

Katrina Hedberg, MD, MPH Health Officer & State Epidemiologist

Tom Jeanne, MD, MPH Deputy Health Officer / State Epidemiologist



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Oregon Healthy Teens (OHT) Survey Background

- Voluntary, anonymous and confidential biennial survey of 8th and 11th graders
- School-based
- First administered in 2001
- Comprehensive source of information on the health and well-being of Oregon youth



Purpose

OHT is a key part of a statewide effort to help local schools and communities

- Identify strengths and problems
- Assess needs and develop plans
- Identify disparities
- Evaluate prevention
- Measure outcomes
- Solicit funding



Public Health Modernization Framework





Office of the State Public Health Director



Public Health Modernization Framework





Office of the State Public Health Director

Participation and Reliability

Participation:

- Districts: ≈ 85 to 90
- Schools: ≈ 230 to 250
- Students: ≈ 25,000 to 30,000

Reliability

• Margin of error: ±0.6%



Methodology

- Paper-and-pencil or web-based
- Anonymous and confidential
 - No identifying information; cannot link responses to a student, parent or family
 - Provides more accurate results than surveys where students believe their answers can be traced
- Voluntary
 - At every level (district, school, parent, student)
- Questions and methods modeled after national Youth Behavior Risk Survey (CDC)



Sampling of Districts/Schools

- Sample of schools with 8th and 11th graders
 - Public schools from all counties
 - Randomly chosen
- Districts
 - ≈ 125 invited
 - ≈ 75% to 80% agree to participate
- Schools
 - Not approached if district refuses
 - 80%+ agree to participate
- Schools track parental opt out, which is very uncommon



Volunteer Schools

- Schools can participate for other reasons
 - At the request of a public health program like School-Based Health Center
 - Need data (grant reporting requirements, program evaluation)
 - Typically 25 40 schools volunteer to participate



Passive Parental Consent

- Passive parental consent:
 - Parents notified of survey at least 2 weeks in advance
 - Gives parents the opportunity to review the survey
 - Parents can opt their student out by returning form to the school
- Allows for informed consent
- Minimal impact on schools compared to active parental consent, which has high administrative burden
- Meets federal laws



Active Parental Consent

- Parents required to return form to the school to allow their student to participate
- Active parental consent leads to less valid results
 - According to the CDC, active parental consent reduces student response rates by roughly 50%
 - Non-response bias
 - Parents with lower education underrepresented
 - Males, students of color and at-risk students underrepresented
 - Risk behaviors are underestimated



OHA Does Not Recommend Active Parental Consent

- Active parental consent:
 - Undermines the scientific validity of representative student data
 - Drastically curtails the ability to collect accurate information on risk behaviors and health conditions that impact student learning
 - Could potentially provide districts and schools with inaccurate results



Student Opt Out

- Students can:
 - Choose not to participate at any time (this is on every page of the survey)
 - Refuse to answer/ skip any question

	Health OREGON DEPARTMENT OF
	OREGON HEALTHY TEENS SURVEY – 2019 – 11TH GRADE FORM Please help us improve student health and safety in Oregon by taking this survey. Your answers will help us
	understand the greatest risks that students face and which programs and services are needed most to help support students. Thank you for taking this survey. We appreciate the time you're taking to answer our questions.
	Your participation in this survey is voluntary.
f	DO NOT WRITE YOUR NAME ON THIS SURVEY. The answers you give will be kept private and confidential. No one will know how you answer. Survey results are combined and only reported for students overall or large groupings. This is NOT a test. There are no right or wrong answers, and your participation in this survey is VOLUNTARY. Please be honest with your answers. If you are not comfortable answering a question, you can leave it blank. Please do answer each question you are comfortable with answering. Just because a question is asked, does not mean we believe you have engaged in a particular behavior or that it is appropriate. Each question has a response to indicate if you did not engage in that behavior. If you don't always find an answer that fits exactly, use the one that comes closest. If you are not sure what a question means, just leave it blank. Please fill in only ONE bubble or answer, unless the question specifically asks you to "Select one or more responses."
	Marking Instructions:
	Please mark your choice on this questionnaire. Fill in the bubbles completely. If you make a mistake, please erase your mistake, then fill in the correct response.
	Marks Answers Like This NOT Like This



Survey Topics

- Protective factors (Positive Youth Development, nutrition and exercise)
- Access to care
- Emerging public health issues (e.g. ecigarettes/ vaping)
- Substance use (including access to drugs & perceived risk)
- Risk behaviors & influences(family/peers)



Survey Topics

- Mental health / bullying
- School climate/ school safety
- Injury prevention (suicide and impaired driving)
- Sexual health (pregnancy, HIV / sexually transmitted infection prevention)
- Dating/Intimate partner violence
- Demographic characteristics, including disability



Examples of How OHT Data Are Used



Chronic absenteeism and health status among Oregon 11th graders



Source: Oregon Healthy Teens Survey, 2015

Suicide attempts by disability status among Oregon 11th graders



Source: Oregon Healthy Teens, 2017

Facilitate Environmental Change

- Safer, healthier schools and communities
 - Oregon Safe Schools Act (anti-bullying) HB2599
 - HB2650: removing junk food from school cafeterias and vending machines
 - Suicide prevention projects



Reduce and Prevent Substance Use

- Tobacco-free parks ordinances in St. Helens
 and La Grande
- Hood River and Klamath counties use data to engage youth groups in prevention activities
- Demonstrate need for tobacco and marijuana retail licensing in various counties



Secure Grants to Improve Health and Well-Being

- Safe and Drug-Free Schools and Communities
- STRYVE (Striving to Reduce Youth Violence Everywhere)
- Prevention of Dating, Intimate Partner and Sexual Violence
- ACT (Adolescents and Communities Together) to reduce sexual health disparities
- Teen Pregnancy Prevention
- REACH (Racial and Ethnic Approaches to Community Health)
- Also used for SHIP and Community Health Assessments



Youth Suicide Prevention

- Lincoln High School uses OHT data as part of an evidence-based Multi-Tiered System of Supports (MTSS) for suicide prevention:
 - Survey data on health and mental health used to assess need for specific evidence-based programs that match students' needs





Assess Program Effectiveness

- Lincoln High School uses OHT data to assess the effectiveness of the school's Dialectical Behavior Therapy (DBT) program
 - Following DBT:
 - Students experienced decreased anxiety, depression and social stress
 - Improved academic outcomes (attendance and GPA)



Summary

- OHT provides statewide data on health status, risk behaviors and protective factors of Oregon teens
- Important for program and policy at local and state levels
- Questions and methodology modeled on national YRBS



Questions?



