Holistic Student Assessment FAQ
The PEAR Institute: Partnerships in Education and Resilience
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Pre-Contract Inquiries

How has this tool been tested for reliability and validity? What is the validity and reliability of this tool?
The psychometric properties of the HSA have been established in a 2012 journal article (below) co-written by Dr. Gil Noam, Director of PEAR, and two of his colleagues: Dr. Tina Malti (U of Toronto) and Dr. Martin Guhn (U of British Columbia). This paper lends support to the HSA as a valid and reliable measure of children and adolescents’ resiliencies. Since this work, our team has shortened and re-validated the HSA, and a technical report on this abbreviated HSA v6.1 is available upon request (authored by Dr. Dylan Robertson). Note that while the HSA has demonstrated strong validity and reliability, these properties vary somewhat from sample to sample but tend to remain high/acceptable. The PEAR Institute research regularly evaluates reliability measures, using Cronbach’s alpha during the processing and analysis of each school/program’s survey data.


How much does it cost for us to use the HSA?
The cost is $3.85 per survey. There are additional training fees, the cost of which depend on the size and needs of your school/program.

What is the process for using the HSA in our school/program?
Please contact Jane Aibel, Director of Operations, to discuss your school/program’s interest. She will help you create an administration plan and develop a contract with The PEAR Institute.

Which grades take the HSA?
The HSA is generally developmentally suitable for students in grades 4 and above. We do, however, have a pilot version that is more developmentally appropriate for grade 3. Some programs choose to use this pilot version for grade 4 as well, depending on the reading levels of students. We also recommend a read-aloud administration for students who may have difficulty with the questions. If you are interested in surveying grades 3 or 4, please speak with Jane Aibel.

Roster and Administration

How will we know how to administer the survey?
We will provide an automated administration webinar that details best practices for implementing the HSA. We request that at least one representative participates in this webinar and communicates the information to the HSA facilitators.

How long does it take to complete the HSA?
We recommend scheduling 30-45 minutes for administration. It takes most students 15-20 minutes to complete the assessment, but we have found that scheduling 30-45 minutes allows for staff to go through the administration "script" with students and allows buffer time for students who may need more time. It usually takes less time for the older grades than for the younger grades.
Why do I have to gather student birthdays for the roster when that field is on the survey?
In our experience, we have found that students mistakenly enter the current year (i.e. 2015) instead of their actual year of birth. We use the roster to correct mistakes so that we have the most accurate information for the student. This is also helpful when searching for the student's PEAR-assigned ID in our database (to ensure that the student does not get assigned multiple PEAR ID's / has multiple unlinked entries in our database).

Is the grade/gender used what the student wrote or what you have on the roster?
We typically use the roster to enter any information that is missing or unusual from student surveys. If a student indicates a different grade level than the other students, we also check the roster to corroborate this response.

When should we administer a post survey?
If you choose to administer a Post-HSA, we recommend that you do so at least four months after the Pre-HSA administration. Schools/programs typically schedule one assessment in the fall and the other in the spring. We recommend that you avoid surveying students during high assessment periods (e.g., during MCAS).

Statistical Analysis
Do we ever norm data using any other factors, besides grade and gender? Do we have the capacity to do that?
Grade and gender are currently the only factors that we use to normalize (“norm”) the HSA data. However, we do have the capacity to include other variables. As our database grows more representative of the U.S. population, we are exploring other methods for normalizing HSA scores and will consider using other student information such as race/ethnicity and geographic region.

What does the line at “0” represent?
The raw data has been standardized by grade and gender to have a mean of zero and a standard deviation of 1. The zero line is the average of all observations. When we show an individual portrait we are comparing that person’s score to the grade and gender adjusted average (i.e., zero).

What does the line connecting the dots on a student portrait represent?
The line is used for presentation purposes only. We have a line connecting the dots so it does not appear that the dots are “floating”. Just because the subscales are next to each other, it does not mean that they are specially related to one another.
When does a score for a student become significant – a strength or challenge?

We consider students that scores at least one standard deviation (SD) away from the mean as presenting above/below average on that subscale. As shown above, based on a normal distribution, 68.2% of students fall within the average range and approximately 31.8% of students (15.9% above, 15.9% below) are one or more standard deviations from the mean. Keep in mind that (a) the cut point of 1SD is somewhat arbitrary, although 1 to 2 SDs from the mean is generally used (1SD = problematic, 2 SD = clinical). In reality, the observable difference in behavior between a student who scores 0.90 on peer problems (average) and another who scores 1.0 (problematic) is likely minimal; (b) with 14 to 19 subscales you can sometimes get a score of +/- 1 SD by pure chance. We do not recommend relying too heavily on any one subscale.

What data are the school/program averages compared to?
The aggregate scores of your school/program are compared to a sample of students in our master database that are of the same grade and gender. For instance, if your students are boys and girls in grades 6 and 8, they will only be compared to boys and girls in grade 6 and 8. PEAR’s master database is diverse (racially/ethnically/socioeconomically) and consists of students in schools/programs like yours across 10 states in the U.S. as well as two other countries.

When does a score become something we should take note of for school/program averages?
Generally speaking and relative to the 0 line, 0.2 SD denotes practical significance. Schools/programs typically use averaged data to compare their strongest and weakest subscales as an entire population. This can be helpful for determining where resources may be directed, which social-emotional skills to focus on, or what data they want to explore more within their dashboards. For instance, if the average score for Empathy is lower than the other average scores, a school/program may choose to seek out evidence-based practices for building empathy, to sort their dashboard by empathy to see which students are struggling and which are thriving, or to collect more data about empathy within their community. Averaged data is an informative tool for where a school/program may choose to focus their attention, but it is not diagnostic.
Receiving and Sharing the Results

What will I receive after we have completed administration?
Approximately one week after administration, you will receive a folder containing the following items:

- **Cover letter:** Summarizes the results of the HSA at your program
- **Aggregate graphs:** Overall group averages, grade comparison, gender comparison
- **Individual student portraits:** Each portrait shows the individual student’s strengths and challenges, and contains a unique ID number rather than the student name, a measure to protect confidentiality
- **HSA Dashboard:** This is a Microsoft Excel document that contains demographic information, aggregate information regarding strengths and challenges, individual student data, and the support need pyramid distribution for your program
- **Roster:** A list of student information, which you will need in order to connect the student portraits (with ID numbers) to the students themselves

What is the support need pyramid?
The HSA uses a pyramid model for understanding students’ needs. The pyramid graphic was developed in the public health field to understand how need breaks out in any given population. You may recognize it from RTI (Response to Intervention), PBIS (Positive Behavioral Interventions and Supports) and a couple of other models that are used commonly in schools. Below is a graphic of a pyramid you will see on your dashboard:

![Support Need Pyramid Graphic]

- **Tier 1:** Students who are thriving and who exhibit primarily strengths and few challenges; interventions for Tier 1 are whole-program interventions
- **Tier 2:** Students who have a balanced combination of strengths and challenges; interventions for Tier 2 are small group, targeted interventions
- **Tier 3:** Students who are approaching crisis or are in crisis; interventions for Tier 3 are intensive specialized interventions

When can I see the results of the HSA?
The Research Department needs approximately five business days to process the data. The turn-around time can vary slightly depending on the time of year, as our volume of incoming data fluctuates. This timeline will begin once we have received the roster and confirmation that all surveys are complete.

Who should attend the HSA Interpretation Session?
In general, the staff and leadership at your program who will be working with the data most closely should attend the session. Some programs choose to have an initial interpretation session with the leadership who is bringing the HSA to the school/program, so that group can then think about rolling out to more direct service staff. Other programs may feel as though the plan and buy-in is strong for direct service staff, and it would be beneficial to have everyone present at the first meeting to create alignment. The initial interpretation session is often held with the principal and student support team members, and other times all classroom teachers are involved. This is may be determined by the school/program’s capacity for professional development time.
Can we show this to students?
Ultimately that is up to you and your program. It is very important to be thoughtful and carefully consider the following recommendations/guidelines before making that decision:

- Have a clear purpose/goal for discussing this with the student (examples: To create action plans and goal setting, to better understand data that doesn’t match what staff sees, etc.).
- A staff member who has strong relationships with the students should do this. This person should be flexible and adapt their way of discussing this based on the student in front of them (not a “one size fits all” approach).
- Weigh out the pros/cons of showing the portrait to the student. Could the conversation be just as meaningful by summarizing your take always rather than looking at the portrait itself? Would seeing the portrait make it more concrete/helpful? Would showing the SDQ make this more/less effective?
- Have a plan for the possibility of students revealing more information about their social/emotional well being during this conversation. Do you have the resources to support a student who reveals difficulty at home? Who reveals depression/self-harm?

Can we share this with parents?
The PEAR Institute is using the HSA to collect information to better inform teachers, student support staff and administrators. Understandably, parents also want to be informed on the health and well being of their child and may be interested in reviewing their child’s HSA portrait. However, from the scientific perspective, sharing individual HSA portraits with parents raises some concerns about how this practice may affect the accuracy and validity of this measure. While The PEAR Institute has not directly evaluated the effect of sharing individual HSA portraits, the literature indicates that fewer assurances of confidentiality, including sharing information with parents, may reduce truthfulness and thus the validity of self-reported social/emotional health-related behaviors among adolescents.

Frequently Asked Questions by Students

Why are you collecting this information?
This questionnaire helps school/program staff to get to know you better as individuals (that is why we ask for your name) and as a classroom. The information we learn will help us decide the types of activities, learning and support you want and need this year.

What if I don’t know how I feel about a statement?
We encourage you to answer the question as well as you can, and to give the answer that best describes how you feel. We suggest that you give the answer that you lean to the most.

I feel uncomfortable answer this question; what should I do?
Your responses to these questions are completely confidential – no teacher, parent or staff member will see your individual answers. We hope that you’re able to complete the whole survey because it helps us understand your experience better, which will help us improve what we do for you and others. However, the survey is 100% voluntary.
This means that you can skip any questions that make you feel uncomfortable, and you can stop taking the survey at any time. This is also true if you are taking the online version of the survey: you can stop at any point in time if you don’t feel comfortable answering any additional questions. However, we would love for you to answer all questions as best as you can, so we can have a better understanding of who you are. We need your help to improve the life of students at [name of school/program]. Students across the United States are completing this survey, and we want to be sure that the voices of students in [CITY/STATE] are also heard!

**Why are some of the questions/statements very similar?**
Some of the questions/statements may sound similar, but each has a somewhat different focus or perspective. When you put the pieces together, they paint a bigger picture that we couldn’t see when they are separate. The answers to these questions help us gather a better understanding of your school/program and who you are.

**Why do you ask for my student information like gender, language and ethnicity?**
We use the student information to see which students tend to get involved in schools and programs like this one, and how we can try and open them up to other students like you. We want to be sure that we are helping students from all backgrounds succeed and grow, and not treating anyone unfairly or leaving anyone out.

**Why do you need my birthday?**
Your birthday lets us see what people of similar ages think about the program and their interests.

**Will others see my answers? Will they know they are mine?**
We keep the answers you share on individual questions private, and no one will see these. The adults who work at this school/program will get summary information from the survey, but no one at your school, your family, or your friends will see your actual answers.

**Frequently Asked Questions by Parents**

**Who is The PEAR Institute?**
The PEAR Institute’s mission is to create and foster school and afterschool settings in which all young people can be successful. Dedicated to "the whole child; the whole day; the whole year," The PEAR Institute continuously integrates research, theory and practice for lasting connections between youth development, school reform and mental health. The PEAR Institute creates and fosters evidence-based innovations so that increasingly "young people can learn, dream, and thrive."
The PEAR Institute was founded in 1999 by Gil. G. Noam, Ph.D., Ed.D. (Habil), an internationally recognized developmental psychologist.
The PEAR Institute is a joint initiative of Harvard University and McLean Hospital. Its programs and projects are a part of a number of schools/programs and in Boston and many other parts of the country.
When I give my permission for my child to take the HSA, what exactly am I giving my consent to?
Designated school/program staff will have access to these results. This information can help staff tailor teaching and support to your child’s unique strengths and needs. The PEAR Institute conducts cutting edge research to improve the ways schools/programs promote social-emotional development. The PEAR Institute will use data from our school/program for research and educational work. Your child’s name will never be used as part of this research.

What do you mean by strengths and resiliencies?
Resiliencies are skills and characteristics that help all of us carry on through challenging times. They help us to navigate change or loss and to take care of ourselves when things get tough. Identifying and increasing resiliencies in young people is especially important as they enter adolescence, increase their independence in the world and prepare for young adulthood.
In this sense, strengths are resiliencies – our strengths help us to manage challenges. The HSA identifies strengths in young people to help them become more resilient.

Why is it important to “measure” strengths and resiliencies?
Although the adults in a young person’s life know a lot about that young person’s strengths, allowing them to tell us about their experiences and self-perceptions can help us to communicate better with them. When a young person reports a strength that we haven’t previously noted, we can build on that strength and find new opportunities for them to express it. We can also identify where they may need additional support from teachers, parents and others.

How will this help build greater resiliency in my child?
That is the goal! Identifying strengths is one important step toward building resiliency. Identifying challenges or vulnerabilities can ensure that we give your child the support they need in order to grow into healthy young adults.

What are you planning to do with the information you receive from this assessment?
The information gathered from the HSA will remain entirely confidential, and only those with permission to view your child’s private records will be able to access the results, unless you indicate otherwise. What we learn about your child from the HSA will help us to identify the best programs and teaching strategies for them; to support them in tackling challenges and expressing their strengths; and to pull in additional resources for all of our students as needed.

Will this cause my child to have anxiety?
When they take the assessment, we emphasize to students that this is not a test – there are no right or wrong answers, we just want to know what it true for them. Our experience in the past is that, even if students approach the survey with some anxiety, once they see the types of questions we are asking, they are eager to respond. Young people usually become excited to tell us about themselves.