

Do Kids Tell the Truth on the YRBS?

While a very small number of students do not answer the Youth Risk Behavior Survey (YRBS) honestly, most students tell the truth. We have confidence in the data for the following reasons.

Survey environment. Survey administration procedures for the YRBS are designed to protect the confidentiality of schools and the anonymity of students. The survey is administered by people who have been provided with information on how to maintain student anonymity. Students sit as far apart as possible throughout the classroom and are given a piece of paper to cover their responses. Neither the survey administrator nor the classroom teacher wander around the classroom while the students are taking the survey. Students are told of the importance of providing honest answers, that no one will know how they respond, and how the data will be used to improve programs and policies for students. Make-ups are done only when the privacy of students can be protected.

Questionnaire design and content. The YRBS questionnaire is designed to protect the anonymity of students. No names or other types of personally identifying information are ever requested. Skip patterns are not used to make sure that all students complete the questionnaire in about the same amount of time. If skip patterns were used, some students who engaged in few risk behaviors would complete the questionnaire far faster than those students who engaged in many risk behaviors. All students are expected to answer every question. The YRBS questionnaire has a 7th grade reading level. This helps ensure that students can accurately comprehend the questions and response options. The total number of questions is kept small to help ensure that students have an adequate amount of time to respond to every question. Questions are written in a straight forward and direct manner and require only one response.

Psychometric testing. Psychometric tests were conducted on the YRBS questionnaire when it was first developed in a cognitive laboratory setting, in focus groups, and in regular classrooms among diverse groups of students. In 1992, a reliability study was conducted to measure the stability of responses during a two week interval. Psychometric tests also have been conducted by researchers not associated with Centers for Disease Control and Prevention (CDC) using the YRBS questionnaire and similar questionnaires. These tests have demonstrated aspects of both the reliability and validity of the YRBS questionnaire.

Comparison of YRBS data with data from other surveys. When YRBS results are compared to results from other national, state, and local surveys on the same topics, the results are generally quite similar, particularly when differences in survey administration, sample selection, and question wording are taken into consideration.

Consistency over time. YRBS results have been fairly consistent since 1990. While the prevalence of some behaviors has increased or decreased significantly over time, most of the changes have been gradual and in one direction—either up or down—and have not bounced around from year to year.

Subgroup differences. Subgroup differences are logical and have remained generally constant over time. For example, many behaviors like drug use and sexual experience consistently increase by grade, while others like physical fighting consistently decrease by grade. Other behaviors vary consistently by gender. Males are always far more likely than females to use smokeless tobacco.

Edit checks. More than 100 edit checks are conducted on each YRBS data set to remove inconsistent responses. For example, students who report carrying a weapon on school property must also have reported carrying a weapon anywhere. Only a few percent of responses from each question are identified as inconsistent and removed from the data sets. Though it rarely occurs, questionnaires with only a few valid responses are removed entirely from the data set.

Logic within groups of questions. Questions on similar topics produce logical responses. For example, more students have thought about attempting suicide than those who have made a plan to attempt suicide, fewer still have actually attempted suicide, and very few have made an injurious suicide attempt. This logical pattern of responses within groups of questions has occurred since the first surveys were conducted.

Health outcome data. YRBS results are consistent with health outcome data. For example, while the YRBS indicates that the prevalence of sexual experience is decreasing and the prevalence of condom use is increasing, a simultaneous decrease in teen pregnancies, teen births, and sexually transmitted disease rates has occurred.