

Sponsor Statement for CSHB 408 (HES) Student Questionnaires And Surveys

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

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Contact: Representative Con Bunde at (907) 465-4843

The purpose of the proposed repeal and reenactment of AS 14.03.110 is to enable local school districts in the State of Alaska to administer anonymous questionnaires and surveys to students with passive parental consent. Additionally, this bill requires that schools must provide a parent or legal guardian at least two weeks' written notice of any survey so that parents may have the option to deny permission for their student to participate. Moreover, students may opt out at anytime, as this statute refers to voluntary, not mandatory, surveys or questionnaires.

Current statute requires active written parental consent from the parent or legal guardian for the student to participate in the survey. This has resulted in the lack of "weighted" data collection, due to the logistics and time required to collect sufficient parental permission forms. When passive parental consent was used prior to the enactment of AS 14.03.110, the State was able to collect weighted data from the Youth Risk Behavior Survey (YRBS) in both 1995 and 1999. In January of 2001 (the last YRBS cycle), the YRBS high school sample was drawn. The high school sample included 36 schools from 19 districts and sought 1,480 completed questionnaires. The goal was to get a level of participation from both schools and students to achieve an overall response rate of 60% or greater. The overall response rate for 2001 was 29%. This is far short of the 60% overall rate needed to have "weighted" or representative data. To provide a comparison, the 1999 YRBS response rate was 66% and the 1995 response rate was 64%.

Anonymous survey data results are used to help focus programs and policies for comprehensive school health education, school safety policy and education, and drug and violence prevention education. Additionally, results from surveys can also be used to:

- Monitor how priority health risk behaviors among high school (grades 9-12) and middle school (grades 7-8) students increase, decrease or remain the same over time.
- Evaluate the impact of broad national, state, and local efforts to prevent health-risk behaviors.
- Monitor progress in achieving relevant national and state health objectives and National Education Goals.
- Obtain grants for programs and services.
- Monitor and evaluate the impact of the 1997 Alaska Tobacco Tax increase.
- Support local school districts in assessment, implementation, and evaluation of comprehensive school health programs.
- Set priorities for *statewide* comprehensive school health education teacher training and instructional programs.
- Provide comparable data between state and national results.
- Monitor progress in achieving Healthy Alaskan 2010 objectives.
- Provide the state with the most reliable and valid instrument available to assess risk behaviors of Alaskan youth.

