Risk and Protective Factor Data Organizer

**Note:** This tool was adapted from Rhode Island State Epidemiology and Outcomes Workgroup, Buka, and Rosenthal.42

This tool allows you to organize and compare the data you gather in order to help you prioritize them. Here is an example of a completed table:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Risk or Protective Factor** | **Mentioned During Key Informant Surveys or Focus Groups** | | | **Supported by Quantitative Data?** | |
| ***Frequently*** | ***Moderately*** | ***Infrequently  or Not at All*** | ***Yes*** | ***No or N/A*** |
| Low perception of risk or harm | ☐ | ☐ | ☐ | ☐ | ☐ |
| Ineffective family management or parental monitoring | ☐ | ☐ | ☐ | ☐ | ☐ |
| Perceived peer approval or actual peer use | ☐ | ☐ | ☐ | ☐ | ☐ |
| Community norms supporting use | ☐ | ☐ | ☐ | ☐ | ☐ |
| Youth access: Commercial | ☐ | ☐ | ☐ | ☐ | ☐ |
| Youth access: Social | ☐ | ☐ | ☐ | ☐ | ☐ |
| Other comments from qualitative data collection: | | | | | |

These risk and protective factors are provided as examples, but please note that this is not an exhaustive list. Communities should fill in the table with the factors relevant to their local context.

A good resource is [*Risk and Protective Factors Associated with Binge or Heavy Episodic Drinking Among Adolescents and Young Adults*](http://captus.samhsa.gov/sites/default/files/captresource/riskprotectivefactorsheavybingedrinking.rem.41215.pdf), a literature review of risk and protective factors for binge drinking among adolescents and young adults conducted in 2015 by SAMHSA’s Center for the Application of Prevention Technologies.

Fill in the table with the risk or protective factors that are relevant in your community.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Risk or Protective Factor** | **Mentioned During Key Informant Surveys or Focus Groups** | | | **Supported by Quantitative Data?** | |
| ***Frequently*** | ***Moderately*** | ***Infrequently  or Not at All*** | ***Yes*** | ***No or N/A*** |
|  | ☐ | ☐ | ☐ | ☐ | ☐ |
|  | ☐ | ☐ | ☐ | ☐ | ☐ |
|  | ☐ | ☐ | ☐ | ☐ | ☐ |
|  | ☐ | ☐ | ☐ | ☐ | ☐ |
|  | ☐ | ☐ | ☐ | ☐ | ☐ |
|  | ☐ | ☐ | ☐ | ☐ | ☐ |
| Other comments from qualitative data collection: | | | | | |

**Notes:**

* A response of **Frequently** means that the risk or protective factor was mentioned by half or more of the participants; **Moderately** means fewer than half but more than one-quarter; **Infrequently or Not at All** means fewer than one-quarter or no mention at all.
* A response of **Yes** to “Supported by Quantitative Data” means that data related to the risk or protective factor are being experienced or are strongly influencing conditions in the community. **No or N/A** means that either data were unavailable, or there is no clear indication that the risk or protective factor is a strong influencer of conditions in the community, or that the analysis is not applicable to your community.