Youth Risk Behavior Survey (YRBS) 101

An Education and Awareness Resource for Local, State, and National Organizations





Contributors

This resource was developed by Advocates For Youth and The Trevor Project, with contributions from American Psychological Association, American Foundation for Suicide Prevention, GLSEN, Movement Advancement Project, National Coalition of STD Directors, and SIECUS: Sex Ed for Social Change.

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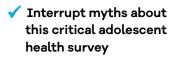
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Executive Summary

Since 1991, the Youth Risk Behavior Surveillance System (YRBSS), a biennial school-based survey of adolescents in grades 9 through 12, has been critical in understanding adolescent health behaviors and outcomes. This includes behaviors and experiences like sexual behavior, substance use, experiences of violence, mental health, and suicidal thoughts and behaviors. It also includes social determinants of health, such as unstable housing, and protective factors, like school connectedness and parental monitoring. The survey illuminates disparities among marginalized youth, including Black, Indigenous, and other youth of color, and lesbian, gay, bisexual, transgender, queer, and questioning (LGBTQ) young people.

The 2023 state legislative session emboldened false narratives by introducing bills in nearly every state targeting inclusive school practices. In fact, by the close of the 2023 spring legislative season, more than 220 bills had been introduced¹. Such legislation often emphasized the need for increased parental involvement in schools, including prohibiting or reducing youth participation in critical data collection. Entities such as the Florida Department of Education have withdrawn from administering the YRBSS and are planned to administer a state-provided survey in its stead, and advocates must be prepared for additional states to withdraw in the coming years. It's essential that state advocates have the information and tools they need to hold their state officials accountable for gathering data related to youth behaviors. Data collected through the YRBSS is essential to understanding and improving the health outcomes of young people nationwide. This resource is geared towards local, state, and national organizations to strengthen their support for the YRBSS. Our message is clear: the Youth Risk Behavior Survey is anonymous and does not collect any student-identifying information. It is essential for parents, educators, and health professionals to create programs to keep youth safe from abuse, suicide, injury, addiction, and other harm. The YRBS is a tool that should not be used to advance a left or right-wing political agenda, but one that should strengthen our understanding of the health risks and behaviors of young people, from young people. The YRBSS amplifies the voices of young people so programs and policies can be best crafted to meet their needs.

National, state, and local organizations should use this document to:





 Develop resources and fact sheets on YRBS to share online and in-person

^{1.} American Civil Liberties Union. (2023). Mapping Attacks on LGBTQ Rights in U.S. State Legislatures. https://www.aclu.org/legislative-attacks-on-lgbtq-rights?impact=school

YRBS: A Fact Sheet

YRBSS OR YRBS?

The YRBSS is a system of surveys. It includes:

- A national survey, called the Youth Risk Behavior Survey (YRBS), conducted by CDC that includes high school students from both private and public schools within the U.S.
- Surveys conducted by departments of health and education at the state, territorial, or local levels of their respective public high school students

This Resource Guide highlights the YRBS.

Our school systems should do everything they can to protect students from injuries and harm. The Centers for Disease Control and Prevention's (CDC) Youth Risk Behavior Survey monitors priority health risks and experiences among middle and high school students nationwide. Results from the YRBS help educators, clinicians, and other youth-serving professionals better understand risks that contribute to the leading causes of death and disability among youth and young adults.

YRBS data should influence policy and program changes to better protect students from sexual abuse, physical injury, drug, alcohol, and tobacco use, dietary harm, and suicide. The YRBS data also monitors progress toward achieving the **Healthy People 2030 objectives** and other program indicators.

Every two years, the YRBS is conducted with middle and high school students throughout the United States at the national, state, and local level. The 2021 high school YRBS was conducted nationally in 41 states, 28 large urban school districts, three territories, and two tribal governments. The CDC shares this data in various reports, fact sheets, and publications.

A nationally representative sample of schools and a random sample of classes within those schools are selected to participate. The YRBS is conducted by selecting districts in this manner rather than having schools "opt-in" to maximize participation and data quality. Students can choose which questions they want to answer and their responses are anonymous. Parents and guardians have the opportunity to review the questionnaire and to decide if their child should not participate. Studies have shown that the "opt-out" option can lead to higher participation rates, be cost-effective, and alleviate the administrative burden on schools. In comparison, the "opt-in" option can lead to biases and underrepresentation of certain groups of students. Conduct of the national YRBS is supported by national organizations such as the National Parent Teacher Association, the National Association of School Nurses, and the **American Academy of Pediatrics.**

The CDC works with other federal agencies, national nongovernmental organizations, and departments of education, health, and social services to:

- · Identify and monitor critical health events, youth behaviors, and related school policies and programs.
- · Summarize and apply research findings to increase the effectiveness of interventions.
- Provide funding and assistance to help plan, implement, and evaluate interventions that reduce risks and promote healthy practices.
- · Monitor progress made toward achieving national health objectives.

Additionally, some states lack the infrastructure to collect local-level data and have missed opportunities to obtain federal funds. The YRBS helps bridge this gap and inform stakeholders of local needs.

While schools are critical in helping students reduce health risks, families and communities are equally important in ensuring the nation's youth stay healthy now and into adulthood. Research shows that schools and families can protect against risks by increasing connectedness. Families can do this by staying engaged in their adolescents' daily lives and talking to their adolescents about their values. Schools can do this by building safe environments and providing connectedness for all students, delivering evidence-informed health education focusing on building skills for healthy decision-making, and connecting students to necessary health services. The YRBS is vital for schools, families, and communities, to understand and address behaviors that contribute to youth health in the United States.

2021 YRBS High School Results:

Illuminating Disparities²

YRBS data provides unique insights into young people's complex and intersectional behaviors. Collected data outlines overlapping behavioral outcomes that can assist in ensuring the needs of young people are addressed and supported. The 2021 data below comes from https://yrbs-explorer.services.cdc.gov/. We encourage you to visit the site for more data findings related to YRBS and your organization's subject matter.

YOUTH EXPERIENCING HOMELESSNESS



2.7% reported experiencing unstable housing in the last 30 days

1.7% reported experiencing sleeping in the home of a friend, family member, or another person because they had to leave their home or their parent/guardian cannot afford housing

MENTAL HEALTH AND YOUTH



42.3% reported feeling sad or hopeless

22.2% reported having seriously considered suicide

10.2% reported having actually attempted suicide

SEXUAL IDENTITY AND YOUTH

69%

gay, lesbian, or bisexual students reported feeling sad or hopeless

45%

gay, lesbian, or bisexual students reported having seriously considered suicide

22%

gay, lesbian, or bisexual students reported having actually attempting suicide

23%

gay, lesbian, or bisexual students were bullied on school property

27%

gay, lesbian, or bisexual students were electronically bullied

FEMALE YOUTH



reported feeling sad or hopeless



reported seriously considering attempting suicide



reported being bullied on school property



reported experiencing sexual violence by anyone

13.5%

reported being physically forced to have sexual intercourse

SEXUALLY ACTIVE YOUTH

30.7%

reported that they had ever had sexual intercourse



/ **48.2**% reported

reported testing for a sexually transmitted disease other than HIV

using a condom during last sexual intercourse

13.7%

reported not using any method to prevent pregnancy during last sexual intercourse with an opposite-sex partner

TOBACCO USE, ALCOHOL AND OTHER DRUG USE

36.3% reported ever used electronic vapor products



17.8% reported ever tried cigarette smoking



10.5% reported they were currently binge drinking

VIOLENCE AND YOUTH

6.6% reported being threatened or injured with a weapon on school property



15% reported being bullied on school property



reported being electronically bullied

8.5% reported being ever physically forced to have sexual intercourse

AMERICAN INDIAN OR ALASKA NATIVE, BLACK OR AFRICAN AMERICAN, AND HISPANIC OR LATINO YOUTH

40.6%

American Indian or Alaska Native students felt sad or hopeless

46.4%

Hispanic or Latino students felt sad or hopeless

17.8%

American Indian or Alaska Native students were bullied on school property

27.3%

American Indian or Alaska Native students seriously considered attempting suicide

18.3%

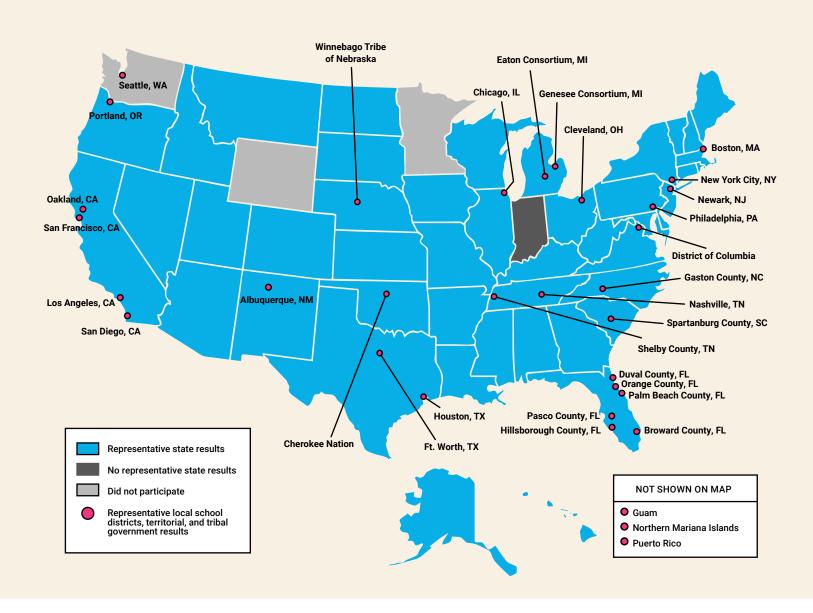
American Indian or Alaska Native students were ever physically forced to have sexual intercourse

22.2%

Black or African American students did not use any method to prevent pregnancy during last sexual intercourse

² Centers for Disease Control and Prevention (CDC). (2023). Explore Youth Risk Behavior Survey Questions - United States, 2021. https://nccd.cdc.gov/ Youthonline/App/Default.aspx

2021 HIGH SCHOOL YRBS PARTICIPATION MAP



This map illustrates state, territory, tribal government, and local school district participation in the 2021 High School Youth Risk Behavior Survey. Surveys with representative and no representative state, territory, tribal government, and local school district data are shown.

"Representative data are weighted to represent all students in grades 9–12 attending schools in each jurisdiction. With representative data, it is possible to say, for example, "X% of students in state Y never or rarely wore a seat belt when riding in a car driven by someone else."

Why the Withdrawal?

Reasons for Discontinued Participation in 2023 YRBS

For the upcoming 2023 YRBS, states withdrew participation in the YRBS for various reasons. For instance, the Idaho State Department of Education (SDE) blamed low participation while the Florida Department of Education (DOE) indicated that the state would conduct it's own survey. The Florida DOE Commissioner Manny Diaz called the YRBS "inflammatory" and "sexualized." In contrast, Colorado's Department of Health and Environment (CDPHE) decided to withdraw to focus on their Healthy Kids Colorado Survey, which asks questions similar to the YRBS and others that are more inclusive of young people's identities and behaviors. Similar to Colorado, Minnesota, Oregon, and Washington also conduct their own student surveys. The chart below outlines examples of withdrawal status and reasoning3.

	FLORIDA DOE	IDAHO DOE	CDPHE
WITHDRAWAL LANGUAGE RECEIVED FROM CDC	"Florida's DOE has elected to discontinue the cooperative agreement supporting the Youth Risk Behavior Survey (YRBS) and School Health Profiles (Profiles), effective immediately."	"The Idaho State DOE will discontinue Idaho's participation in YRBS and Profiles, effective July 1, 2022."	"CDPHE will discontinue Colorado's YRBS participation, starting with the 2023 data collection cycle."
WRITTEN RESPONSE FROM STATE-BASED AGENCY	Indicated that it intends to develop its own version of a youth risk survey Winter 2022: The survey will enter into the testing and refinement phase. The survey will then be administered to students for the first time in spring 2023. Summer 2023: The survey results will be compiled and analyzed, then published by the Florida Department of Education.	"Based on low participation rates in recent years, leading to the inability to use the data from the Youth Risk Behavior Survey, the State Department of Education determined that it was best to discontinue the survey for the time being." Critchfield said the SDE is "analyzing the usefulness" of the Youth Risk Behavior Survey, and suggested there might be other ways of getting a handle on K-12 mental health issues. "We have students, parents, teachers, counselors, and administrators telling us about these issues in real time. The best data is talking with these groups and visiting our schools."	"After careful consideration, Colorado has decided to pause participation in the CDC's YRBS efforts, in order to focus on the Healthy Kids Colorado Survey."6
LOCAL ORGANIZATIONS URGING THE STATE NOT TO WITHDRAW	Florida Policy Institute (<u>Letter</u> to <u>Department of Education</u>)		
NATIONAL AND LOCAL ORGANIZATIONS URGING THE STATE NOT TO WITHDRAW	Letter to Department of Health and Education urging agency to continue participation	Letter to Department of Education urging agency to continue participation	Call with Colorado YRBS Coordinator, participation in youth data council

³ Additional states may or may not have withdrawn during the publication of this resource.

Solochek, J. S. (2022, May 6). Florida will track youth behavior on its own after rejecting CDC survey. Tampa Bay Times. https://www.tampabay.com/news/education/2022/05/06/florida-will-track-youth-behavior-on-its-own-after-rejecting-cdc-survey/?mc_cid=ca171411e3&mc_eid=4dc947e48e

Rankin, M. (2022, 16 November). State to create 'Florida-specific' behavioral health survey for students: What this means. https://www.wtsp.com/article/news/health/ florida-specific-behavioral-health-survey-mental-health/

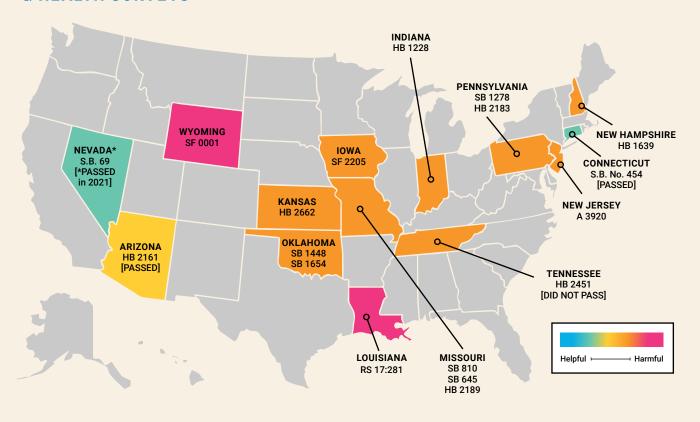
⁶ Colorado Department of Public Health & Environment. (2022, May 3). School and Youth Survey Newsletter. https://drive.google.com/file/d/1a-SkABkYTp84gJNXRTA6B2n2Pvmo9RxI/view

THREATS TO THE YRBS

The ability of the YRBS to provide a nationally representative overview of young people's health has been threatened by recent state withdrawals. Further, 10 states introduced legislation during the 2022 state legislative session to mandate parental consent for young people to participate in health surveys. At least 21 states introduced similar legislation in 2023 that sought parental consent, notification, or total survey removal. Such mandates present an unnecessary barrier to youth participation, as parents already have the ability to remove their children from data collection measures in school. Rather than empowering parents, these mandates undermine the quality of data collected and its ability to reveal the pressing health concerns of young people at the local, state, and national levels.

Support from local, state, and national organizations like yours is needed now more than ever.

HELPFUL AND HARMFUL LEGISLATION REGARDING PARENTAL CONSENT & HEALTH SURVEYS



Wyoming discontinued participation in YRBS after legislation, <u>SF0001</u>, passed in 2016. The law states "No federal funds from this appropriation shall be expended to implement a youth risk behavior survey."

Louisiana participates in the YRBS, but the only question about sexual health that students in that state answer is about whether they ever learned about HIV or AIDS in school. This is due to Louisiana's law, Revised Statute 17:281(A)(2), which states "students shall not be tested, quizzed, or surveyed about their personal or family beliefs or practices in sex, morality, or religion."

Legislative Lessons Learned: New Hampshire

In January 2022, the New Hampshire House committee recommended, via House Bill 1639, that the state's YRBS become "opt-in" instead of "opt-out."

The bill was introduced after a New Hampshire Representative indicated that his informants told him that students don't take the survey seriously7. The legislator noted that parents should know their children are being asked about their sexual activity and dating violence: "Parents need to know what their children are being asked. ... Parental rights. All questions on any survey must be given to the parents so they can make the decision to allow their child to take the test7."

THE LEGISLATOR'S MYTHS ABOUT THE YRBS WERE CONSISTENTLY DEBUNKED:

- The survey questions are publicly available on the New Hampshire Department of Health and **Human Services website.**
- → Past years' results and 10-year trends are available on the New Hampshire Department of Education website.
- Parents can already opt their children out of the survey.

- Misinformation is information a person believes is true, but is not (think of a parent who has seen something troubling on social media and now believes it to be real).
- Disinformation is information a person knows is false, but repeats it anyway (a Superintendent repeatedly saying LGBTQ+ teachers are groomers).

Organizations such as New Futures, the National Association of Mental Illness New Hampshire (NAMI NH), the New Hampshire Charitable Foundation, the New Hampshire Public Health Association, the New Hampshire Community Behavioral Health Association, the Community Alliance for Teen Safety rapidly mobilized and formed a coalition to coordinate outreach to oppose the bill. The Communities for Alcohol and Drug-Free Youth (CADY) coordinated the youth voices component. For instance, CADY supported youth-via an existing prevention-based coalition-to mobilize, testify, and attend the hearings8.

These agencies successfully argued that the legislation, if passed, would have weakened the state's children's behavioral health treatment systems by changing participation in the YRBS to an "opt-in," reducing participation and data collection9. They also argued that the legislation would jeopardize millions of dollars in funding and public policy efforts¹⁰.

Along with the placement of media articles and a blog post detailing the impact of HB 1639, the coalition held meetings with leaders of the House and Senate Committees, coordinated meetings with organizations of interest, and provided testimony to the Department of Health and Human Services and the Governor's Commission on Alcohol and Other Drugs.

The success of defeating this bill last year stemmed from all of these organizations coming together and using each one's unique lens to convey the danger of passing this bill.

⁷ The Keene Sentinel. (2022, April 25). Proposed legislation would alter the Youth Risk Behavior Survey. https://www.sentinelsource.com/townnews/politics/proposed $legislation-would-alter-the-youth-risk-behavior-survey/article_30 abfd2c-9a33-5520-8 bab-efc2990 ca404. html$

Sevigny, E., Babikir Bedri, H. (2022, April 26). Opinion: The lasting damage of HB 1639. Concord Monitor. https://www.concordmonitor.com/My-Turn-School-basedbehavioral-health-46021416

¹⁰ Timmins, A. (2022, March 11). House committee recommends bill to make Youth Risk Behavior Survey opt-in. New Hampshire Bulletin. https://newhampshirebulletin. com/2022/03/11/house-committee-recommends-bill-to-make-youth-risk-behavior-survey-opt-in/

YRBS and Adolescent Prevention, Treatment, and Care Funding

YRBS data collection is critical to informing the development and funding of programs that meet the needs of young people. The survey is structured to consider the broad array of the young people it serves.

Some school districts and various agencies, from mental health centers to other community-based non-profits, depend on grants to help fund critical programs for young people, most often youth in under-resourced communities. Without YRBS data, these agencies, and the young people, are left in the dark — unable to examine the health risks of youth and use the data to apply for funding to address solutions.

"[The YRBS helps the Mayor's Drug Task Force in Franklin, New Hampshire] plan their services, inform the community to apply for grants, like the \$125,000 10-year SAMHSA Drug-Free Communities grant the Task Force received to provide prevention efforts for 12- to 18-year-olds."

- KANDYCE TUCKER, DIRECTOR, MAYOR'S DRUG TASK FORCE, FRANKLIN, NEW HAMPSHIRE

THE INFORMATION BELOW SHOWS HOW SOME SCHOOL DISTRICTS HAVE USED YRBS RESULTS TO RAISE FUNDS TO SUPPORT THEIR PROGRAMMING:

CASE STUDY 1

Milwaukee Public Schools <u>notes</u> that YRBS data is used to "plan risk reduction efforts and for the Initiative, Project AWARE (Advancing Wellness and Resiliency in Education) grant [applications]."

CASE STUDY 2

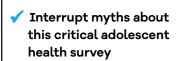
Orange County Public Schools states that YRBS data has been used to "[plan, monitor, and evaluate school health interventions," "[p]rovide information and support for funding requests," and "[i]nform teacher professional development," among other uses.

Additionally, states and school districts can directly, and separately, apply for and receive funding from CDC to conduct the YRBS. Therefore, if a state or school district rejects administering the YRBS, they ultimately reject \$100,000 (\$60,000 for YRBS; \$40,000 for School Health Profiles Survey).

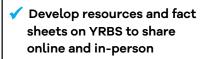
Getting Involved

Now that you've learned about YRBS, explored some of the data, and read about the current attacks on the survey, it's time to get involved. The resources both here and in the appendix include various examples of how to support your state and/or school district to continue participation in the YRBS.

As a reminder, national, state, and local organizations should use this document to:



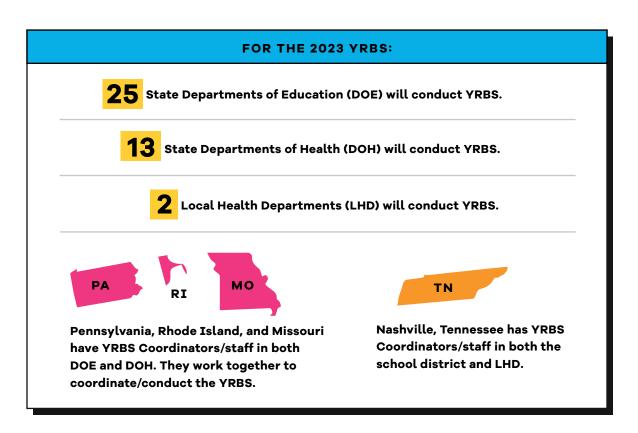




YRBS COORDINATORS

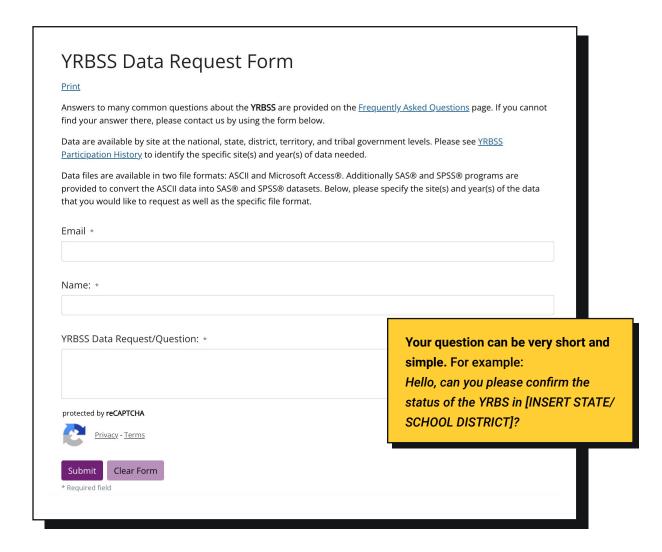
The best way to ensure that the YRBS is strengthened and remains intact in your state and/or district is by contacting the YRBS Coordinator in your area. For contact information, please reach out to ascc@advocatesforyouth.org.

YRBS Coordinators conduct various activities, such as leading survey administration for data collection and supporting data reporting and dissemination.



Step-by-Step Directions to Contacting CDC for Status of the YRBS in Your Area

To identify whether or not a school district or state is at risk of withdrawing from participation in the YRBS use the YRBSS CDC Contact Portal.



If a state or school district you inquire about is officially withdrawing, CDC staff may let you know the effective date and the agency's point of contact, this may or may not be the local YRBS Coordinator. In other cases, they may simply state that the survey is or is not being implemented. If so, you can reply and ask for an effective date and agency point of contact, this may or may not be the local YRBS Coordinator. They may be unable to confirm the unofficial withdrawal status, but you should still ask. After receiving notification from CDC on the status, this Resource Guide should provide you with various tools should your state or school district be at risk of withdrawing from participation in the survey. Use these tools to advocate for the administration of the YRBS or the administration of additional, optional elements of the YRBS at the state or district level. This will include stakeholder identification, education, and mobilization.

Community Coalition/ Volunteer Database

Start by building and formalizing your community coalition — if you're reading this resource, you're already concerned and you're not alone. A few organizations in your state may already be familiar with the YRBS.

Reach out to any relevant organizations in your area - youth, public health, family planning, reproductive freedom and justice, HIV prevention, and LGBTQIA+ civil rights organizations — to inquire about who might already be working on issues related to YRBS and strengthening education and awareness about the survey. If no luck, cast as wide a net as possible to develop a coalition and bring in folks who care about online safety, social-emotional learning, sexual violence prevention, preventing child abuse, and getting quality information and programs to kids and parents/caregivers.

Keep advocates and supporters in a database you can access when it's time to get loud - you should have a few members from each group listed below in order to speak to any audience you might need:

ADVOCATES AND SUPPORTERS

- Parents/caregivers
- **Educators and Administrators**
- Students (current and former)
- Community leaders (elected officials and otherwise)
- ✓ Faith leaders
- LGBTQIA+ leaders (as gender inclusivity is an enormous target for disinformation)
- **Public health experts**
- Physicians (specifically pediatricians and adolescent medicine doctors)

These supporters become your volunteers passing out flyers, posting on social media, alerting you to opposition disinformation, and for those interested - your public speakers.



Messaging: Documents

It is critical for messaging documents to consider the audience first. Parents/caregivers, teachers, community coalition members, and the press all need distinct messaging to feel confident in the various conversations they have.

For example, it is critical *not to repeat the disinformation* in materials distributed to parents/caregivers — multiple studies have shown that statements such as the following are *actually counterproductive*:



"The YRBS does not encourage students to engage in risky behaviors."

<u>Multiple studies</u> have shown that what people remember is the charge, not the denial. So for external guidance materials (like FAQ sheets and social graphics), you may want to use a line such as the following, which provides the accurate answer and omits the disinformation entirely:

"Strong evidence exists that healthy students learn better. Study after study has shown that students who do not engage in the risk behaviors assessed by the YRBS have higher grades and test scores. To improve academic achievement and ensure that students do not engage in these behaviors, it is critical to implement quality school district health policies, programs, and activities based on data about the health risk behaviors students actually engage in."

For **educators**, who are already steeped in the disinformation, you may want to provide a **point-by-point rebuttal** so they can feel confident when and if they're confronted with specific charges.

Consider these two different audiences when crafting your message documents:

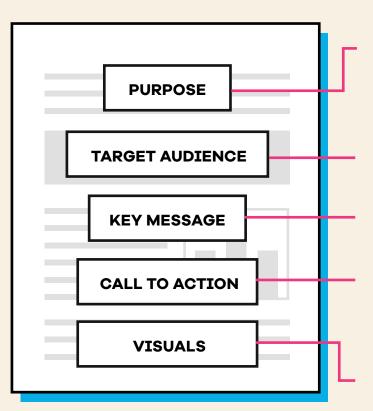
- Internal Guidance. This is messaging for educators, administrators, health department staff, and coalition
 members; often a FAQ sheet of the toughest questions regularly received by members of this group.
 These documents are not meant to be shared publicly, and therefore can refer directly to the opposition and their
 claims.
- External Guidance. This will be the bulk of your materials fact sheets to be distributed at parent and community events and turned into social graphics to post on coalition and supporter social media pages.

 Expect these materials to be shared widely and possibly printed in the press if seen by the media.

Focus on what you want the community to know about the YRBS, including:

- Transparency let parents/caregivers know they can access the entire CDC national and standard survey online, or the specific questions used from that document in their own school's survey in a district office, or from the teacher/department responsible for this survey.
- Data that shows YRBS data collection has resulted in local and state policy changes that reduced harm to students.
 (i.e. reduction in teen smoking/vaping, changes in nutritional value of school lunches offered, increased mental health supports for students, etc.)
- Any opportunities for family input, such as the role of parents/caregivers in preventing risky behavior, or parental
 opt-out of the YRBS survey.

A FEW CRITICAL COMPONENTS TO CONSIDER WHEN PREPARING A FACT SHEET:



What is the purpose of sharing this fact sheet?

There may be more than one; what is important is clarity on purpose — possibilities include accountability, build alliance, counter opposition, educate, elicit action, gain support, and more. Are you trying to inform? inspire? persuade?

Who is the target audience?

Which stakeholders might be in the best position to take action based on your results?

What are the implications of sharing with this audience?

What is the key message? What story are you telling?

Is it accurate? compelling? clear? relevant to this target group? succinct? What YRBS statistics might support you in telling this story?

Is there a call to action?

Other considerations for engaging the reader:

- Length (suggest keeping to one page)
- · Color Graphics/Illustrations/Photos
- · Charts and graphs
- White space

A sample YRBS fact sheet for education and health professionals, press and external partners is below, followed by a sample guide for families and community members, please edit either/both to meet the needs of your district or state.

YRBS FACT SHEET

Our state and school districts should do everything it can to protect students from injuries and harm. The Centers for Disease Control and Prevention (CDC)'s <u>Youth Risk Behavior Surveillance System</u> monitors priority health risks and experiences among high school students across the country. The Youth Risk Behavior Survey (YRBS) results help families, community stakeholders, and education and health professionals in understanding risks that contribute to the leading causes of death and disability among youth and young adults.

YRBS data leads to policy changes that protect students from sexual abuse, physical injury, drug, alcohol and tobacco use, dietary harm, and suicide.

National, state, and local surveys are conducted every 2 years among high school students throughout the United States. The report includes national YRBS data and data from surveys conducted in 44 states, 28 large urban school districts, 3 territories, and 2 tribal governments. All answers are anonymous, and students can choose which questions they want to answer.

The YRBS is conducted by selecting districts, rather than having school districts "opt in" to maximize participation and data quality. <u>Studies have shown</u> that passive consent can lead to higher participation rates, be cost-effective, and alleviate the administrative burden. In comparison, active consent can lead to biases and underrepresentation of certain groups of students.

The national YRBS has received a letter of support from both the national PTA and the Department of Health and Human Services, Drug and Alcohol Bureau. Parents/caregivers will have the opportunity to review the questionnaire and to decide if their child should not participate.

CDC and partners use YRBS data to work on multiple levels to address student protections – including funding, implementing, and evaluating programs that address many of these risks and protective factors. CDC works with other federal agencies, national nongovernmental organizations, and departments of education, health, and social services to —

- · Identify and monitor critical health events, youth behaviors, and related school policies and programs.
- · Summarize and apply research findings to increase the effectiveness of interventions.
- Provide funding and assistance to help plan, implement, and evaluate interventions that reduce risks and promote healthy practices.
- Monitor the progress made toward achieving national health objectives

Additionally, some states lack the infrastructure to collect local-level data and have missed opportunities to obtain federal funds. The YRBS helps to meet this gap and inform potential funders on local needs. While schools are critical in helping students reduce health risks, families and communities have an equally important role to play in making sure the nation's youth stay healthy now and into adulthood. Research shows that schools and families can protect against risks by increasing connectedness. Families can do this by staying engaged in their adolescents' daily lives and talking to their adolescents about their values. States and school districts can do this by building environments that are safe and provide connectedness for all students, delivering evidence-based health education with a focus on building skills for healthy decision-making, and connecting students to necessary health services.

FAMILY & COMMUNITY MEMBERS GUIDE TO THE YRBS

Our state and school districts should do everything it can to protect students from injuries and harm. The Youth Risk Behavior Surveillance System regularly and anonymously surveys high school students across the country about health risks and behaviors — using the results to help families, community stakeholders, and education and health professionals understand and combat the leading causes of death and disability among students.

YRBS data leads to policy changes that protect students from:

- sexual abuse,
- · physical injury,
- drug and alcohol use,
- · smoking/vaping,
- · dietary harm,
- suicide,
- · additional risks to mental and physical well-being.

National, state, and local surveys are conducted every 2 years among high school students throughout the United States. All answers are anonymous, and students can choose which questions they want to answer. The national YRBS has received a letter of support from both the national PTA and the Department of Health and Human Services, Drug and Alcohol Bureau. Parents will have the opportunity to review the questionnaire and to decide if their child should not participate.

While schools are critical in helping students reduce health risks, families and communities have an equally important role to play in making sure the nation's youth stay healthy now and into adulthood. Research shows that schools and families can protect against risks by increasing connectedness. Families can do this by staying engaged in their adolescents' daily lives and talking to their adolescents about their values. States and school districts can do this by building environments that are safe and provide connectedness for all students, delivering evidence-based health education with a focus on building skills for healthy decision-making, and connecting students to necessary health services.

Messaging:

It's important to remember that the vast majority of people you encounter will already be in agreement that states and school districts should do what they can to protect students from injury and harm. Some will simply have heard a disturbing falsehood about what's in the YRBS survey. A small but vocal number will be members of the disinformation campaign themselves — these are the toughest conversations, but as long as they're being held in public where others can hear, they can be an important tool in fighting back. Below are some effective strategies when having a public dialogue with people who oppose the YRBS.

Ask for the person's connection to the state and/or school district — do they live in the community? Have children in the district? This will help you and others in the room understand whether this is an actual concerned parent, or someone who travels scaring parents to score political points.

No matter the answer to the first question, assume that the person you're speaking to is concerned about the children's physical safety and mental health, and let them know you share that concern — that's why you support the YRBS. YRBS data leads to policy changes that protect students from abuse, physical injury, drug, alcohol and tobacco use, and dietary harm. It is precisely these concerns that lead you to support YRBS in your district or state.

Remember not to repeat the disinformation, but do clearly refute it. If the question is "are you asking kids intimate questions about their sex lives?"

Your answer should be along the lines of this:
 "No. YRBS anonymously surveys students asking extremely basic questions about the risk behaviors they engage in, so we can make the policy changes to implement the educational programming necessary to keep them safe."

Follow up questions are to be handled with the same formula — the question may be challenging, but not rooted in disinformation, such as "are you asking kids about sex?" In this case, follow the above advice and find common ground with the person asking.

 A possible answer would be: "I share your concerns about students engaging in sexual activity at a young age — that's why the YRBS anonymously surveys students asking extremely basic questions about the risk behaviors they engage in, so we can make the policy changes to implement the educational programming necessary to keep them safe." Don't ignore the disinformation. If someone approaches you with false information, don't hesitate to say "You may have been targeted by a false information campaign — we want to set the record straight." It can be applied in circumstances like this:

- Question: Are you encouraging kids to have sex by asking these questions?
- Answer: You may have been targeted by a false information attack. YRBS anonymously surveys students about risk behaviors so we can make the policy changes necessary to keep them safe. The truth is outside groups are heavily invested in scaring parents to score political points. But not having accurate information about what behaviors students are engaging in makes kids vulnerable to abuse, injury, and suicide — and we think their safety is more important than politics.

Public Meetings Regarding YRBS (School Board, State Department of Education, Health Departments)

School districts, state boards of education, and health departments must post their meeting schedule online — meaning your ability to make the biggest impact possible is just a Google search away. Once your membership base is ready to advocate for the YRBS to remain intact in your state or school district, make sure you're present at every meeting. It's critical not only to provide an accurate counterpoint to any disinformation that might be spread there, but also to show the school board that their district includes parents and citizens who strongly support the work of the YRBS.

At the end of most meetings, state departments of education and school boards will allow time for public comments. Encourage your members to make statements following these guidelines:

State your relationship to the state/district.

Do you have students in school there? Have you lived there a long time or have a business in town? It's important to credential yourself as someone truly connected to the work being done in the meeting at which you're speaking.

Explain why you personally support the YRBS.

Do you have a story from your own experience while in school? A child you're concerned about? Are you a physician treating young people who attend this school district?

Stress the major top lines from our messaging.

The YRBS is private, transparent to parents, and helps keep kids safe from abuse, suicide, injury, addiction, and other harms.

Keep your remarks respectful and under three minutes.

Lean on your coalition members to practice!

Visibility Events

A "Visibility Event" is anywhere members of your community are gathering. One of the simplest ways to identify an event where you should be flyering with positive messages about the YRBS, or otherwise participating in, is to look at the opposition. Where is their disinformation showing up? Where are they handing out material or carrying signs? It might be a PTA meeting, or it might just be the school parking lot during drop-off.

Make a list of upcoming community events where your organization should be visible:

- ✓ State Board of Education Meetings
- ✓ Department of Health Meetings
- ✓ Health and education conferences
- ✓ PTA Meetings
- School Board Meetings
- **✓** Local Government Forums
- ✓ Candidate Forums
- ✓ Parades/Fairs

- ✓ Youth Group Activities (Library Reading Days, YWCA Forums, etc)
- ✓ School team sports events
- ✓ Socials, Dances, and Back-to-School Nights
- **✓** Community Health Fairs
- ✓ Back-to-School Events
- Vaccine Days

In most cases, these are an opportunity for flyering, where you can pass out your external FAQ sheet and engage in conversation with people taking it. In other cases, there is an opportunity to speak. Identify members in your community or at your organization that can speak about the importance of the YRBS.



Don't forget to treat your online community the same way! The town square also exists on Facebook, so make sure your material is posted and shared on any FB groups for school parents and town residents.

Press Strategy

Press can be tricky when one of the first rules of defending against a disinformation campaign is not to repeat the disinformation. If the opposition is extremely small, or not too successful, you may find your most effective campaign is a relatively quiet one drumming up support among parents and educators. You might decide to forgo a press strategy. However, if you proceed there are some important things to keep in mind.

Let's talk through the five types of media you're likely to encounter:

- **1. FRIENDLY OUTLETS.** These are (often) local papers, advocacy (such as LGBTQIA+) press, and progressive sites. If you find yourself needing to quickly communicate to as many people as possible that a crisis is brewing, for example a campaign to end YRBS participation, these are the outlets to start with. Start your relationship with any reporter "on background*", which means you have the opportunity to explain your case without being quoted then have an on the record* interview where you make all the points you need without repeating the false information. If you're doing the outreach yourself, make sure to research the reporting and choose the journalist you feel would best understand the issue.
- **2. REPORTER INCOMING.** Arguably the toughest, because you're not expecting it. A reporter is simply interested in the issue perhaps they've seen the opposition campaign, perhaps they're looking into recent school board fights, whatever the reason is, they're contacting you.

This is the moment to let your state, national and/or community organizations know you've been contacted and walk through next steps. With so many stories by bad faith or "both sides" reporters, an important first step for any inquiries is to vet the reporter. You should search the reporter's name in Google, review their social media presence, and look at previous stories they've written to see if you want to respond in the first place. Then, once they've been determined as someone worthwhile to engage, you can try to get as much information as you can about the piece the reporter is thinking to write — who else are they talking to, and what angle are they thinking of taking. You can ask them all this on background before you agree to an on record interview. If the story sounds like one you'd like to participate in, send them whatever materials are helpful and set them up with an on record interview with the best person from your community coalition for their piece. If the story focuses on the disinformation (or worse, the reporter believes it) stay "on background" and send them the materials they need to understand the facts. Once you've corrected the record and are reasonably sure the reporter understands the issue, proceed with the interview.

- **3. RIGHT WING MEDIA.** Do not engage. There is no good-faith dealing with an outlet that helps to spread disinformation. Do not respond to emails, if called or approached in person, a simple "I'm not interested in participating in this story" is just fine. But do alert your national organizations so they know to track whatever is coming. If you're unsure whether an outlet is right-wing, go ahead and check out the homepage. The way they're covering the school board fights will likely tell you what angle they're coming from. Similarly, take a look at any reporter's Twitter feed to learn how they approach the issue.
- **4. OP-EDS.** Opinion pieces are an excellent way to make sure your most trusted communicators, such as pediatricians, are heard by the largest possible audience.
- **5. SOCIAL MEDIA.** Social media can be used as a vital tool to promote the importance of the YRBS. Your agency can use various platforms to highlight recent YRBS findings related to your issue area. In addition, promoting YRBS online is an effective way to illustrate the need for data regarding young people's health and wellbeing. Check out the hashtags #YRBS and #WhyYRBS across various social media platforms to replicate what people have shared in the past about the YRBS.

Closing

This Resource Guide includes information regarding the need to strengthen and uphold the YRBS in states and school districts.

As a reminder, national, state, and local organizations should use this document to:

✓ Interrupt myths about this critical adolescent health survey

✓ Build relationships with YRBS Coordinators Develop resources and fact sheets on YRBS to share online and in-person

KEY POINTS ABOUT YRBS:

- → YRBS is the best source for quality data at the national, state, territorial, tribal, and local school district levels for monitoring health-related behaviors that contribute to the leading causes of mortality and morbidity among U.S. middle and high school students and that can lead to health problems as adults.
- → The information generated is essential to educators, policymakers, health care providers, and other youthserving professionals to help them design programs, improve policies and practices, assess program effectiveness, and monitor trends related to the health and well-being of youth and young adults.
- → A recent report from the National Academies of Sciences, Engineering, and Medicine used YRBS as its data source based on the strengths of the system.¹¹
- → Alarming statistics from YRBS data should be a clarion call to states and school districts that young people are suffering and in need of programs and services to redress these health risks.
- → Without future YRBS data, we will not have data to know whether the health and well-being of young people have improved or worsened. In short, states and school districts that withdraw participation will not have the data to hold themselves accountable to their students and families.
- → Departments and School Districts across the country with access to YRBS data are better positioned to meet young people's needs and support them in thriving at school and beyond. Our young people deserve at least that.

Without YRBS data, the current and future health needs of students cannot be fully addressed.

¹¹ National Academies of Sciences, Engineering, and Medicine. Promoting positive adolescent health behaviors and outcomes: thriving in the 21st century. Washington, DC: The National Academies Press; 2019. http://www.nap.edu/catalog/25552/promoting-positive-adolescent-health-behaviors-and-outcomes-thriving-in-theexternal

Appendix:

YRBS Resources to Refer to and Replicate

GENERAL

- → #WhyYRBS
- → YRBS Explorer

Want to stay up-to-date on YRBS? Set up Google Alerts for the following terms: "YRBS" "YRBSS" "Youth Risk Behavior Survey" and "Youth Risk Behavior Survey"

For sample presentations and slides decks, email ascc@advocatesforyouth.org.

FLORIDA

- → University of South Florida
 - Florida turns its back on an important national survey
- → University of Florida Jacksonville
 - Florida drops survey on teen health and mental health at 'worst time,' says pediatric expert

→ Florida Policy Institute

- Letter to Florida Department of Education Interim Commissioner Jacob Oliva
- Action is Needed to Stop Florida's Withdrawal from the Youth Risk Behavior Survey
- Florida's Decision to Withdraw From Youth Risk Behavior Survey Was 'Done in Darkness,' Think Tank Says
- Florida Lawmakers Must Do More to Improve Child Well-Being
- Florida pulls out of CDC survey on students' drinking, drug use and suicidal thoughts
- Florida urged to rejoin federal survey that guides help for youth
- More Groups Join Call for State Officials to Reverse Withdrawal from Youth Risk Behavior Survey

→ Florida Parent Teacher Association

- PTA seeks return to CDC youth survey
- Florida PTA now among 100 appeals for state to return to CDC youth health survey

→ Additional Florida-based Examples

- Support YRBS in Duval Schools
- University of North Florida Professor Discusses Youth Risk Behavior Survey

NEW HAMPSHIRE

- → New Hampshire Public Health Association / New Futures New Hampshire
 - Bill passed by House would weaken children's behavioral health treatment systems
- → New Futures New Hampshire
 - HB 1639: YRBS in Schools Landing Page
- → Riverbend Community Mental Health
 - NH youth behavior health programs put at risk by House vote
- → National Alliance on Mental Illness New Hampshire (NAMI NH)
 - Bill to make Youth Risk Behavior Survey opt-in stalls this year
- → New Futures New Hampshire / New Hampshire Public Health Association
 - Bill passed by House would weaken children's behavioral health treatment systems

WYOMING

- Quality data is necessary to support Wyoming's youth
- Wyoming needs the YRBS
- Wyoming Community Foundation Calls for the Reinstatement of the Youth Risk Behavior Survey



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