The Vermont Department of Health (Department of Health) frequently receives questions about its Youth Risk Behavior Survey (YRBS). Below are answers to some of the most common questions.

What is the Youth Risk Behavior Survey, or YRBS?
The YRBS is a national survey that was developed in 1990 to monitor priority health risk behaviors and has been administered in Vermont since 1993.

The YRBS is a paper, classroom-based survey that is completed during the first few months of an odd numbered year. Two questionnaires are used, one for middle school students in grades six through eight (30 minutes) and one for high school students in grades nine through 12 (50 minutes).

The YRBS is an important public health tool for measuring the health of Vermont’s youth. The types of questions asked include risk behaviors (e.g. smoking and poor physical activity), substance use (e.g. alcohol and marijuana use), demographics (e.g. gender), perceptions around behavior (e.g. what do parents think about youth drinking), and youth assets (e.g. think you matter in your community).

The Department of Health and Agency of Education receive funding from the Centers for Disease Control and Prevention to implement the YRBS.

Who is eligible for the Vermont YRBS?
All Vermont youth in grades 6 through 12 are eligible. Participant schools are primarily public, public-private, or an interstate school. However, there are some independent and fully private schools who participate. Home schooled students do not currently take the YRBS.

How many students complete the survey?
In Vermont, all middle and high school students are invited to participate in the survey. The total number of respondents varies, but on average about 35,000 take the survey each cycle. In 2015, 99% of high schools participated, with more than 21,000 students completing the survey, over 13,500 middle school students participated. Nationwide, from 1991 through 2015, more than 3.8 million high school students have completed the survey.

Is the YRBS anonymous?
Yes, student participation in the YRBS is both anonymous and voluntary. Students complete an optically scannable questionnaire booklet that contains no personal identifier.

Do all states participate in the YRBS?
No. In 2015, 47 states and over 20 large urban school districts, territories, and tribal governments completed the high school survey in at least some capacity. Less than half of states participated in the middle school survey. There is also a YRBS that is completed at the national level by the Centers for Disease Control and Prevention.

How recent is YRBS data?
YRBS data is collected during the first two to three months of each odd numbered year. For example, 2015 data was collected during January and February of 2015. Once data collection is complete the data are processed by the CDC before becoming available for analysis by the state. This can take several months, so YRBS data is often not available until the following winter.
Can you provide school level data using the Vermont YRBS?
School data is generally only provided to the school administrator, and then only upon request. The main reason for this is due to privacy concerns about the potential ability to identify individuals within a school based upon their responses. Data can be analyzed at the supervisory union level, as well as by county, hospital service area, and VDH District Office. State, county, and supervisory union reports are available online.

Can I compare results from one supervisory union with those from another one?
It is natural to want to know how individual supervisory unions or school districts compare to each other. While comparing the supervisory union to the state can be helpful in order to determine how a particular supervisory union is doing, the Department of Health discourages communities from comparing supervisory unions to each other. There are a number of reasons for this, but the major reason involves sample size: when comparing two estimates from a small sample, the confidence intervals will often overlap (meaning there is no significant difference), even when the difference might appear large.

Can I request that questions be asked on the Vermont YRBS?
Yes. Part of the YRBS is required to be asked by all states. However, states do have some flexibility and are allowed to include additional questions. The space for these questions is very limited, thus, those wanting to add questions are required to submit a formal request and meet with Vermont’s YRBS team to discuss their proposal.

The questionnaire for a given year is developed during the summer of the previous year. So, as an example, the 2017 questionnaire was developed in the summer of 2016. If you would like to propose a question for the survey, please contact the YRBS coordinator for more information.

How are the results used?
YRBS results are used widely by a variety of stakeholders across Vermont. These include the Department of Health, Agency of Education, individual schools and supervisory unions, as well as non-profit and other organizations in the community. While the users of the data are varied, most use it for similar reasons. The most common ways YRBS data are used are to identify and target risk behaviors or populations for intervention (e.g., tobacco use prevention), evaluation of efforts to reduce risk behaviors, and to support grant requests for funds to address these behaviors.

Will this survey cause students to initiate or increase high-risk behaviors?
There is no evidence that simply asking students about health behaviors will encourage them to try that behavior. The causes and determinants of health risk behaviors are very complex. Students receive regular exposure to information about tobacco, alcohol, and other drug use; violence; and sexuality through their school curricula, the media, parents, friends, and community organizations. Exposure to a small number of questions on any one topic is not likely to cause a significant change in behavior—either good or bad.

Do students answer the questions truthfully?
Research indicates data of this nature may be gathered as reliably from adolescents as from adults. The Department of Health and the Centers for Disease Control and Prevention use various data cleaning methods when processing YRBS data to help identify the small percentage of students who falsify their answers. To obtain truthful answers, students must perceive the survey as important and know that procedures have been developed to protect their privacy and allow for anonymous participation. For more information, please see: http://healthvermont.gov/research/yrbs/2013/documents/do_kids_tell_the_truth_yrbs.pdf

If I have questions about the survey, who at the Department of Health can I contact?
You can contact the YRBS coordinator, Kristen Murray at kristen.murray@vermont.gov or 802-863-7276.