricity, etc.). In our national studies we ask the economic stratus as it relates to public utilities.
* WG members agreed that gang membership and behavior items are not culturally reflective of Pereira. WG members explained there may be other organized crime in addition to gangs like child guerrilleros.
* WG members suggested leaving these items for Colombians to determine so that a more appropriate reality is assessed.
* WG member suggested reviewing a paper written by a university academic about the role of gangs in Medellin. This paper may be able to help inform the development of items.
* WG member from the Pereira’s Municipality of Health explained that there is not a current study that assesses gangs or gang membership in Pereira. However, WG member explained that the term “pandillas” is used along with “bandas”.
* WG member shared that a national survey exists on neighborhood safety and citizen safety (“Conviviencia y Seguridad Ciudadana”). WG member will share the survey with the PIRE team to have as reference, especially with terminology (e.g., “combos”, “grupos armados organizados”, etc.).
* WG member agreed that it is best to expand the terminology, and not just focus on gangs or “pandillas”. Gangs are a reality but there are also other realities. WG member advised to refer to the national survey mentioned above.
* WG member also advised to focusing on questions that relate to the surveyor knowing someone else who may be involved with gangs.
* WG member suggested a revision to item 5. The term “bodega” is not used in Pereira and suggested replacing with “tiendas” or “estanquillos”.

Part II-Personal Characteristics

* PIRE received feedback prior to the meeting suggesting including additional indicators of mental and emotional health and to measure those things more directly.
* WG member suggested incorporating some of the mental health and contextual items from the National Survey of Mental Health (2015) to the baseline. The Quality of Life Survey also includes items on MH that could be useful.
* WG member commented that there are a lot of gang activity and substance use activity items. WG member asked if the survey could be better balanced to include items that contextualize those behaviors. More specifically, WG member suggested reviewing the possibility of increasing mental health, wellbeing, and access to services/treatment items (also included in National Survey of MH) and reducing number of gang activity and substance use items.
* WG member explained the current relationship items are for adolescents, and that these items should be broadened to include adult relationships, and also if the surveyor has children (and relationship with their children).
* WG member explained it may also be beneficial to add a question that makes up the household. It is important to keep in mind that extended family members may also live in your household.

Part III – General opinions, risk factors associated with alcohol and drug use, other types of behaviors

* Item 28 asks if majority of friends consume cocaine, basuco, and marijuana. WG member asked, “Why just these substances and not others?”
* Dr. Courser explained that item was chosen based on what the team knows about potential use of substances and focused on those that might be more frequent. PIRE will look if other substances need to be listed.
* WG member suggested including items that assess injection drug use health outcomes, like HIV, Hep C, and access and availability to substance use and mental health treatment and services.

Part IV – Consumption of Drugs and Alcohol

* PIRE received feedback prior to meeting that suggested streamlining consumption items to include other items. PIRE will revisit these items and assess how to adjust to include other suggested measures.
* WG member provided a suggestion for Item 37, “Do you have close family members that get drunk?” WG member explained it is important to know who those family members are. At least two WG members suggested adding an item that asks participant to specify which family members.
* WG member explained there are several leading questions. In several occasions, the survey assumes that there is a substance use risk; which has a tendency to find problems where there may not be problems. WG member suggested reviewing and revising any leading questions.
* WG member explained that the SPA consumption surveys that are administered nationally provide data at the department level, and also municipal levels. It also includes standardized instruments in measuring alcohol risks and harms, and abuse and dependence of drugs. This is one of the few studies that have this wide of reach. We suggest including items that are already included in national studies.

Part V. Mental Health

* WG member suggested including several scales used in the National Mental Health Survey that assess mental health and risks factors associated with mental health conditions and substance use. This survey was conducted at the national level, so it would be beneficial to have city-level data.

Part VI. and VII. Impacts of COVID-19 Pandemic and Final Demographics

* WG member suggested asking demographics questions at the beginning of questionnaire.
* WG member explained that for national studies in Colombia they define “Hogar” as anyone who shares a meal.

Overall Comments

* WG member affirmed that this exercise of identifying what is missing from the baseline survey is important. However, a process to determine what is essential is needed. It is important to understand the reality of survey administration as well as the budget. Surveying a person for 2 hours is simply impossible. Need to identify what is most relevant and discuss how to reduce and select essential items.
* WG member added that participants get fatigued with so many questions and will impact the responses to what is key. Therefore, WG member agrees that the number of ítems should be limited and that we should focus on the main objective.
  + Dr. Courser is in agreement. He expressed the importance of hearing all feedback and requests as a work group, but then select what is essential. It is not realistic to measure everything in one survey.
  + In terms of process, PIRE will review feedback and share with Work Group a revised version of the survey. Then, PIRE will explain with the Work Group what feedback they were able to incorporate into the baseline survey, struggled to include or unable to include and share why. After this process, PIRE will ask Work Group to identify the essential concepts/items to measure.
  + Dr. Courser emphasized today’s meeting has been productive and helpful, and explained the next step of eliminating items will be a challenging one.
  + Ideally, survey should take 45 minutes.

1. IRB or Ethical Review

* Dr. Courser asked Work Group if there is a requirement either by city or regional/national government that a survey like this be reviewed by an IRB or ethics community? Dr. Courser affirmed that the survey will need to be approved by PIRE’s IRB.
* WG member from Pereira’s Ministry of Health explained the survey will need to be reviewed and approved by the Ministry of Health. WG member is not aware of any additional review. WG member also suggested that PIRE meet with the city’s epidemiologist.

1. Closing Remarks

* Dr. Courser thanked Work Group members for their feedback. The PIRE team will review feedback, incorporate into questionnaire, and share next week to discuss during next meeting.