

March 2008

Dear Parent/Legally Authorized Adult:

~~Between April 14th and April 30th,~~ *On May 13, 14, or 15* 2008 your child/children will be invited to join their 6th, 8th, and 11th grade classmates in completing the Interim Iowa Youth Survey. Since 1975, students in Iowa have been filling out a similar questionnaire to provide information about their values, beliefs, attitudes, and activities. **Participation in the survey is anonymous and strictly voluntary, and no student is required to fill out the questionnaire.** The survey will take less than one class period, approximately 20 minutes, to complete and will be completed online.

Purpose of the Survey:

The purpose of the survey is to collect information about Iowa youth, so we can better understand their beliefs, values and decisions about what makes them feel secure, strong, and safe in their communities, schools, and families. In addition, information is collected about their ideas on alcohol, tobacco, drugs, sexual values, bullying and harassment, and violence prevention. The information collected will help the state planning agencies, our schools, and local community task forces put together valuable future programming. It is important to ask children to tell us what is good and working about their life in Iowa, and what needs improvement, in their eyes.

The Attorney General for the Iowa Department of Public Health (IDPH) has developed a plan for making sure that the survey is voluntary and has parent approval. This plan is called a "passive consent" procedure and it has three parts:

1. An Information Summary to give you the basic information about the survey. (Included here.)
2. An opportunity to read the survey questions before your child/children volunteer to answer the questions.
3. An opportunity for you to provide written refusal if you do not want your child/children to participate in such a survey.

Part 1. The Information Summary

Parental Rights:

- You have the right and the responsibility to be informed about that which your child volunteers to participate in school.
- You have the right to receive accurate information, about the Interim Iowa Youth Survey questionnaire, in order for you to make good decisions for your family.

Iowa Youth Survey Content:

The Interim Iowa Youth Survey consists of approximately 40 questions about key areas for youth and families. Some of the areas on the questionnaire will have sensitive questions about tobacco, alcohol, illegal drugs, sexual values, and thoughts on violence and safety. It is important to remember that our school children do not live in identical environments. All children and families do not have the same beliefs, attitudes or values. Your child/children may make very different life choices than other children. If we are going to plan programming that keeps all children safe and connected to their families, schools and communities, we need to know what our Iowa children are thinking, saying and doing.

Confidentiality:

All information collected will be anonymous. Students will **not** put names or birth dates on the survey, and all questionnaires will be sealed immediately after they are completed. Information from the 6th graders will be added together and reported as a school district group. The same will be true for the 8th and 11th graders. Students will complete the survey online and all data will be stored in a secure site in our district.

Compensation:

There will be no compensation or reward for students participating in the survey.

Voluntary:

- All students in 6th, 8th, and 11th grades will be invited to fill out the Interim Iowa Youth Survey questionnaire. Students will have the right to refuse to answer any questions on the survey. If students decide they want to change their mind and quit answering during the survey, they may do so.
- If, as a parent or legally authorized representative, you do not want your child/children to participate, you may send the school the *Refusal to Consent* form provided in this letter, and your child/children will be provided a neutral activity during the survey class period. There is no penalty for anyone who decides not to participate.

Risk:

There is no direct risk involved in filling out the survey. Students may find some questions uncomfortable to answer. They may leave blank any question they do not wish to answer.

Benefits:

There will be no direct benefits to the students the day of the survey. The data collected throughout the district will provide our schools and community with the information we need to provide programs that will support our schools, the community and families in keeping our children safe and hopeful about their future.

Questions:

Questions regarding the Interim Iowa Youth Survey are encouraged. Please contact your school principal or Carol Johnson at Loess Hills Area Education Agency 13, 366-0503, 1-800-432-5804 or cjohnson@aeal3.org.

Part 2: Reviewing the Survey

A copy of the Interim Iowa Youth Survey will be available to preview at the school building offices from March 25th through April 11th, 2008. After reviewing it, you can decide whether or not your child/children will participate.

Part 3: Refusal of Consent

I have read the Information Summary provided. I understand that my child/children's participation in the survey is strictly *voluntary*. I also understand my right to review the survey at the school building office between March 25th and April 11th, 2008. I do not want my child/children listed below to participate in the Interim Iowa Youth Survey. I understand that a neutral activity will be provided for them during the survey time and that there is no penalty for my family members not participating. I understand that this refusal of consent needs to be received by the district no later than April 11th, 2008. Please return to the building principal.

Names of child/children who will not participate in the 2008 Interim Iowa Youth Survey:

Child Name

Grade

Child Name

Grade

Child Name

Grade

Parent Signature

Date

IYS Interim Survey

This section asks you to describe yourself.

1. Would you describe yourself as... (race/ethnicity)
2. In what grade of school are you?
3. What is your current age?
4. Are you a male or female?
5. At school, my grades are mostly...

Things I Have Tried or Done and Things That Have Happened to Me -- This section of the survey asks you to describe your experiences. Please read each question carefully and pay attention to the time periods listed.

6. How old were you (if ever) when you first smoked a whole cigarette for the first time?
7. How old were you (if ever) when you first drank (more than a few sips) of alcohol (beer, wine, liquor)?
8. How old were you (if ever) when you first tried marijuana (pot, grass, hash, bud, weed)?
9. In the past 30 days, on how many days have you smoked cigarettes?
10. In the past 30 days, on how many days have you had at least one drink of alcohol (glass, bottle or can of beer; glass of wine, liquor or mixed drink?
11. During the last 30 days, on how many days did you have 5 or more drinks of alcohol (glasses, bottles or cans of beer; glasses of wine, liquor, mixed drinks) in a row, that is within a couple of hours?
12. In the past 30 days, on how many days have you used marijuana (pot, hash, bud, weed)?
13. During the last 30 days, how many times have you been with kids under 21 who were drinking alcohol?
14. During the last 30 days, how many times have you been with kids under 21 who were drinking alcohol where parents/guardians were present?

My Beliefs and Attitudes -- This section of the survey asks you to describe your beliefs and attitudes. Your answers need to show your real beliefs and attitudes, not what you "think" is an acceptable answer to others.

15. How much do you think you risk harming yourself (physically or otherwise) if you smoke cigarettes every day?
16. How much do you think you risk harming yourself (physically or otherwise) if you drink 3 or more drinks (glasses, cans or bottles of beer; glasses or wine, liquor or mixed drinks) of alcohol nearly every day?

17. How much do you think you risk harming yourself (physically or otherwise) if you smoke marijuana once a week?
18. Thinking of your best friends, how wrong would most of them feel it would be for you to smoke cigarettes?
19. Thinking of your best friends, how wrong would most of them feel it would be for you to drink beer, wine or hard liquor (for example vodka, whisky, gin)?
20. Thinking of your best friends, how wrong would most of them feel it would be for you to smoke marijuana?
21. How wrong would your parents/guardians feel it would be for you to drink beer, wine or hard liquor (for example vodka, whisky, gin) without their permission?
22. How wrong would your parents/guardians feel it would be for you to smoke cigarettes?
23. How wrong would your parents/guardians feel it would be for you to smoke marijuana?

Things That Have Happened At School -- This section of the survey asks you to describe your experiences. Please read each question carefully and pay attention to the time periods listed.

24. In the last 30 days, how many times have you been bullied at school in this way? – I was called names, made fun of, or teased in a hurtful way.
25. In the last 30 days, how many times have you been bullied at school in this way? – Other students left me out of things on purpose, excluded me from their group or friends, or completely ignored me.
26. In the last 30 days, how many times have you been bullied at school in this way? – I was hit, kicked, pushed, shoved around, or locked indoors.
27. About how often in the last three weeks have any of your classroom teachers had to stop teaching in order to deal with a major student disruption or behavior problem?
28. When a student is being bullied at school, how often do the teachers or other adults at school try to put a stop to it?
29. During the past 30 days, on how many days did you carry a weapon such as a gun, knife, or club on school property?

My Beliefs and Attitudes -- This section of the survey asks you to describe your beliefs and attitudes. Your answers need to show your real beliefs and attitudes, not what you "think" is an acceptable answer to others.

30. How much do you agree with this statement? – I feel safe at school.
31. How much do you agree with this statement? – Students in my school treat each other with respect.
32. How much do you agree with this statement? – My teachers care about me.
33. How much do you agree with this statement? – My teachers notice when I am doing a good job and let me know about it.
34. How much do you agree with this statement? – My teachers are available to talk with students one-on-one.
35. How much do you agree with this statement? – My school lets a parent/guardian know if I'm doing a good job.
36. How much do you agree with this statement? – There is at least one adult at school that I could go to for help with a problem.
37. Someone in my home helps me with my schoolwork...(frequency)