



CANADIAN STUDENT TOBACCO, ALCOHOL AND DRUGS SURVEY 2016/2017



CSTADS IS ABOUT TOBACCO, ALCOHOL, DRUGS, BULLYING, SCHOOL CONNECTEDNESS, AND MENTAL HEALTH.

The Canadian Student Tobacco, Alcohol and Drugs Survey (CSTADS)* is a 30-minute survey administered to grade 7 to 12 students in classrooms across Canada. Since 1994, CSTADS has worked with schools, researchers and policy makers to inspire change and action in youth health.

* Formerly the Youth Smoking Survey (YSS)

CSTADS.CA

CSTADS@UWATERLOO.CA



UNIVERSITY OF
WATERLOO



PROPEL
CENTRE FOR
POPULATION
HEALTH IMPACT™

CSTADS IS INSPIRING ACTION

IN OUR SCHOOLS - through school-specific profiles that are provided to schools following their participation and shared within the school community.

IN OUR PROVINCES - through provincial comparisons that guide action and focus on policies, programs and health related interventions.

IN OUR COUNTRY - providing data that informs federal substance use policies and programs.

OVER TIME - allowing us to understand how the school, province and country data change over time.

HOW DOES IT WORK?

- » A school-designated primary contact communicates with project staff to:
 - Schedule a suitable date and time to administer the survey,
 - Provide class enrolment information to ensure an adequate supply of questionnaires,
 - Distribute parent permission and questionnaire materials to teachers.
- » All materials are prepared by project staff and provided to the school contact and participating classroom teachers.
- » On the day of the survey, project staff are available at your school to help with the 30-minute survey and answer any questions.

WHO IS INVOLVED?

- » Students in grades 7 to 12 can participate in the survey with parental permission. Students can refuse to participate at any time.
- » Individual student results are not reported. All results are reported in group format to maintain confidentiality.



WHAT THE SCHOOLS SAY “THE WHOLE PROCESS WAS VERY EASY AND VERY EFFICIENT ... WE ARE VERY PLEASED WITH OUR RESULTS AND WERE HAPPY TO HAVE BEEN A PART OF THE PROJECT.”

- ELLIS POPE, GREENWOOD ACADEMY

WHAT ARE THE BENEFITS?

- » After participating in the survey, each school will receive:
 - A \$100 school honorarium,
 - A School Health Profile and one-page summaries that give you results from your school on key areas of youth health, including: tobacco, drug and alcohol use, school connectedness, bullying, and mental health.
- » Each school has control of the distribution of their results.

Visit **CSTADS.CA** to view sample school health profiles, questionnaires, parent/student information letters, and further details about the project.

WHAT THE SCHOOLS SAY

“OUR SCHOOLS WERE ABSOLUTELY DELIGHTED WITH THE QUALITY OF INFORMATION THEY RECEIVED. MANY SHARED THE INFORMATION WITH THEIR ENTIRE SCHOOL COMMUNITY, INCLUDING PARENT GROUPS, AND USED IT AS A BASIS FOR GOAL-SETTING, VISIONING, AND PLANNING. BEING INVOLVED HAS BEEN A WONDERFUL, VALUABLE EXPERIENCE.”

- **BOB GRAY**, DISTRICT PRINCIPAL,
EAST SCHOOL DISTRICT OF PRINCE EDWARD ISLAND

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WHO IS RESPONSIBLE FOR THE PROJECT?

THE CANADIAN STUDENT TOBACCO, ALCOHOL AND DRUGS SURVEY is conducted by a consortium of researchers across Canada and coordinated centrally by the Propel Centre for Population Health Impact at the University of Waterloo. CSTADS is implemented with the cooperation, support and funding of Health Canada.



Propel Centre for Population Health Impact
University of Waterloo

PARTNERING ORGANIZATIONS:

- » Memorial University of Newfoundland
- » Dalhousie University
- » University of Prince Edward Island
- » New Brunswick Health Council
- » Université du Québec à Montréal
- » University of Waterloo
- » University of Manitoba
- » University of Saskatchewan
- » University of Alberta
- » University of Victoria

CSTADS is a shapes project. CSTADS uses the school health action, planning and evaluation system (shapes) to implement the project. Shapes has experience conducting research with more than 600,000 students in more than 3,500 schools across Canada. Shapes was developed by scientists at the propel centre for population health impact, in partnership with a community of researchers across the country.

Propel founded by:

