

HB

130

ALASKA STATE LEGISLATURE

Interim:
P.O. Box 109
Wrangell, AK 99929
Phone: (907) 874-3088
Fax: (907) 874-3055



Session:
State Capitol, Room 406
Juneau, AK 99801-1182
Phone: (907) 465-3824
1-800-686-3824
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REPRESENTATIVE PEGGY WILSON
HOUSE DISTRICT 2

SPONSOR STATEMENT House Bill 130

"An Act relating to questionnaires and surveys administered in the public schools."

HB 130 changes parental consent requirements for surveys in schools from active to passive for anonymous surveys. Written permission is still required for non-anonymous surveys. With this bill written denial of permission will be required for anonymous surveys.

School-based surveys are a reliable method for gathering valuable population-based information on youth that helps policy makers, educators, program planners and parents to better understand important health and social issues that affect their chances of program success.

Routine standardized surveys such as the national and state Youth Risk Behavior Survey track trends over time and help guide and evaluate important health and prevention programs. State and federal grant programs that rely on these surveys include tobacco prevention and control, obesity prevention, diabetes, heart disease and stroke, safe and drug free schools and other substance abuse prevention, injury prevention, including violence and suicide prevention, HIV and STD prevention, and more.

Current Alaska statute requires active parental consent on youth participation in surveys. Active parental consent requires written permission to participate in the survey. Active parental consent overburdens the school system and drastically increases the costs and labor involved in conducting student surveys.

Though research and experience suggests that the vast majority of parents would consent to their students participating in such surveys, many schools are unable to use the data they collect because there are not enough participants. Most of the research indicates parental failures to provide written permission are driven by apathy, oversight, or student error – not by refusal. With passive parental consent, the parent is notified and informed about the nature of the survey and allows for the parent to provide a written refusal to participate in the survey.

Notification of surveys and their content will still be sent to every parent of a child that is a candidate to participant in the survey. A parent will have the option of reviewing the entire survey and how it will be administered before it is administered. Any parent who doesn't want their child to participate will have the option to opt-out of the survey.

26-LS0405\E

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REPRESENTATIVE PEGGY WILSON
HOUSE DISTRICT 2

Sectional Analysis

House Bill 130

“An Act relating to questionnaires and surveys administered in public schools.”

Section 1. Requires a school district to get written permission to administer a questionnaire or survey. It exempts anonymous surveys. Surveys that concern public information are also exempted.

Section 2. Requires a school district to provide a parent or guardian the opportunity to deny permission to take an anonymous questionnaire or survey. Written permission is not required.

Section 3. Defines a 2 week time frame for school districts to notice parents of an upcoming questionnaire or survey so that they may either deny permission, for anonymous, or grant permission, for non-anonymous, surveys.

Section 4. Defines what a written notice must contain.

Section 5. Adds language to current statute that defines how a parent can deny permission for student to participate in an anonymous survey.

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REPRESENTATIVE PEGGY WILSON
HOUSE DISTRICT 2

House Bill 130

"An Act relating to questionnaires and surveys administered in the public schools."

LIST OF WITNESSES

Kate Burkhart

Executive Director of Advisory Board on Alcoholism and Drug Abuse (ABADA) and Alaska
Mental Health Board (AMHB)
907-465-8920

Wilda Laughlin (*tentative*)

Leg. Liaison to Health & Social Services
907-465-1613

Emily Nennon

American Cancer Society
907-229-6962

Fr. Gordon Blue, M. Div

Sitka Counseling & Prevention Services
907-747-1430

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**REPRESENTATIVE PEGGY WILSON
HOUSE DISTRICT 2**

House Bill 130

"An Act relating to questionnaires and surveys administered in the public schools."

AFFECTED DEPARTMENTS

Department of Education and Early Development

Leg. Liaison: Marcy Herman, 907-465-2803

FISCAL NOTE

STATE OF ALASKA
2009 LEGISLATIVE SESSION

Fiscal Note Number: 1
 Bill Version: CSHB 130(EDC)
 (H) Publish Date: 4/10/09

Identifier (file name): HB130-EED-ESS-4-3-09 Dept. Affected: Education & Early Development
 Title: "An Act relating to questionnaires and surveys RDU: Teaching and Learning Support
administered in the public schools." Component: School & Student Achievement
 Sponsor: Representative Wilson, Gardner
 Requester: Education, Health and Social Services Component Number: 2796

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

	Appropriation Required	Information						
		FY 2010	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015
OPERATING EXPENDITURES								
Personal Services								
Travel								
Contractual								
Supplies								
Equipment								
Land & Structures								
Grants & Claims								
Miscellaneous								
TOTAL OPERATING		0.0	0.0	0.0	0.0	0.0	0.0	0.0

CAPITAL EXPENDITURES								
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CHANGE IN REVENUES ()								
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FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts								
1003 GF Match								
1004 GF								
1005 GF/Program Receipts								
1037 GF/Mental Health								
Other Interagency Receipts								
TOTAL		0.0	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY2009) cost: _____

POSITIONS

Full-time								
Part-time								
Temporary								

ANALYSIS: (Attach a separate page if necessary)

The Department of Education and Early Development is submitting a zero fiscal note for HB 130.

This legislation repeals and rewrites most of the initial language in AS 14.03.110 which deals in the approval process of administering questionnaires/surveys to students. It gives a parent or guardian the opportunity to submit a written denial of thier child to participate in the questionnaire/survey being administered by the principal or teacher.

Prepared by: Eddy Jeans, Director
 Division: School Finance
 Approved by: Larry LeDoux, Commissioner
Education & Early Development

Phone 465-8679
 Date/Time 4/3/09 12:00 AM
 Date 4/3/2009



Municipality of Anchorage

P.O. Box 196650 • Anchorage, Alaska 99519-6650 • 825 "L" Street • <http://www.muni.org>



Mayor Matt Claman

Health and Human Services Commission

Peggy Wilson, Representative
State Capitol, Room 408
Juneau, AK 99801-1182

March 11, 2009

Dear Representative Wilson,

I am writing to you as chair of the Municipality of Anchorage Health and Human Services Commission on behalf of our 15 members and the many health organizations we represent. We would like to thank you for all of your hard work and dedication to the state.

As the Health and Human Services Commission, our primary mission is to ensure the health and well-being of the Anchorage community. We rely on current information regarding the health and social status of the Anchorage community to determine our priorities and drive action. Critical to our mission is reliable community data including data about the health and well being of our City's youth.

The Municipality of Anchorage Health and Human Services Commission supports HB 130 "An Act relating to questionnaires and surveys administered in the public schools" to encourage greater participation in school-based surveys. Routine standardized surveys such as the national and state Youth Risk Behavior Survey track trends over time and help guide and evaluate important health and prevention programs. The overall statewide response rate to Youth Risk Behavioral Survey (YRBS) in 2005 was 55 percent, which did not meet the required response rate of 60 percent to make it a valid survey. The State was unable to use the data or publish the report since the data would not be representative of the high school population. Anchorage students are a critical sample for the success of YRBS because of they represent approximately 40% of all high school students in the state. The information gathered through school-based surveys is used to inform programs and initiatives about youth behavior that help drive prioritization of efforts to improve community health. An increase in survey participation improves the reliability and validity of survey responses significantly, which provides organizations like Municipality Department of Health and Human Services with critical, current information regarding the health and social status of youth in our community.

Again, thank you for your commitment to our state and its youth. I would appreciate the opportunity to talk with you on this matter at your convenience.

Sincerely,

Brian Saylor PhD MPH, Chair
Anchorage Health and Human Services Commission

Cc. Mayor Matt Claman
Diane Ingle, Director DHHS

Community, Security, Prosperity

2734

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textbook, advocates religion is not unconstitutional censorship. State statutes and regulations allowing local school boards to review and approve textbooks do not, on their face, violate the right of parents or students to freely exercise their religion. September 20, 2007 Op. Atty Gen.
Collateral references. Constitutionality of teaching or otherwise promoting secular humanism in public schools. 103 ALR Fed. 538.
 Constitutionality of regulation or policy governing prayer, meditation, or "moment of silence" in public schools. 110 ALR Fed. 211.
 Distribution or use of Bibles in public schools—modern case. 111 ALR Fed. 121.

Part-time school attendance. (a) Except as provided in (b) of this section, upon request, allow a child, including a child who is also a home-schooled student, or is being home schooled, to be a student in the district. A governing body may not discriminate and admit students or require that part-time students be enrolled until enrollment is completed.
 A governing body is not required to allow part-time enrollment if it would be denied even if the enrollee were a full-time student; or if it would result in an expenditure of public funds for the direct benefit of the student.
 Time spent under this section does not constitute attendance for the purposes of interscholastic or extracurricular student activities. 72 and 73 Op. Atty Gen. 120 SLA 1998.

and so long as the practice is not used by private schools on a widespread basis to provide the curriculum requirements of the private school. Enrollment in extracurricular activities is similarly neither prohibited nor required. June 24, 1993 Op. Atty Gen.

Use of school facilities. The governing body of a school district may use school facilities for any legal gatherings or assemblies. The governing body shall ensure reasonable and impartial use of the facilities.

Liability of public schools and institutions. Tort liability of public schools and institutions for accidents occurring during use of premises and equipment for other than school purposes. 35 ALR3d 712.
 Validity and construction of statute or ordinance forbidding unauthorized persons to enter upon or remain in school building or premises. 50 ALR3d 340.

Search of school lockers. (a) Subject to (b) of this section, a locker or storage container owned by the school or the school district may be searched

(c) Nothing in this section limits the ability of a peace officer, chief of police, or other appropriate person, acting in compliance with local, state, or federal law, to search a locker or other container provided in a public or private school district. (§ 5 ch 33 SLA 1995)

HB 1307

Sec. 14.03.110. Questionnaires and surveys administered in public schools.

(a) A school district, principal or other person in charge of a public school, or teacher in a public school may not administer or permit to be administered in a school a questionnaire or survey, whether anonymous or not, that inquires into personal or private family affairs of the student not a matter of public record or subject to public observation unless written permission is obtained from the student's parent or legal guardian.

(b) For an anonymous questionnaire or survey, written permission required under (a) of this section may be obtained annually and is valid until the commencement of the subsequent school year or until the parent or legal guardian who gave permission submits a written withdrawal of permission to the school principal. The school shall provide each student's parent or legal guardian at least two weeks' notice before administering a questionnaire or survey described under this subsection.

(c) If a school administers to a student a questionnaire or survey that is not anonymous, the school shall obtain the written permission required under (a) of this section from the student's parent or legal guardian at least two weeks before the questionnaire or survey is administered.

(d) The school shall give a student's parent or guardian an opportunity to review the questionnaire or survey described under (b) or (c) of this section and shall give the parent or guardian written notice regarding

- (1) how the questionnaire or survey will be administered to the student;
- (2) how the results of the survey or questionnaire will be used; and
- (3) who will have access to the questionnaire or survey.

(e) A student may refuse to participate in a questionnaire or survey administered in a public school. A student's parent or legal guardian may refuse to allow the student to participate in a specified questionnaire or survey.

(f) In this section, "questionnaire or survey" means a list of questions to, or information collected from, a class or group of students. (§ 1 ch 23 SLA 1979; am §§ 1, 2 ch 63 SLA 1999)

Opinions of attorney general. — AS 14.03.110.— As long as survey questions are limited to the student's own activities and the survey does not ask the student questions about parents or other activities occurring within a student's home, the 1997 Youth Behavior Risk Survey does not impermissibly invade the domain of the student's private family affairs. September 28, 1998 Op. Atty Gen. (Issued before 1999 amendment to this section.)

Sec. 14.03.115. Access to school records by parent, foster parent, or guardian.

Upon request of a parent, foster parent, or guardian of a child under 18 years of age who is currently or was previously enrolled in a municipal school district or a school district that is a regional educational attendance area, the school district shall provide a copy of the child's record. This section does not apply to

(a) a record of a child who is an emancipated minor.



Planned Parenthood of the Great Northwest

March 9, 2009

The Honorable Peggy Wilson
Alaska State House Representative
State Capitol, Rm 403
Juneau, AK 99801-1182

Dear Representative Wilson:

On behalf of Planned Parenthood of the Great Northwest (PPGNW), I'm writing in support of House Bill 130, "*An Act relating to questionnaires and surveys administered in the public schools.*"

Planned Parenthood relies on the results of the school-based Alaska Youth Behavior Risk Survey to determine where our efforts should be in terms of education and STI prevention programs. For accurate survey results it's critical to get as many survey responses as possible. Planned Parenthood recognizes that the current regulations of active parental consent for anonymous surveys decrease the response rate significantly.

House Bill 130 will increase the accuracy of the vital information Planned Parenthood and many other organizations rely on to serve Alaska's young people. Thank you for addressing this issue.

Sincerely,

Clover Simon
Vice President of Alaska
Planned Parenthood of the Great Northwest
(907) 770-9705
clover.simon@ppgnw.org

Planned Parenthood of the Great Northwest
Alaska Administrative Office - 4001 Lake Otis Pkwy
Anchorage, AK 99508



Health and Health Care in Schools

A report on the policies, politics and financing of health programming in schools

Volume 4, Number 3

May 2003

Current issue
Read articles

Pupil Rights Law Allows Parents to Opt Students Out of Surveys

[EMAIL THIS ARTICLE \[1-1\]](#)

In this issue

Disclosure of Health Information Sends School District to Court

A 1998 federal law, the Protection of Pupil Rights Amendment (PPRA), allows parents to inspect instructional materials used in connection with any U.S. Department of Education-funded "survey, analysis, or evaluation." The law, often called the "Hatch amendment" or the "Grassley amendment" for the members of Congress who introduced it, also requires schools to obtain written parental consent before minor students participate in Education Department-funded surveys that ask questions about personal or family matters.

Pupil Rights Law Allows Parents to Opt Students Out of Surveys

Report Cites Effects on Communities When Families Lack Health Insurance

As the result of recent amendments to PPRA in the No Child Left Behind education law (Public Law 107-110, signed January 8, 2002), parents have additional rights to examine materials with regard to the surveying of minor students, even when the surveys are not Education Department-funded, and to opt their children out of surveys and certain non-emergency medical examinations.

Worth Noting

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The Family Policy Compliance Office (FPCO) in the U.S. Department of Education, which administers the Family Educational Rights and Privacy Act (FERPA), has responsibility for the expanded Protection of Pupil Rights law, also known as the "Tiahrt amendment."

Readers respond
Read comments from our readers

The original PPRA law required schools and contractors to make educational materials available for inspection by parents and provided a list of survey questions that would trigger the need for written parental permission. Those requirements remain in place. The trigger questions include inquiries about:

Feedback
Comments & questions

1. political affiliations or beliefs of the student or the student's parent;
2. mental and psychological problems of the student or the student's family;
3. sex behavior or attitudes;
4. illegal, anti-social, self-incriminating, or demeaning behavior;
5. critical appraisals of other individuals with whom students have close family relationships;
6. legally recognized privileged or analogous relationships, such as those with lawyers, physicians, and ministers;
7. religious practices, affiliations, or beliefs of the student or student's parent; or
8. income, other than that required by law to determine eligibility for participation in a program or for receiving financial assistance under such program.

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The PPRA compliance office in the U.S. Department of Education points out that these requirements apply when a survey is funded, at least in part, by any program administered by the U.S. Secretary of Education.

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Under the Tiahrt amendment that took effect in 2002, additional requirements are now in place, and they apply as well to surveys funded by sources other than the U.S. Department of Education. The law now requires public elementary and secondary schools to "develop and adopt policies—in conjunction with parents," regarding:

1. the rights of parents to inspect, upon request, a survey created by a third party before the survey is administered or distributed by a school to students;
2. arrangements to protect student privacy in a survey if it includes any of the eight items noted above;
3. the right of parents to inspect any instructional materials used as part of the education curriculum;
4. administration of physical examinations or screenings that the school may administer to students;
5. collection, disclosure, or use of personal information collected from students for the purpose of marketing, selling;
6. the right of parents to inspect any instrument used in collecting information for marketing or selling.

Schools must notify parents of their PPRA policies at least once annually and must give parents ample opportunity to opt out (remove their child) from participation in surveys containing one or more of the eight items of information specified in the original law.

Parents are also allowed to remove their children from any non-emergency invasive physical examination or screening that is required for attendance or is not necessary to protect the immediate health and safety of the student or other students.

Explanation of the Protection of Pupil Rights Amendment is posted on the Education Department's Family Policy Compliance Office website at

<http://web.archive.org/web/20041030221359/http://www.ed.gov/offices/OM/fpco/ppra/index.html>. The compliance office indicates it will publish regs covering the new parts of the law.

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ALASKA PUBLIC HEALTH ASSOCIATION

Committed To Advancing Alaska's Public Health Since 1978

ALPHA RESOLUTION 7-2008

Support for Passive Parental Consent for the Youth Risk Behavior Survey

Sponsor: Jayne Andreen

Whereas the Youth Risk Behavior Survey (YRBS) is part of an epidemiological surveillance system that was established in 1988 by the Centers for Disease Control and Prevention (CDC) to help monitor the prevalence of behaviors that put young people at risk for the most significant health and social problems that can occur during adolescence and adulthood.

Whereas the survey examines six categories of adolescent behavior including: 1) behaviors that result in unintentional and intentional injuries; 2) tobacco use; 3) alcohol and other drug use; 4) sexual behaviors that can result in HIV infection, other sexually transmitted diseases (STD's) and unintended pregnancies; 5) dietary behaviors; and 6) physical activity.¹

Whereas Alaska's YRBS is a joint project between the Dept. of Education & Early Development and the Dept. of Health and Social Services and was established in Alaska in 1995.²

Whereas survey results are used at the national, state, and local level such as measuring progress towards the national Healthy People 2010 and the Healthy Alaskans 2010 health objectives.

Whereas, understanding the health risk behaviors of youth is critical for developing programs that address risk behaviors practiced and for measuring progress toward program goals.

Whereas Alaska's YRBS has been unable to collect reliable data consistently with the challenge of administering the survey under the active parental consent law AS 14.03.110, which requires written permission from all participating students' parents or legal guardians.²

Whereas employing active parental consent drastically increases costs and labor involved in conducting student surveys, and results in high failure rates for getting enough student responses to get usable data for larger surveys, and the potential for leading to inaccurate/misrepresentative data.³

ALPHA 7-2008
11/17/08

Whereas Alaska is one of only three states in the nation that has a school survey law requiring active parental consent for surveys of this type.³

Whereas most states employ passive parental consent when administering such surveys which involves notifying and informing the parents about the survey and assuming that students will participate unless the parent provides a written refusal to opt out of the survey.³

Whereas it is believed that the majority of parents consent to their students participating in such surveys and that most parental failures to provide active parental consent (written permission to participate) are driven by apathy, oversight, or student error, not by refusal.⁴

Whereas the survey is anonymous and voluntary.

Therefore be it resolved that the Alaska Public Health Association supports the content and the implementation of the Youth Risk Behavior Survey in Alaska with parental notification and passive parental consent

And be it further resolved that the Alaska Public Health Association supports changing the requirement for participation in the survey from active parental consent to passive parental consent.

References:

¹ Centers for Disease Control and Prevention. Retrieved November 2, 2008 from <http://www.cdc.gov/HealthyYouth/yrbs/brief.htm>

² State of Alaska, Department of Health and Social Services. Retrieved November 2, 2008 from <http://www.hhs.state.ak.us/dph/chronic/school/YRBS.htm>

³ Centers for Disease Control and Prevention. National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent and School Health. (2006) *Parental Permission and the Youth Risk Behavior Survey*. 2006

⁴ Ellickson P, Hawes JA. An assessment of active versus passive methods for obtaining parental consent. *Evaluation Review* 1989;13(1):45-55.

Alaska BRFSS HIGHLIGHTS 2007

Behavioral Risk Factor Surveillance System

Introduction

Modification of risk behaviors that contribute to chronic disease, premature death and impaired quality of life is an important public health challenge. The Behavioral Risk Factor Surveillance System (BRFSS) collects information on risk factors, chronic disease prevalence and preventive practices that is essential for the development of chronic disease prevention and health promotion efforts aimed at modifying key risk factors. The BRFSS is conducted in all 50 states, the District of Columbia, Guam, Puerto Rico and the US Virgin Islands and is now the longest running and largest telephone health survey in the world. The State of Alaska began surveillance using the BRFSS in 1991 and has continued yearly since. The Alaska BRFSS is a collaborative project of the Centers for Disease Control and Prevention and the Alaska Division of Public Health.



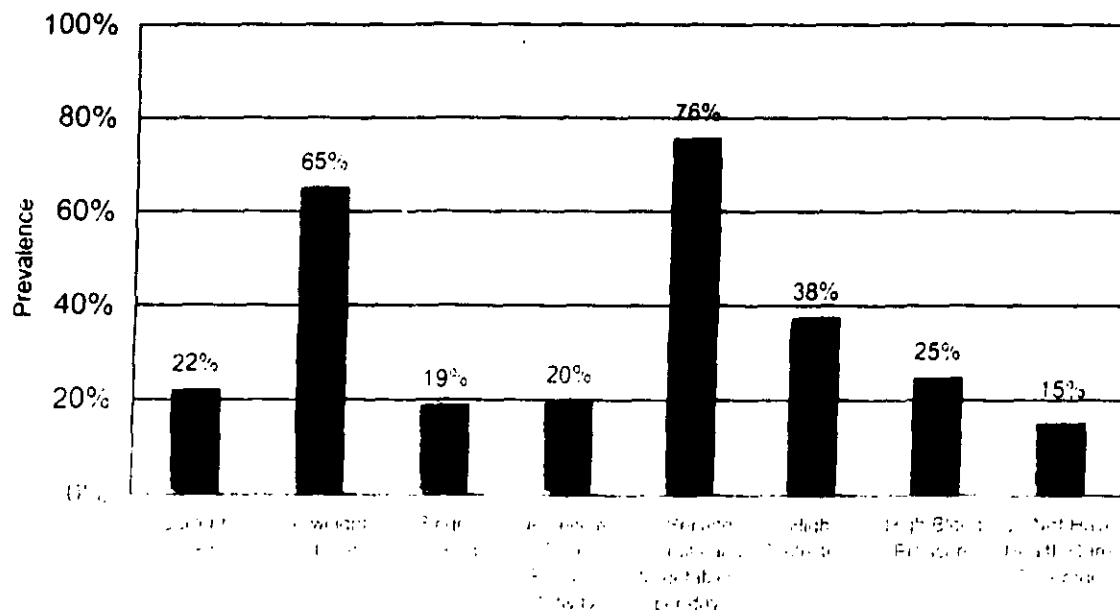
Sarah Palin, Governor
State of Alaska

Karleen K. Jackson, Ph.D., Commissioner
Department of Health and Social Services

Beverly K. Wooley, Director
Division of Public Health

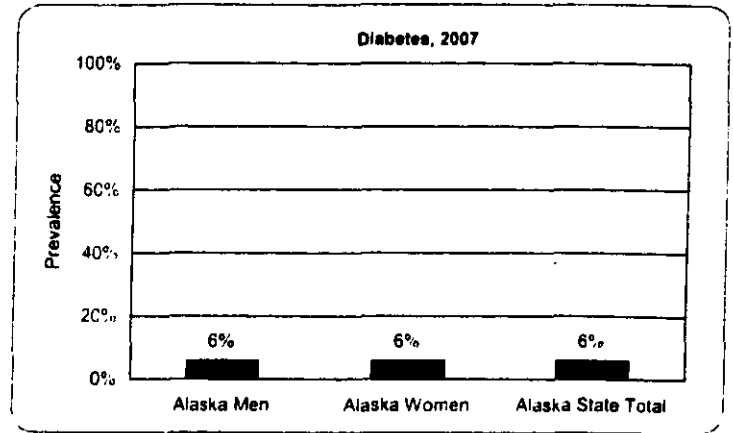
In 2007, 2,552 health interviews were conducted using a standardized BRFSS questionnaire. The interviews were conducted over the telephone from the Health Survey Lab in Juneau using randomly selected telephone numbers. Households were contacted and one adult 18 years of age or older per household was randomly selected to complete the survey. These data were weighted to represent the state's adult population. This report presents highlights from data collected in 2007.

Prevalence of Selected Risk Factors Among Alaskan Adults, 2007



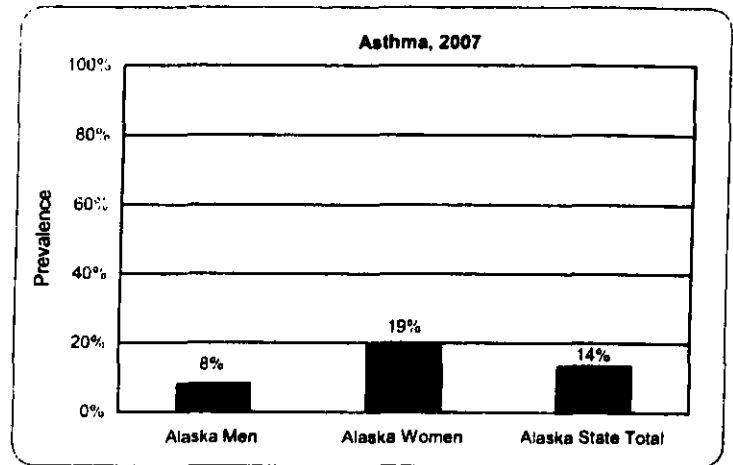
Diabetes

Diabetes increases the risk for heart disease and stroke and can result in blindness and renal disease. In 2007, 6% of Alaskan adults reported being told they have diabetes. There was no difference between men and women in the prevalence of diabetes.



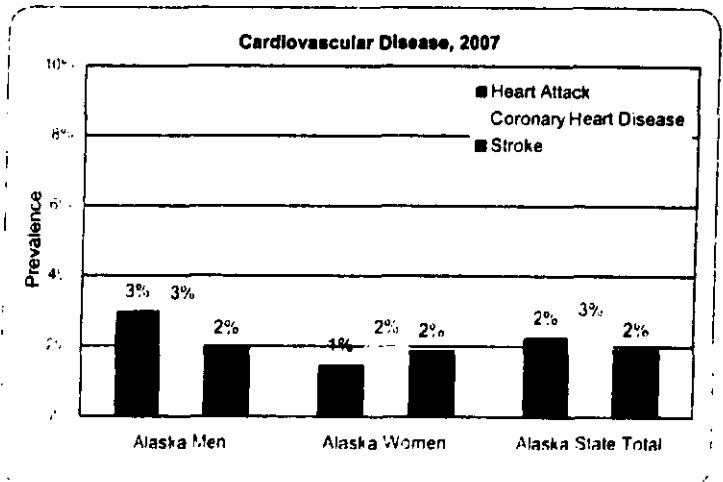
Asthma

Asthma is a leading cause of restricted activity. In 2007, 14% of Alaskan adults reported ever being told they have asthma. Significantly more women than men reported asthma.



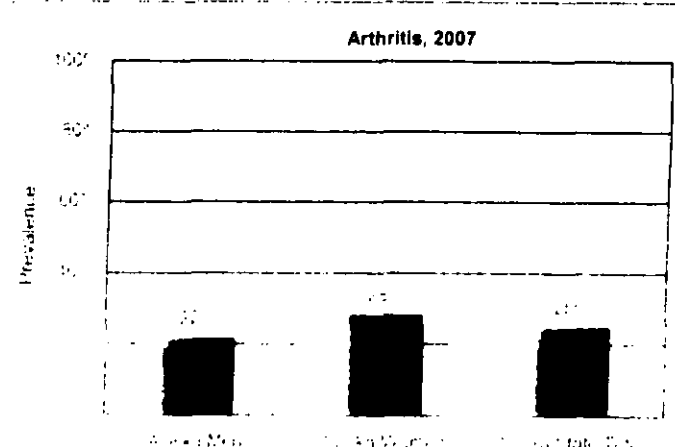
Cardiovascular Disease

Heart disease is a leading cause of death in Alaska and the US as a whole. The BRFSS asks respondents if they have ever been told they have had a heart attack, been told they have coronary heart disease or been told they had a stroke. In 2007, 2% of Alaskan adults said they have had a heart attack, 3% said they have coronary heart disease and 2% said they have had a stroke.



Arthritis

In 2007, 25% of Alaskan adults reported being told by a doctor that they had arthritis. Arthritis covers a variety of different joint conditions and can affect people of all ages.



adn.com

Anchorage Daily News

Print Page

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Risky teen behavior***State law compromises ability to assess how safe our kids are***

(06/03/08 23:28:47)

Everyone needs to know how safe Alaska teenagers are.

Fortunately, there's a way to find out.

An anonymous, scientific survey of young people sponsored by the federal Centers for Disease Control and Prevention shows trends in teens' behavior, from cigarette, alcohol and drug use to sex.

The Youth Risk Behavior Survey, just out for 2007, is a tested longtime report with controls for accuracy.

It tells adults how well they're addressing kids' problems within each state as well as nationally: Are anti-tobacco programs aimed at Alaska kids working? Are we sending an effective message about declining to ride with an impaired driver on prom night?

But trend information on Alaska kids is spotty because the state has erected unreasonable hurdles to getting students to participate.

In 2001 and 2003, because of those hurdles, Anchorage failed to get enough responses for a valid local version of the study. In 2005, the state didn't get enough responses back.

It's time to get rid of the obstacles.

It used to be that districts had to notify parents and give them a chance to opt out of the survey. Any student who wanted to could opt out on his own.

That worked well. State and local districts were able to survey randomly selected students and know that they represented a larger group.

In 1999, responding to parental complaints that the survey is too invasive and personal, the Legislature passed a law saying school districts must get written permission from parents in advance before a student may participate in even an anonymous survey that asks personal questions.

Alaska has to get at least 60 percent of the statewide students chosen in a random sample to participate before the survey results are usable -- before they can be deemed representative of all Alaska students.

Anchorage, to get valid local results, has to do the same.

Both the state and Anchorage achieved it this year, but only by spending tremendous effort and money. The state gave \$70,000 to districts to help them get the responses and still came up with

GUIDELINES FOR PASSIVE CONSENT

Based on recent change to state law,¹ CDE has determined that under certain circumstances LEAs conducting the California Healthy Kids Survey (CHKS) have the option of using passive parental consent, rather than active (written) consent as previously required.² Under passive-consent procedures, parents/guardians inform the school only if they *don't want* their child to participate in a study (opt out).³ To adopt passive consent, the following conditions must be met:

- The survey is limited to grades 7 through 12. Passive consent cannot be used below grade 7.⁴
- It is anonymous, confidential, and voluntary. Active consent must still be used if respondent data are linked to a respondent's name in any form or manner, such as in longitudinal tracked surveys.
- The school board formally adopts, in consultation with parents, a written passive consent policy for the administration of the CHKS (and any other survey or test) consistent with California Education Code sections 51513 and 51938(b) and the federal Protection of Pupil Rights Act (PPRA), 20 USC 1232h.
- Parents/guardians are notified in writing at the beginning of the school year about the survey and when it is to be administered, and given a reasonable opportunity to review the survey and to decline their child's participation (opt out).
- Parents/guardians are notified of any substantive changes in survey policies, dates, or content that occur after the initial notification.
- The parental notice contains all the required elements specified in the CHKS Guidebook for protection of human subjects and in the federal Protection of Pupil Rights Act.
- Questions are not added to the survey that elicit reports of parental attitudes or behaviors or any other category that requires active consent under Ed Code 51513 but not exempted under Ed Code 51938.

The following guidelines are designed to help you determine whether you should switch from written to passive consent and the steps you should take if you decide to make the change.

Benefits of Passive Consent

- Passive consent involves less cost and labor, particularly for the classroom teacher.
- If you have *not* been successful in meeting your target sample using written consent, passive consent will likely increase your response rates.
- Research also suggests that passive consent will result in a more representative sample, as many hard-to-reach subgroups, including groups at high-risk of substance use and other problem behaviors, are underrepresented in written consent surveys.⁵

¹ See Education Code 51938(b), which stipulates: "Notwithstanding Section 51513, anonymous, voluntary, and confidential research and evaluation tools to measure pupils' health behaviors and risks, including tests, questionnaires, and surveys containing age appropriate questions about the pupil's attitudes concerning or practices relating to sex may be administered to any pupil in grades 7 to 12, inclusive, if the parent or guardian is notified in writing that this test, questionnaire, or survey is to be administered and the pupil's parent or guardian is given the opportunity to review the test, questionnaire, or survey and to request in writing that his or her child not participate."

² Written consent requirements and strategies are detailed in the CHKS Guidebook, available online at www.wested.or.hks

³ As described in the CHKS Guidebook, under active-consent procedures parents must confirm in writing that they consent or not, usually by signing and returning a form. If a form is not returned, it must be assumed that parental permission is not granted.

⁴ Education Code 51938(b) authorizes passive consent only for grades 7 through 12 (see note 1)

Considerations for Changing from Active to Passive Consent

- **Written consent provides extra protection** against surveying a student whose parents did not receive notification or did not approve of participation but failed to inform the school. This extra protection may be important if risk behavior surveys are a sensitive issue in your community.
- If passive consent reduces the burden on the classroom teacher, **schools must take special precautions** to demonstrate that they made every reasonable effort possible to inform parents about the survey (and any subsequent changes) and to give them opportunities to opt out.
- If your sample changes (e.g., becomes more representative), it will **complicate interpretation of current trends**. Did student behavior change or the sample? Most research suggests reported AOD use will increase. WestEd will provide talking points to address this issue.
- **If you have been meeting your target response rates using written consent**, you might want to continue using it to avoid the issues listed above, especially if your district will still need to use written consent with 5th grade.

Recommendations for Passive Consent Implementation

Survey procedures must ensure that parents receive the consent materials, pay attention to them, and have sufficient time and opportunities to refuse participation. To assure PPRA compliance and reduce the risk of inadvertently surveying a child without parent permission, we recommend the following:

- **Stress that survey participation is voluntary in all communications.** This is a key requirement for the use of passive consent procedures in the PPRA. Notify students in writing and verbally (before survey administration) that they have the right to decline participation and to not answer any question that makes them uncomfortable. Make sure nothing is done that might cause a student to feel uncomfortable if he doesn't want to participate.
- **Send all consent information and forms via a method that guarantees receipt,** such as by mail. Preferably, use a method that documents receipt. For example, the information can be put into a parent handbook that the parent signs for.
- **Use multiple contact techniques.** Do everything possible to insure parents receive notification.
- **Make sure all materials are language appropriate** for parents with limited English reading ability.⁹
- **Make disapproval notification convenient.** Again, use multiple venues: a written form that can be turned into a teacher, a phone number to call, or email address. Each channel should reach a single person or office, identified in district policies, responsible for monitoring consent. This will help avoid parent refusals from slipping through the cracks.
- **Document** all your efforts to notify parents.

*For more information about consent procedures,
call your regional CHKS advisor at 888.841.7536.*

⁹ The application of active consent procedures to among no is voluntary surveys with rigorous data safeguards and minimal risks to students—such as the CHKS—has been criticized for jeopardizing access to essential information by imposing overly rigid, time-consuming consent procedures.

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Office for Research Protections

Home : Research Protections : Outreach & Publications : Publications : ORP
Newsletter : Issue 11 (04/2006 - 07/2006) : FAQs - Conducting In-School Surveys

FAQs - Conducting In-School Surveys Written by Tasha Snyder, Agricultural Sciences

The school setting is an optimal location to survey large numbers of students for research projects. Before planning a data collection study, however, it is important to be aware of federal guidelines and policies that contain regulations relevant for researchers conducting in-school studies of youth. These guidelines have implications for sampling, the informed consent process, and survey content.

Q: What federal regulations should I be aware of before planning an in-school study of youth?

A: The two key federal regulations you need to be familiar with are the Family Education Rights and Privacy Act (FERPA) and the Protection of Pupil Rights Amendment (PPRA). Both federal regulations apply to any institution receiving funds from the U.S. Department of Education.

FERPA

Initially signed into law in 1974, FERPA regulations are periodically updated, most recently under the No Child Left Behind Act of 2001. The main function of FERPA is to protect parent's rights regarding inspection and modification of their child's educational records. Under FERPA regulations parents have the right to inspect their child's educational records, request a correction to any errors in those records, and **parent's written permission must be sought before releasing their child's educational records**. Schools may release limited contact information for students (name, address, phone number, attendance record, date and place of birth, honors and awards) without written parental permission, but parents must be notified of these requests and given the opportunity to request that their child's information not be released.



PPRA

Part of the FERPA and No Child Left Behind legislation, PPRA is designed to protect parent's and pupil's rights regarding inspection of any materials - as part of the instructional curriculum or study instruments - to which students are exposed. Instructional and survey materials must be made available for parents to review, and **schools must obtain written parental consent before their minor students participate in any study that asks about the following:**

- political affiliations or beliefs of the student or student's parents;
- mental and psychological problems that are potentially embarrassing to the student and/or his or her family;
- sexual behaviors and attitudes;
- illegal, antisocial, self incriminating and demeaning behavior;
- critical appraisals of family members;
- legally protected relationships, such as those with lawyers, clergy and physicians;
- religious practices or beliefs of the student or student's parents; or
- income

acceptance rather than being synonymous with refusal. Thus, the active written parental consent process that is required by PPRA could result in an unnecessarily large non-response rate, preventing students from participating in studies.

Regarding sample bias, Esbensen et al. (1999) provide strong evidence that the characteristics of the students whose parents did not respond were different from those whose parents responded, thus introducing bias into their sample. Comparing the pre-test sample with the sample of responders to the active parental consent, including those who allowed their children to participate and those who did not, revealed that the sample of responders was more likely to be white, to come from intact homes (two married parents), and to have parents with more than a high school education. In addition, parents of "at-risk" youth (positive attitudes towards and engagement in delinquent behaviors) were less likely to return consent forms at all. This study documents a selection bias introduced by the active parental consent procedure, and recommends that a mailing be sent home to parents notifying them of the study, and that the parents be given 2-3 weeks to deny their child's participation in the study, after which time period the consent is implied.

More recently, similar findings were reported when Henry et al. (2002) conducted an in-school study of 7th grade students in nine school districts in rural Pennsylvania. Active written parental consent was required for all students participating in their study, however, the project was able to access secondary data on several student characteristics for all eligible students--including GPA and absence from school--which allowed them to determine whether and how their sample was biased on these important characteristics. This study further made comparisons between the consent, non-consent, and non-response groups and determined not only if bias was introduced into their sample, but whether it originated from the non-consent group, the non-response group, or both. Findings revealed that the students whose parents declined their consent did not differ significantly from those whose parents provided consent, but that the students with non-responding parents did differ significantly from those who consented on two key educational variables. The students whose parents provided consent had fewer days of school absence and higher grade point averages compared to the students with non-responding parents. Thus, comparisons of the three groups (consenters, decliners, and non responders) find that the students eliminated from the study because of the lack of permission due to non-responders is the source of sample bias, not the presence of decliners. The result is that the Henry et al. (2002) sample represents students who are less "at-risk" for poor outcomes, thus introducing sample bias.

Both of these studies employed the numerous strategies suggested to increase return rates for active written parental consent. **These strategies include designing effective informational and consent forms, working with key school personnel, multiple mailings to parents, providing rewards for classrooms that have high return rates (such as pizza or ice cream parties), and following up with non-responders** (Esbensen et al., 1999; Fletcher and Hunter, 2003; Henry et al., 2002). Even though these strategies were implemented, both studies report biased samples due to the high degree of non-response associated with written active parental consent procedures.

Q: Yikes! So, what's a child and youth researcher planning to use in-school data collection to do?

A: Well, there really isn't much you can do to completely avoid sampling bias with in-school youth surveys of sensitive topics where active written parental consent is required. The FERPA and PPRA regulations were developed and instituted with the goal of protecting the rights and privacy of parents and students, not to promote easier access to students for research purposes.

Following the suggestions outlined above will help reduce bias in your study. Also keep in mind that sampling bias is an issue for most primary data collection studies.

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Planned Parenthood of the Great Northwest

March 9, 2009

The Honorable Peggy Wilson
Alaska State House Representative
State Capitol, Rm 403
Juneau, AK 99801-1182

Dear Representative Wilson:

On behalf of Planned Parenthood of the Great Northwest (PPGNW), I'm writing in support of House Bill 130, "*An Act relating to questionnaires and surveys administered in the public schools.*"

Planned Parenthood relies on the results of the school-based Alaska Youth Behavior Risk Survey to determine where our efforts should be in terms of education and STI prevention programs. For accurate survey results it's critical to get as many survey responses as possible. Planned Parenthood recognizes that the current regulations of active parental consent for anonymous surveys decrease the response rate significantly.

House Bill 130 will increase the accuracy of the vital information Planned Parenthood and many other organizations rely on to serve Alaska's young people. Thank you for addressing this issue.

Sincerely,

Clover Simon
Vice President of Alaska
Planned Parenthood of the Great Northwest
(907) 770-9705
clover.simon@ppgnw.org

Planned Parenthood of the Great Northwest
Alaska Administrative Office - 4001 Lake Otis Pkwy
Anchorage, AK 99508



Municipality of Anchorage

P.O. Box 196650 • Anchorage, Alaska 99519-6650 • 825 "L" Street • <http://www.muni.org>



Mayor Matt Claman

Health and Human Services Commission

Peggy Wilson, Representative
State Capitol, Room 408
Juneau, AK 99801-1182

March 11, 2009

Dear Representative Wilson,

I am writing to you as chair of the Municipality of Anchorage Health and Human Services Commission on behalf of our 15 members and the many health organizations we represent. We would like to thank you for all of your hard work and dedication to the state.

As the Health and Human Services Commission, our primary mission is to ensure the health and well-being of the Anchorage community. We rely on current information regarding the health and social status of the Anchorage community to determine our priorities and drive action. Critical to our mission is reliable community data including data about the health and well being of our City's youth.

The Municipality of Anchorage Health and Human Services Commission supports HB 130 "An Act relating to questionnaires and surveys administered in the public schools" to encourage greater participation in school-based surveys. Routine standardized surveys such as the national and state Youth Risk Behavior Survey track trends over time and help guide and evaluate important health and prevention programs. The overall statewide response rate to Youth Risk Behavioral Survey (YRBS) in 2005 was 55 percent, which did not meet the required response rate of 60 percent to make it a valid survey. The State was unable to use the data or publish the report since the data would not be representative of the high school population. Anchorage students are a critical sample for the success of YRBS because of they represent approximately 40% of all high school students in the state. The information gathered through school-based surveys is used to inform programs and initiatives about youth behavior that help drive prioritization of efforts to improve community health. An increase in survey participation improves the reliability and validity of survey responses significantly, which provides organizations like Municipality Department of Health and Human Services with critical, current information regarding the health and social status of youth in our community.

Again, thank you for your commitment to our state and its youth. I would appreciate the opportunity to talk with you on this matter at your convenience.

Sincerely,

Brian Saylor PhD MPH, Chair
Anchorage Health and Human Services Commission

Cc. Mayor Matt Claman
Diane Ingle, Director DHHS

Community, Security, Prosperity

Youth Risk Behavior Survey Background

The Youth Risk Behavior Survey

The Youth Risk Behavior Survey (YRBS) is part of an epidemiological surveillance system that was established in 1988 by the Centers for Disease Control and Prevention (CDC). Its purpose is to help monitor the prevalence of behaviors that put young people at risk for the most significant health and social problems that can occur during adolescence and adulthood. It is an anonymous school-based survey of high school students and it is administered on the national and state level every other year. The survey examines six categories of adolescent behavior:

- behaviors that result in unintentional and intentional injuries;
- tobacco use;
- alcohol and other drug use;
- sexual behaviors that can result in HIV infection, other sexually transmitted diseases (STD's) and unintended pregnancies;
- dietary behaviors; and
- physical activity.

Value of the YRBS

The YRBS is the largest and most respected source of data of its kind in the US. Survey results have tremendous value at the national, state, and local level such as measuring progress towards the national Healthy People 2010 and the state Healthy Alaskans 2010 health objectives. Results allow health and educational professionals to track the prevalence of youth risk behaviors over time, to compare their state to other states or to the nation, and when conducted on the local level it allows local communities to measure themselves compared to the rest of the state.

Understanding the health risk behaviors of youth is critical for developing programs that address risk behaviors practiced in their jurisdiction and for measuring progress toward program goals.

YRBS in Alaska

Alaska's YRBS is a joint project between the Dept. of Education & Early Development and the Dept. of Health and Social Services. Alaska first participated in the YRBS in 1995 and has attempted to conduct the survey most every other year since then, with varying degrees of success. Alaska has produced statewide reports in 1995, 1999 (without Anchorage), and in 2003.

Typically 42 schools (approximately 20 districts) in Alaska are scientifically selected from among the high schools in Alaska to participate in the statewide survey. With their cooperation, classrooms from within each school are randomly selected to participate in the survey which generally results in just over 2,000 high school students being eligible to participate. In addition, school districts are given the option to conduct a survey of their entire district in order to gain a better understanding and measure of risk behaviors in their communities. Up to 20 districts each survey year opt to take advantage of this opportunity with the service provided free of charge by the state. In total the YRBS program distributes approximately 12-13,000 surveys for this purpose. Strict precautions are in place to absolutely ensure student confidentiality and participation in the survey is completely voluntary. Students answer the multiple choice questions about their current and past risk behaviors, which are collected and sent to the state for processing. State results are then shared federally with CDC.

Response Rates

In order to ensure that the YRBS data are representative of high schools in Alaska, the majority of surveys need to be completed. Alaska sets a minimum overall response rate of 60% to be able to confidently report the results. The overall response rate is calculated by multiplying the rate of participation of schools with the student response rate. The higher the response rate the more accurate the results. In general, participation rates in Alaska have improved (more schools selected are cooperative) but the student response rate has declined and jeopardized the survey. In 1995, 82% of schools participated and 78% of students in those schools completed the survey resulting in an overall response rate of 64%. In 2005, 93% of the schools participated and 59% of students completed the survey resulting in a 55% overall response rate which was not adequate.

Barriers to Success

A major barrier to success has been the active parental consent law which went into effect at the end of 1999. Alaska's active parental consent law, AS 14.03.110, prohibits schools from administering surveys or questionnaires at public schools that inquire into personal or family affairs, or anything else that is not a matter of public record or readily observable in public (regardless of whether or not the surveys are anonymous and voluntary) without first getting written permission from all participating students' parents or legal guardians. Alaska is one of only two or three states in the nation that has a school survey law requiring active parental consent for surveys of this type. Most states employ passive parental consent when administering such surveys. Passive parental consent involves notifying and informing the parents about the survey and assuming that students will participate unless the parent provides a written refusal to opt out of the survey.

Advantages to active parental consent are greater parental involvement and less risk of students being included in surveys without parental approval. Disadvantages of active parental consent include the drastically increased costs and labor involved in conducting student surveys, the high failure rates for getting enough student responses to get usable data for larger surveys, and the potential for leading to inaccurate/misrepresentative data. Research and our experience suggests that the vast majority of parents consent to their students participating in such surveys and that most parental failures to provide written permission are driven by apathy, oversight, or student error, not by refusal.

Costs

In recent years (since the enactment of active parental consent) more and more resources (time and money) have been spent on YRBS. Since the process of active parental consent places more of a burden on the school administrators and staff, the EED has offered financial incentives to participating schools since 2003 and costs have more doubled. This money has helped schools implement the survey but has not guaranteed its success as far as student response rates. This does not include the basic expense of operating the YRBS, such as the costs for supplies, copying, shipping and staff time.

Support for YRBS in Alaska

The YRBS in Alaska is endorsed by:

- Association of Alaska School Boards
- Alaska Action for Healthy Kids
- All Alaska Pediatric Partnership
- American Heart Association, Pacific/Mountain Affiliate
- American Lung Association of Alaska
- American Cancer Society, Alaska
- Alaska Health Education Consortium
- Alaska Tobacco Control Alliance
- Alaska Native Tribal Health Consortium

For more information on YRBS[®] system visit <http://www.cdc.gov/healthyyouth/yrbs/index.htm> or <http://www.hss.state.ak.us/dph/chronic/school/YRBS.htm> or contact Patty Owen, YRBS Coordinator, DHSS, Division of Public Health, 465-2768 or Patty_Owen@health.state.ak.us

Rebecca Rooney

From: Comeau_Carol [Comeau_Carol@asdk12.org]
Sent: Thursday, April 09, 2009 5:42 PM
To: Friedman_Jeff; Rep. Paul Seaton; Rep. Cathy Munoz; Rep. Bryce Edgmon; Rep. Wes Keller; Rep. Peggy Wilson; Rep. Bob Buch; Rep. Berta Gardner
Cc: Siegfried_Robin
Subject: RE: HB 130 & HB 215

I apologize for taking the easy way out on these bills, but I agree with School Board President Friedman on these issues. I would hope that some discussions during the interim would involve some serious looking at all aspects of a second count, or alternately, a separate fund like a grant for extra enrollment.

Thanks very much,
Carol

Carol Comeau, Superintendent
Anchorage School District
5530 E. Northern Lights Blvd.
Anchorage, AK 99504
Phone: 907-742-4312 Fax: 907-742-4318
comeau_carol@asdk12.org

"There can be no keener revelation of a society's soul than the way in which it treats its children."

Nelson Mandela

-----Original Message-----

From: Friedman_Jeff
Sent: Thursday, April 09, 2009 5:03 PM
To: Representative_paul_seaton@legis.state.ak.us;
Representative_cathy_munoz@legis.state.ak.us;
representative_bryce_edgmon@legis.state.ak.us;
Representative_wes_keller@legis.state.ak.us;
representative_peggy_wilson@legis.state.ak.us;
Representative_robert_buch@legis.state.ak.us;
Representative_berta_gardner@legis.state.ak.us
Cc: Comeau_Carol; Siegfried_Robin
Subject: HB 130 & HB 215

Dear Chair Seaton and Committee Members:

These two bills will be heard by the House Education Committee on Friday.

The Anchorage School Board is in favor of HB 130. We believe we need the flexibility to administer anonymous surveys without going to the expense of attempting to get parental permission from enough parents so the data collected is valid. It isn't that parents tend to object, it's just that the permission form sometimes gets lost along the way. We would still be required to notify parents so they had an opportunity to refuse permission. Parents who do object to these surveys tend to be well informed and get their objections in. The data from these surveys, when valid, helps us address serious social problems such as teen pregnancy and illegal drug use.

HB 215 is fairly new, and the Anchorage School Board has not had time to take a position on this bill. Our administration has noted some potential concerns. First, count periods cost money and time. Conducting a second count will divert resources from the classroom to various administrative functions in our Records, IT, Accounting, and other departments.

Second, there may not be sufficient time between submitting the second count on March 15 for DEED to do its OASIS verification before making its April 15 payment to districts.

This could result in double payments to districts for the same child.

A second count period certainly has some advantages. However, it must be remembered that most schools issue contracts to staff through the end of a school year. If we hire an aide in August to assist a special education student, we can not terminate that aide simply because the special education student moved to Palmer in February. On the other hand, the Mat-Su district can't get additional funding to hire an aide of its own when that student moves without a second count period. That is why ASD previously suggested a small discretionary fund within DEED that districts could apply for when students moved during the year. That might be a more equitable way to handle the movement of some of these more expensive children during the school year.

HB 215 is complex, and may have many consequences, both intended and unintended. I hope the committee takes time to analyze this bill thoroughly and gives districts time to weigh in on this over the interim before the bill moves on.

Jeff Friedman
Anchorage School Board
1534 D Street
Anchorage, AK 99501
907-742-4699 (Home)

These risk behaviors among high school students' ...

Unintentional Injuries and Violence

- 7% Rarely or never wore a seat belt
- 24% Rode with a driver who had been drinking alcohol, during the past month
- 24% Carried a weapon during the past month
- 29% Were in a physical fight during the past year
- 11% Attempted suicide during the past year

Alcohol and Other Drug Use

- 40% Drank alcohol during the past month
- 26% Reported episodic heavy drinking during the past month²
- 21% Used marijuana during the past month
- 8% Ever used cocaine
- 14% Ever used inhalants

Sexual Behaviors

- 45% Ever had sexual intercourse
- 13% Had sexual intercourse with ≥ 4 people
- 31% Had sexual intercourse during the past three months
- 39% Did not use a condom during last sexual intercourse³

Tobacco Use

- 53% Ever tried cigarette smoking
- 18% Smoked cigarettes during the past month
- 7% Smoked cigarettes on ≥ 20 days during the past month
- 10% Used smokeless tobacco during the past month
- 10% Smoked cigars during the past month

Dietary Behaviors

- 84% Ate fruits and vegetables < 5 times/day during the past 7 days
- 22% Drank soda or pop one or more times a day during the past 7 days (not including diet soda or pop)

Physical Activity

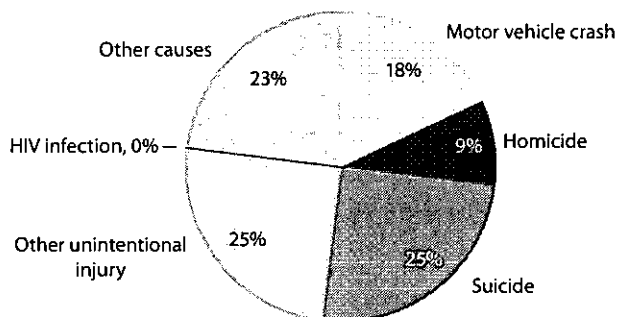
- 58% Did not meet currently recommended levels of physical activity⁴
- 53% Did not attend physical education class
- 82% Did not attend physical education class daily

Overweight

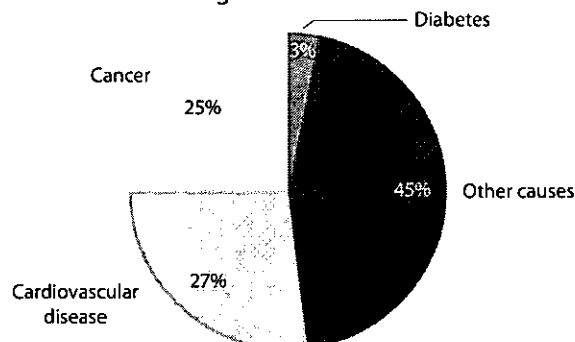
- 16% Were overweight⁵
- 11% Were obese⁶

... contribute to these leading causes of death⁷

Youth Aged 10-24 Years



Adults Aged 25 Years and Older



¹ High school students grades 9-12 in Alaska excluding alternative schools and boarding schools, weighted data.

² Students who had five or more drinks of alcohol in a row within a couple of hours on at least 1 day during the past 30 days

³ Among students who had sexual intercourse during the past 3 months.

⁴ Students who were not physically active for a total of at least 60 minutes per day on 5 or more days of the past 7 days.

⁵ Students who were at or above the 85th percentile but below the 95th percentile for body mass index by age and sex.

⁶ Students who were at or above the 95th percentile for body mass index by age and sex.

⁷ 2003-2005 Alaska mortality data, Centers for Disease Control and Prevention.

For more information visit www.hss.state.ak.us/dph/chronic

Or call 1-888-465-3140

The Alaska Youth Risk Behavior Survey is a joint project between the Department of Health and Social Services and the Department of Education & Early Development in cooperation with the Centers for Disease Control and Prevention



2009 Alaska Youth Risk Behavior Survey

This survey is about health behavior. It has been developed so you can tell us what you do that may affect your health. The information you give will be used to develop better health education for young people like yourself.

DO NOT write your name on this survey. The answers you give will be kept private. No one will know what you write. Answer the questions based on what you really do.

Completing the survey is voluntary. Whether or not you answer the questions will not affect your grade in this class. If you are not comfortable answering a question, just leave it blank.

The questions that ask about your background will be used only to describe the types of students completing this survey. The information will not be used to find out your name. No names will ever be reported.

Make sure to read every question. Fill in the ovals completely. When you are finished, follow the instructions of the person giving you the survey.

Thank you very much for your help.

Directions

- Use a #2 pencil only.
- Make dark marks.
- Fill in a response like this: A B ● D.
- If you change your answer, erase your old answer completely.

1. How old are you?
 - A. 12 years old or younger
 - B. 13 years old
 - C. 14 years old
 - D. 15 years old
 - E. 16 years old
 - F. 17 years old
 - G. 18 years old
 - H. 19 years old or older

2. What is your sex?
 - A. Female
 - B. Male

3. In what grade are you?
 - A. 9th grade
 - B. 10th grade
 - C. 11th grade
 - D. 12th grade
 - E. Ungraded or other grade

4. Are you Hispanic or Latino?
 - A. Yes
 - B. No

5. What is your race? (Select one or more responses.)
 - A. American Indian or Alaska Native
 - B. Asian
 - C. Black or African American
 - D. Native Hawaiian or Other Pacific Islander
 - E. White

6. How tall are you without your shoes on?
 Directions: Write your height in the shaded blank boxes. Fill in the matching oval below each number.

Example

Height	
Feet	Inches
5	7
Ⓐ	Ⓐ
Ⓑ	Ⓑ
●	Ⓒ
Ⓓ	Ⓓ
Ⓔ	Ⓔ
	Ⓕ
	Ⓖ
	●
	Ⓖ
	Ⓙ
	Ⓚ
	Ⓛ

7. How much do you weigh without your shoes on?
 Directions: Write your weight in the shaded blank boxes. Fill in the matching oval below each number.

Example

Weight Pounds		
1	5	2
Ⓐ	Ⓐ	Ⓐ
●	Ⓑ	Ⓑ
Ⓒ	Ⓒ	●
Ⓓ	Ⓓ	Ⓓ
	Ⓔ	Ⓔ
	●	Ⓕ
	Ⓖ	Ⓖ
	Ⓒ	Ⓒ
	Ⓓ	Ⓓ
	Ⓚ	Ⓚ

8. During the past 12 months, how would you describe your grades in school?
- A. Mostly A's
 - B. Mostly B's
 - C. Mostly C's
 - D. Mostly D's
 - E. Mostly F's
 - F. None of these grades
 - G. Not sure

E. 6 or more times

The next 4 questions ask about safety.

9. **When you rode a bicycle during the past 12 months, how often did you wear a helmet?**
- A. I did not ride a bicycle during the past 12 months
 - B. Never wore a helmet
 - C. Rarely wore a helmet
 - D. Sometimes wore a helmet
 - E. Most of the time wore a helmet
 - F. Always wore a helmet
10. How often do you wear a seat belt when **riding** in a car driven by someone else?
- A. Never
 - B. Rarely
 - C. Sometimes
 - D. Most of the time
 - E. Always
11. During the past 30 days, how many times did you **ride** in a car or other vehicle **driven by someone who had been drinking alcohol?**
- A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or more times
12. During the past 30 days, how many times did you **drive** a car or other vehicle **when you had been drinking alcohol?**
- A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times

The next 10 questions ask about violence-related behaviors.

13. During the past 30 days, on how many days did you carry a **weapon** such as a gun, knife, or club?
- A. 0 days
 - B. 1 day
 - C. 2 or 3 days
 - D. 4 or 5 days
 - E. 6 or more days
14. During the past 30 days, on how many days did you carry a **gun**?
- A. 0 days
 - B. 1 day
 - C. 2 or 3 days
 - D. 4 or 5 days
 - E. 6 or more days
15. During the past 30 days, on how many days did you carry a weapon such as a gun, knife, or club **on school property**?
- A. 0 days
 - B. 1 day
 - C. 2 or 3 days
 - D. 4 or 5 days
 - E. 6 or more days
16. During the past 30 days, on how many days did you **not** go to school because you felt you would be unsafe at school or on your way to or from school?
- A. 0 days
 - B. 1 day
 - C. 2 or 3 days
 - D. 4 or 5 days
 - E. 6 or more days
17. During the past 12 months, how many times has someone threatened or injured you with a weapon such as a gun, knife, or club **on school property**?
- A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or 7 times
 - F. 8 or 9 times

- G. 10 or 11 times
- H. 12 or more times

18. During the past 12 months, how many times were you in a physical fight?
- A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or 7 times
 - F. 8 or 9 times
 - G. 10 or 11 times
 - H. 12 or more times
19. During the past 12 months, how many times were you in a physical fight in which you were injured and had to be treated by a doctor or nurse?
- A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or more times
20. During the past 12 months, how many times were you in a physical fight on school property?
- A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or 7 times
 - F. 8 or 9 times
 - G. 10 or 11 times
 - H. 12 or more times
21. During the past 12 months, did your boyfriend or girlfriend ever hit, slap, or physically hurt you on purpose?
- A. Yes
 - B. No
22. Have you ever been physically forced to have sexual intercourse when you did not want to?
- A. Yes
 - B. No

The next question asks about bullying. Bullying is when 1 or more students tease, threaten, spread rumors about, hit, shove, or hurt another student over and over again. It is not bullying when 2 students of about the same strength or power argue or fight or tease each other in a friendly way.

23. During the past 12 months, have you ever been bullied on school property?
- A. Yes
 - B. No

The next 5 questions ask about sad feelings and attempted suicide. Sometimes people feel so depressed about the future that they may consider attempting suicide, that is, taking some action to end their own life.

24. During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?
- A. Yes
 - B. No
25. During the past 12 months, did you ever seriously consider attempting suicide?
- A. Yes
 - B. No
26. During the past 12 months, did you make a plan about how you would attempt suicide?
- A. Yes
 - B. No
27. During the past 12 months, how many times did you actually attempt suicide?
- A. 0 times
 - B. 1 time
 - C. 2 or 3 times
 - D. 4 or 5 times
 - E. 6 or more times

28. **If you attempted suicide** during the past 12 months, did any attempt result in an injury, poisoning, or overdose that had to be treated by a doctor or nurse?
- A. **I did not attempt suicide** during the past 12 months
 - B. Yes
 - C. No

The next 13 questions ask about tobacco use.

29. Have you ever tried cigarette smoking, even one or two puffs?
- A. Yes
 - B. No
30. How old were you when you smoked a whole cigarette for the first time?
- A. I have never smoked a whole cigarette
 - B. 8 years old or younger
 - C. 9 or 10 years old
 - D. 11 or 12 years old
 - E. 13 or 14 years old
 - F. 15 or 16 years old
 - G. 17 years old or older
31. During the past 30 days, on how many days did you smoke cigarettes?
- A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 to 19 days
 - F. 20 to 29 days
 - G. All 30 days
32. During the past 30 days, on the days you smoked, how many cigarettes did you smoke **per day**?
- A. I did not smoke cigarettes during the past 30 days
 - B. Less than 1 cigarette per day
 - C. 1 cigarette per day
 - D. 2 to 5 cigarettes per day
 - E. 6 to 10 cigarettes per day
 - F. 11 to 20 cigarettes per day
 - G. More than 20 cigarettes per day

33. During the past 30 days, how did you **usually** get your own cigarettes? (Select only **one** response.)
- A. I did not smoke cigarettes during the past 30 days
 - B. I bought them in a store such as a convenience store, supermarket, discount store, or gas station
 - C. I bought them from a vending machine
 - D. I gave someone else money to buy them for me
 - E. I borrowed (or bummed) them from someone else
 - F. A person 18 years old or older gave them to me
 - G. I took them from a store or family member
 - H. I got them some other way
34. During the past 30 days, on how many days did you smoke cigarettes **on school property**?
- A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 to 19 days
 - F. 20 to 29 days
 - G. All 30 days
35. Have you ever smoked cigarettes daily, that is, at least one cigarette every day for 30 days?
- A. Yes
 - B. No
36. During the past 12 months, did you ever try **to quit** smoking cigarettes?
- A. I did not smoke during the past 12 months
 - B. Yes
 - C. No
37. During the past 30 days, on how many days did you use **chewing tobacco, snuff, or dip**, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen?
- A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 to 19 days
 - F. 20 to 29 days
 - G. All 30 days
38. During the past 30 days, on how many days did you use **chewing tobacco, snuff, or dip on school property**?
- A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 to 19 days
 - F. 20 to 29 days
 - G. All 30 days
39. During the past 30 days, on how many days did you smoke **cigars, cigarillos, or little cigars**?
- A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 to 19 days
 - F. 20 to 29 days
 - G. All 30 days
40. During the past 7 days, on how many days were you in the same room with someone who was smoking cigarettes?
- A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 days
 - G. 6 days
 - H. 7 days

41. How much do you think people risk harming themselves (physically or in other ways), if they smoke one or more packs of cigarettes per day?
- A. No risk
 - B. Slight risk
 - C. Moderate risk
 - D. Great risk

The next 7 questions ask about drinking alcohol. This includes drinking beer, wine, wine coolers, and liquor such as rum, gin, vodka, or whiskey. For these questions, drinking alcohol does not include drinking a few sips of wine for religious purposes.

42. During your life, on how many days have you had at least one drink of alcohol?
- A. 0 days
 - B. 1 or 2 days
 - C. 3 to 9 days
 - D. 10 to 19 days
 - E. 20 to 39 days
 - F. 40 to 99 days
 - G. 100 or more days
43. How old were you when you had your first drink of alcohol other than a few sips?
- A. I have never had a drink of alcohol other than a few sips
 - B. 8 years old or younger
 - C. 9 or 10 years old
 - D. 11 or 12 years old
 - E. 13 or 14 years old
 - F. 15 or 16 years old
 - G. 17 years old or older
44. During the past 30 days, on how many days did you have at least one drink of alcohol?
- A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 to 19 days
 - F. 20 to 29 days
 - G. All 30 days

45. During the past 30 days, on how many days did you have 5 or more drinks of alcohol in a row, that is, within a couple of hours?
- A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 to 5 days
 - E. 6 to 9 days
 - F. 10 to 19 days
 - G. 20 or more days

46. During the past 30 days, how did you **usually** get the alcohol you drank?
- A. I did not drink alcohol during the past 30 days
 - B. I bought it in a store such as a liquor store, convenience store, supermarket, discount store, or gas station
 - C. I bought it at a restaurant, bar, or club
 - D. I bought it at a public event such as a concert or sporting event
 - E. I gave someone else money to buy it for me
 - F. Someone gave it to me
 - G. I took it from a store or family member
 - H. I got it some other way

47. During the past 30 days, on how many days did you have at least one drink of alcohol **on school property**?
- A. 0 days
 - B. 1 or 2 days
 - C. 3 to 5 days
 - D. 6 to 9 days
 - E. 10 to 19 days
 - F. 20 to 29 days
 - G. All 30 days

48. How much do you think people risk harming themselves (physically or in other ways), if they have one or two drinks of an alcoholic beverage (beer, wine, or liquor) nearly every day?
- A. No risk

- B. Slight risk
- C. Moderate risk
- D. Great risk

The next 5 questions ask about marijuana use. Marijuana also is called grass or pot.

- 49. During your life, how many times have you used marijuana?
 - A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 to 99 times
 - G. 100 or more times

- 50. How old were you when you tried marijuana for the first time?
 - A. I have never tried marijuana
 - B. 8 years old or younger
 - C. 9 or 10 years old
 - D. 11 or 12 years old
 - E. 13 or 14 years old
 - F. 15 or 16 years old
 - G. 17 years old or older

- 51. During the past 30 days, how many times did you use marijuana?
 - A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times

- 52. During the past 30 days, how many times did you use marijuana on school property?
 - A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times

- 53. How much do you think people risk harming themselves (physically or in other ways), if they smoke marijuana regularly?
 - A. No risk
 - B. Slight risk
 - C. Moderate risk
 - D. Great risk

The next 9 questions ask about other drugs.

54. During your life, how many times have you used **any** form of cocaine, including powder, crack, or freebase?
- A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times
55. During the past 30 days, how many times did you use **any** form of cocaine, including powder, crack, or freebase?
- A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times
56. During your life, how many times have you sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high?
- A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times
57. During your life, how many times have you used **heroin** (also called smack, junk, or China White)?
- A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times

58. During your life, how many times have you used **methamphetamines** (also called speed, crystal, crank, or ice)?
- A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times
59. During your life, how many times have you used **ecstasy** (also called MDMA)?
- A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times
60. During your life, how many times have you used a needle to inject any **illegal** drug into your body?
- A. 0 times
 - B. 1 time
 - C. 2 or more times
61. During your life, how many times have you taken a **prescription drug** (such as OxyContin, Percocet, Vicodin, Adderall, Ritalin, or Xanax) without a doctor's prescription?
- A. 0 times
 - B. 1 or 2 times
 - C. 3 to 9 times
 - D. 10 to 19 times
 - E. 20 to 39 times
 - F. 40 or more times
62. During the past 12 months, has anyone offered, sold, or given you an illegal drug **on school property**?
- A. Yes
 - B. No

The next 7 questions ask about sexual behavior.

63. Have you ever had sexual intercourse?

- A. Yes
- B. No

- 64. How old were you when you had sexual intercourse for the first time?
 - A. I have never had sexual intercourse
 - B. 11 years old or younger
 - C. 12 years old
 - D. 13 years old
 - E. 14 years old
 - F. 15 years old
 - G. 16 years old
 - H. 17 years old or older

- 65. During your life, with how many people have you had sexual intercourse?
 - A. I have never had sexual intercourse
 - B. 1 person
 - C. 2 people
 - D. 3 people
 - E. 4 people
 - F. 5 people
 - G. 6 or more people

- 66. During the past 3 months, with how many people did you have sexual intercourse?
 - A. I have never had sexual intercourse
 - B. I have had sexual intercourse, but not during the past 3 months
 - C. 1 person
 - D. 2 people
 - E. 3 people
 - F. 4 people
 - G. 5 people
 - H. 6 or more people

- 67. Did you drink alcohol or use drugs before you had sexual intercourse the **last time**?
 - A. I have never had sexual intercourse
 - B. Yes
 - C. No

- 68. The **last time** you had sexual intercourse, did you or your partner use a condom?

- A. I have never had sexual intercourse
- B. Yes
- C. No

69. The **last time** you had sexual intercourse, what **one** method did you or your partner use to **prevent pregnancy**? (Select only **one** response.)
- A. I have never had sexual intercourse
 - B. No method was used to prevent pregnancy
 - C. Birth control pills
 - D. Condoms
 - E. Depo-Provera (injectable birth control)
 - F. Withdrawal
 - G. Some other method
 - H. Not sure

The next 4 questions ask about body weight.

70. How do **you** describe your weight?
- A. Very underweight
 - B. Slightly underweight
 - C. About the right weight
 - D. Slightly overweight
 - E. Very overweight
71. Which of the following are you trying to do about your weight?
- A. **Lose** weight
 - B. **Gain** weight
 - C. **Stay** the same weight
 - D. I am **not trying to do anything** about my weight
72. During the past 30 days, did you **exercise** to lose weight or to keep from gaining weight?
- A. Yes
 - B. No
73. During the past 30 days, did you **eat less food, fewer calories, or foods low in fat** to lose weight or to keep from gaining weight?
- A. Yes
 - B. No

The next 9 questions ask about food you ate or drank during the past 7 days. Think about all the meals and snacks you had from the time you got up until you went to bed. Be sure to include food you ate at home, at school, at restaurants, or anywhere else.

74. During the past 7 days, how many times did you drink **100% fruit juices** such as orange juice, apple juice, or grape juice? (Do **not** count punch, Kool-Aid, sports drinks, or other fruit-flavored drinks.)
- A. I did not drink 100% fruit juice during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
75. During the past 7 days, how many times did you eat **fruit**? (Do **not** count fruit juice.)
- A. I did not eat fruit during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
76. During the past 7 days, how many times did you eat **green salad**?
- A. I did not eat green salad during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
77. During the past 7 days, how many times did you eat **potatoes**? (Do **not** count french fries, fried potatoes, or potato chips.)
- A. I did not eat potatoes during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
78. During the past 7 days, how many times did you eat **carrots**?
- A. I did not eat carrots during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
79. During the past 7 days, how many times did you eat **other vegetables**? (Do **not** count green salad, potatoes, or carrots.)
- A. I did not eat other vegetables during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day

80. During the past 7 days, how many times did you drink a **can, bottle, or glass of soda or pop**, such as Coke, Pepsi, or Sprite? (Do not include diet soda or diet pop.)
- A. I did not drink soda or pop during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
81. During the past 7 days, how many times did you drink a **can, bottle, or glass of a sugar sweetened drink**, such as sports drinks, sweetened energy drinks, Snapple, fruit punch, Kool-Aid, Tang, or Capri-Sun? (Do not include soda or pop, diet drinks, or 100% fruit juice.)
- A. I did not drink sugar sweetened drinks during the past 7 days
 - B. 1 to 3 times during the past 7 days
 - C. 4 to 6 times during the past 7 days
 - D. 1 time per day
 - E. 2 times per day
 - F. 3 times per day
 - G. 4 or more times per day
82. During the past 7 days, how many **glasses of milk** did you drink? (Include the milk you drank in a glass or cup, from a carton, or with cereal. Count the half pint of milk served at school as equal to one glass.)
- A. I did not drink milk during the past 7 days
 - B. 1 to 3 glasses during the past 7 days
 - C. 4 to 6 glasses during the past 7 days
 - D. 1 glass per day
 - E. 2 glasses per day
 - F. 3 glasses per day

The next 6 questions ask about physical activity.

83. During the past 7 days, on how many days were you physically active for a total of **at least 60 minutes per day**? (Add up all the time you spent in any kind of physical activity that increased your heart rate and made you breathe hard some of the time.)
- A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 days
 - G. 6 days
 - H. 7 days
84. On an average school day, how many hours do you watch TV?
- A. I do not watch TV on an average school day
 - B. Less than 1 hour per day
 - C. 1 hour per day
 - D. 2 hours per day
 - E. 3 hours per day
 - F. 4 hours per day
 - G. 5 or more hours per day
85. On an average school day, how many hours do you play video or computer games or use a computer for something that is not school work? (Include activities such as Nintendo, Game Boy, PlayStation, Xbox, computer games, and the Internet.)
- A. I do not play video or computer games or use a computer for something that is not school work
 - B. Less than 1 hour per day
 - C. 1 hour per day
 - D. 2 hours per day
 - E. 3 hours per day
 - F. 4 hours per day
 - G. 5 or more hours per day

86. In an average week when you are in school, on how many days do you go to physical education (PE) classes?
- A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 days
87. During an average physical education (PE) class, how many minutes do you spend actually exercising or playing sports?
- A. I do not take PE
 - B. Less than 10 minutes
 - C. 10 to 20 minutes
 - D. 21 to 30 minutes
 - E. 31 to 40 minutes
 - F. 41 to 50 minutes
 - G. 51 to 60 minutes
 - H. More than 60 minutes
88. During the past 12 months, on how many sports teams did you play? (Include any teams run by your school or community groups.)
- A. 0 teams
 - B. 1 team
 - C. 2 teams
 - D. 3 or more teams

The next 3 questions ask about other health-related topics.

89. Have you ever been taught about AIDS or HIV infection in school?
- A. Yes
 - B. No
 - C. Not sure
90. Has a doctor or nurse ever told you that you have asthma?
- A. Yes
 - B. No
 - C. Not sure
91. Do you still have asthma?

- A. I have never had asthma
- B. Yes
- C. No
- D. Not sure

The next 8 questions ask about other health topics.

- 92. How often does one of your parents talk with you about what you are doing in school?
 - A. Never
 - B. Less than once a month
 - C. About once or twice a month
 - D. About once or twice a week
 - E. About every day

- 93. Do you agree or disagree that your teachers really care about you and give you a lot of encouragement?
 - A. Strongly agree
 - B. Agree
 - C. Not sure
 - D. Disagree
 - E. Strongly disagree

- 94. Besides your parents, how many adults would you feel comfortable seeking help from if you had an important question affecting your life?
 - A. 0 adults
 - B. 1 adult
 - C. 2 adults
 - D. 3 adults
 - E. 4 adults
 - F. 5 or more adults

- 95. During an average week, how many hours do you spend helping or volunteering at school or in the community (such as helping elders or neighbors; watching young children; teaching or tutoring; peer helping; mentoring; or helping out at local programs, health clinics, faith organizations, tribal organizations, or environmental organizations)?
 - A. 0 hours
 - B. 1 hour
 - C. 2 hours
 - D. 3 to 5 hours
 - E. 6 to 10 hours
 - F. 11 or more hours

96. During an average week, on how many days do you take part in organized after school, evening, or weekend activities (such as school clubs; community center groups; music, art, or dance lessons; drama; church; or cultural or other supervised activities)?
- A. 0 days
 - B. 1 day
 - C. 2 days
 - D. 3 days
 - E. 4 days
 - F. 5 days
 - G. 6 days
 - H. 7 days
97. Do you agree or disagree that you feel alone in your life?
- A. Strongly agree
 - B. Agree
 - C. Not sure
 - D. Disagree
 - E. Strongly disagree

98. Do you agree or disagree that in your community you feel like you matter to people?
- A. Strongly agree
 - B. Agree
 - C. Not sure
 - D. Disagree
 - E. Strongly disagree
99. Do you agree or disagree that your school has clear rules and consequences for behavior?
- A. Strongly agree
 - B. Agree
 - C. Not sure
 - D. Disagree
 - E. Strongly disagree

**This is the end of the survey.
Thank you very much for your help.**



Health and Health Care in Schools

A report on the policies, politics and financing of health programming in schools

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A 1998 federal law, the Protection of Pupil Rights Amendment (PPRA), allows parents to inspect instructional materials used in connection with any U.S. Department of Education-funded "survey, analysis, or evaluation." The law, often called the "Hatch amendment" or the "Grassley amendment" for the members of Congress who introduced it, also requires schools to obtain written parental consent before minor students participate in Education Department-funded surveys that ask questions about personal or family matters.

As the result of recent amendments to PPRA in the No Child Left Behind education law (Public Law 107-110, signed January 8, 2002), parents have additional rights to examine materials with regard to the surveying of minor students, even when the surveys are not Education Department-funded, and to opt their children out of surveys and certain non-emergency medical examinations.

The Family Policy Compliance Office (FPCO) in the U.S. Department of Education, which administers the Family Educational Rights and Privacy Act (FERPA), has responsibility for the expanded Protection of Pupil Rights law, also known as the "Tiahrt amendment."

The original PPRA law required schools and contractors to make educational materials available for inspection by parents and provided a list of survey questions that would trigger the need for written parental permission. Those requirements remain in place. The trigger questions include inquiries about:

1. political affiliations or beliefs of the student or the student's parent;
2. mental and psychological problems of the student or the student's family;
3. sex behavior or attitudes;
4. illegal, anti-social, self-incriminating, or demeaning behavior;
5. critical appraisals of other individuals with whom students have close family relationships;
6. legally recognized privileged or analogous relationships, such as those with lawyers, physicians, and ministers;
7. religious practices, affiliations, or beliefs of the student or student's parent; or
8. income, other than that required by law to determine eligibility for participation in a program or for receiving financial assistance under such program.

The PPRA compliance office in the U.S. Department of Education points out that these requirements apply when a survey is funded, at least in part, by any program administered by the U.S. Secretary of Education.

Under the Tiahrt amendment that took effect in 2002, additional requirements are now in place, and they apply as well to surveys funded by sources other than the U.S. Department of Education. The law now requires public elementary and secondary schools to "develop and adopt policies—in conjunction with parents," regarding:

1. the rights of parents to inspect, upon request, a survey created by a third party before the survey is administered or distributed by a school to students;
2. arrangements to protect student privacy in a survey if it includes any of the eight items noted above;
3. the right of parents to inspect any instructional materials used as part of the education curriculum;
4. administration of physical examinations or screenings that the school may administer to students;
5. collection, disclosure, or use of personal information collected from students for the purpose of marketing, selling;
6. the right of parents to inspect any instrument used in collecting information for marketing or selling.

Schools must notify parents of their PPRA policies at least once annually and must give parents ample opportunity to opt out (remove their child) from participation in surveys containing one or more of the eight items of information specified in the original law.

Parents are also allowed to remove their children from any non-emergency invasive physical examination or screening that is required for attendance or is not necessary to protect the immediate health and safety of the student or other students.

Explanation of the Protection of Pupil Rights Amendment is posted on the Education Department's Family Policy Compliance Office website at

<http://web.archive.org/web/20041030221359/http://www.ed.gov/offices/OM/fpco/ppra/index.html>. The compliance office indicates it will publish regs covering the new parts of the law.

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Healthy Alaska

2007 YRBS Results
December 2007

Inside This Issue:

- 2007 Alaska YRBS – Weighted Data
- Alaska YRBS Comparison & Trends
- Leading causes of Death and YRBS Results
- Key Findings

2007 Alaska YRBS results are posted online at

<http://hss.state.ak.us/dph/chronic/school/yrbresults.htm>

2008 Alaska Reading First Summit

<http://www.eed.state.ak.us/tls/readingfirst/summit.html>



Brain Booster —

A sundial is said to be the timepiece with the fewest moving parts. What is the timepiece with the most moving parts?

2007 Alaska YRBS – Weighted Data

In 2003 Alaska became the first state with active parent consent required for participation in school surveys like the YRBS to ever collect enough responses to yield usable data on a statewide level, and with your help we did it again in 2007! Alaska needed 60% of all students selected for the survey to actually participate in the survey to achieve usable (representative) data and 60% is exactly what Alaska managed to collect. Had any of the participating schools chosen not to participate, or had the participating schools not worked so hard to collect signed permission slips, Alaska would have fallen short in its efforts. The YRBS represents Alaska's most comprehensive and reliable source of information on the prevalence of risk behaviors in Alaska's youth that contribute to the leading causes of death and disease in Alaskans. Countless health agencies, families, and school districts rely on the YRBS data when applying for competitive grants and also to measure whether or not their current intervention and prevention programming is working. Alaska now has usable data from 2007, 2003, and 1995 which allows it to understand and measure trends in youth risk behaviors across more than a decade. Great work!

Alaska YRBS Comparison & Trends

The 2007 Alaska YRBS results are very similar to the results of the 2003 Alaska YRBS. This is not surprising since changes are usually gradual. Over the last 12 years the prevalence of many risk behaviors has decreased. The prevalence of smoking cigarettes, drinking alcohol, using marijuana, and physical fighting seem to be going down. The percent of students that have ever had sexual intercourse or reported having sexual intercourse in the past three months has stayed about the same. Percentage of students taught about AIDS or HIV infection in schools has gone down.

The 2007 Alaska YRBS results are very similar to the national YRBS data from 2005 (which is the last available data – 2007 national survey results will be released next summer). Fewer students in Alaska reported being in a physical fight in the past 12 months compared to the national results (29.2% vs. 35.9%) but more students in Alaska reported being hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend in the past 12 months (12.4% vs. 9.2%). The percent of Alaskan high school students attending daily PE is lower than the national average with only 17.7% of high school students attending daily PE in Alaska compared to 33% of those in the national 2005 YRBS survey.



**Brain Booster—
Answer:**

An hourglass—filled with many grains of sand or other granular material.

**Healthy Students
Learn Best – Boot
Camp for Teachers**

<http://www.eed.state.ak.us/tls/schoolhealth/>

Applications due
December 19th!

**AMSEA
Children & Youth
Educators Program**

<http://www.amsea.org/schools/index.html>

*****SUBSCRIBE*****

To subscribe directly to our newsletter, visit us at:
www.eed.state.ak.us/tls/schoolhealth/subscribe.htm

*****FEEDBACK*****

We are looking for feedback! If there are any changes you would like to see made and/or suggestions for content of the newsletter, please send them to Sarah Schaal at:
sarah.schaal@alaska.gov

School Health Partners:



www.eed.state.ak.us/tls/schoolhealth/



www.hss.state.ak.us/dph/chronic/school/default.htm

Leading Causes of Death and YRBS Results

Suicide is the leading cause of death of Alaska youth (ages 15-19). The Alaska YRBS data indicates that 14.1% have made a plan about how they would attempt suicide and 10.7% actually attempted suicide one or more times in the past 12 months. Motor vehicle crashes are the second leading cause of death among Alaska youth. 23.5% of Alaska youth report having driven in a car by someone who had been drinking and 9.7% reported driving a car when they had been drinking.

Key Findings

The survey asked students to report certain risky behaviors. Key findings are listed below.

Alcohol and drug use:

- ❖ 39.7 percent of high school students had consumed alcohol within the past 30 days;
 - Compared to 38.7 percent in 2003 and 47.5 percent in 1995;
- ❖ 20.5 percent of high school students reported using marijuana in the past 30 days;
 - Compared to 23.9 percent in 2003 and 28.7 percent in 1995; and
- ❖ 25.1 percent of students were offered, sold or given an illegal drug by someone on school property during the past 12 months;
 - Compared to 28.4 percent in 2003 and 34.1 percent in 1995.

Violence and suicide:

- ❖ 29.2 percent of high school students had been in a physical fight during the past year;
 - Compared to 27.1 percent in 2003 and 35.8 percent in 1995;
- ❖ 12.4 percent had been physically hurt by a boyfriend or girlfriend in the past year;
 - Compared to 10.8 percent in 2003 (1995 numbers were not available);and
- ❖ 10.7 percent reported attempting suicide in the past 12 months;
 - Compared to 8.1 percent in 2003 and 9.4 percent in 1995.

Obesity:

The obesity epidemic in Alaska and the nation contributes to the risk of heart disease, stroke, diabetes, and other chronic diseases. Health habits such as good nutrition and being physically active are the key to maintaining a healthy weight.

- ❖ 84.3% of high school students do not eat the recommended daily servings of fruits and vegetables.
- ❖ 57.5% did not get the recommended 60 minutes of physical activity per day for most days of the week.
- ❖ 82.3% did not attend daily PE classes.
- ❖ 27.3 percent were overweight or at risk of being overweight.

Other behaviors that increase the risk of health problems:

- ❖ 45.1 percent of high school students have had sexual intercourse;
 - Compared to 39.6 percent in 2003 and 47.2 percent in 1995; and
- ❖ 17.8 percent of high school students smoked in the past 30 days;
 - Compared to 19.2 percent in 2003 and 36.5 percent in 1995.

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Fact Sheet

COMMISSIONER'S OFFICE

FOR IMMEDIATE RELEASE: Nov. 19, 2007

Fact Sheet: 2007 Youth Risk Behavior Survey (YRBS)

What is the Youth Risk Behavior Survey (YRBS)?

The Youth Risk Behavior Survey (YRBS) is part of an epidemiological surveillance system that was established in 1990 by the Centers for Disease Control and Prevention (CDC). It was developed to monitor health risk behaviors that contribute markedly to the leading causes of death, disability, and social problems among youth and adults in the United States. These behaviors, often established during childhood and early adolescence, include:

- Tobacco use;
- Unhealthy dietary behaviors;
- Inadequate physical activity;
- Alcohol and other drug use;
- Sexual behaviors that contribute to unintended pregnancy and sexually transmitted diseases, including HIV infection; and
- Behaviors that contribute to unintentional injuries and violence.

What are the purposes of the YRBS?

- Determine the prevalence of health risk behaviors;
- Assess whether health risk behaviors increase, decrease, or stay the same over time;
- Provide comparable national, state and local data;
- Provide comparable data among subpopulations of youth; and
- Monitor progress toward achieving the Healthy People 2010 objectives and other program indicators.

How long has Alaska participated in the YRBS?

The YRBS high school survey was first implemented at the national level in 1990. Since that time CDC has sponsored national surveys from 1991 to the present on an every-other-year basis. Alaska first participated in the YRBS in 1995 and obtained representative statewide data. Due to external factors, the YRBS was not administered in 1997. It was administered in 1999; however the Anchorage School District did not participate. Without Anchorage the data were not representative of the state as a whole. The survey was administered in 2001, but unfortunately low student response rates rendered the data unusable. A major obstacle in 2001 was the constraint of the active parental consent law that had just gone into effect. In 2003 the survey was administered statewide with active parental consent and representative data were obtained, making this

the first statewide YRBS representative sample since 1995. The survey was again administered in 2005, however the response rate fell just below the target and the data was not used. In 2007, the survey was administered and achieved an adequate response rate, yielding important survey results.

What is the difference between active and passive consent?

Alaska's active parental consent law, AS 14.03.110, prohibits public schools from administering surveys or questionnaires that ask about personal or family affairs, or anything else that is not a matter of public record or readily observable in public, without first getting written permission from all participating students' parents or legal guardians. This law holds regardless of whether the surveys are anonymous and voluntary. Alaska is one of only a few states in the nation that has a school survey law requiring active parental consent for surveys of this type. Most states employ passive parental consent when administering such anonymous surveys. Passive parental consent involves notifying and informing the parents about the survey and assuming that students will participate unless the parent provides a written refusal to opt out of the survey.

How was the YRBS conducted?

A two-stage sample design was used to select the actual students for participation. The first stage consisted of selecting schools. Schools were selected with probability proportional to the size of their enrollment. Once a school was selected, classes were selected as the second stage. Eligible classes were those where a student would be enrolled in one and only one class at a time. For example second period or required English. This gave each student an equal opportunity of being selected. At any time a school district, an individual school, a student's parents, or a specific student had the opportunity to decline participation.

At the classroom level, teachers were given a script to read to students that established guidelines for student privacy and anonymity and the importance of the survey. Each student was given an unmarked envelope in which to seal his or her survey before turning it in. These survey envelopes remained sealed until received at a central state collection site. The Centers for Disease Control and Prevention and a CDC contractor analyzed the state survey data.

A national YRBS also was conducted in 2007, however, the results will not be available until early summer 2008. As a result, 2005 National YRBS results are being used for comparison purposes.

Who participated in the survey?

Forty one high schools from 19 districts were scientifically selected to be included in the survey. Thirty-eight (88 percent) schools participated and 1,318 (68 percent) students completed the survey resulting in an overall response rate of 60 percent. The CDC has determined that the overall response rate must be 60 percent or greater in order for the data to represent the high school population of the state. Therefore, these survey results represent 34,399 students grades 9 through 12 in public high schools (excluding private, alternative, boarding and correctional schools).

How are the data used?

The results of the YRBS are used to detect changes in risk behaviors over time and provide an important piece of program planning and evaluation, curriculum development and decision-making regarding the use of available resources. The information from the YRBS can be used to help schools and communities identify strengths and weaknesses in current programs and services. Additionally the results can be used by schools and communities when applying for grant funding to initiate or maintain programs that serve youth.

Who supported the YRBS in Alaska?

The YRBS in Alaska is a cooperative effort between the state departments of Health and Social Services and Education and Early Development. The survey is also endorsed by the following groups and boards:

- Association of Alaska School Boards
- Alaska Action for Healthy Kids
- All Alaska Pediatric Partnership
- American Heart Association, Pacific/Mountain Affiliate
- American Lung Association of Alaska
- American Cancer Society, Alaska
- Alaska Health Education Consortium
- Alaska Tobacco Control Alliance
- Alaska Native Tribal Health Consortium

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