

Assessing Health Risk Behaviors Among Young People:

Youth Risk Behavior Surveillance System 2004



"The information collected through the Youth Risk Behavior Survey is vitally important to school policy makers, administrators, and educators as they plan and implement coordinated school health policies and programs designed to promote healthy behaviors among the nation's youth."

Anne L. Bryant Executive Director National School Boards Association

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR DISEASE CONTROL AND PREVENTION SAFER • HEALTHIER • PEOPLETM

Risk Behaviors Are Linked to the Leading Causes of Death

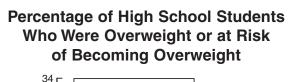
Today, the health of young people—and the adults they will become—is critically linked to the health-related behaviors they choose to adopt. A limited number of behaviors contribute markedly to today's major killers. These behaviors, often established during youth, include

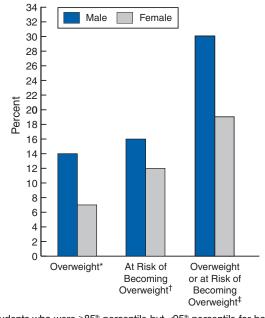
- Tobacco use.
- Unhealthy dietary behaviors.
- Inadequate physical activity.
- Alcohol and other drug use.
- Sexual behaviors that may result in HIV infection, other sexually transmitted diseases, and unintended pregnancies.
- Behaviors that may result in violence and unintentional injuries (for example, injuries from motor vehicle crashes).

Among both children and adults, the leading causes of death are closely linked to these behaviors. Among adults, chronic diseases—such as heart disease and stroke, cancer, and diabetes—are the nation's leading killers. Practicing healthy behaviors—such as eating low-fat, high-fruit-and-vegetable diets, getting regular physical activity, and refraining from tobacco use—would prevent many premature deaths. Because health-related behaviors are usually established in childhood, positive choices need to be promoted before unhealthy behaviors are initiated or become ingrained.

Collecting Important Health Information

Before the 1990s, little was known about the prevalence of behaviors practiced by young people that put their health at risk. The Youth Risk Behavior Surveillance System (YRBSS) now provides such information. Developed by CDC in collaboration with federal, state, and private-sector partners, this voluntary system includes a national survey and surveys conducted by state and local education and health agencies. The YRBSS provides vital information on risk behaviors among young people to more effectively target and improve health programs.





- * Students who were ≥85th percentile but <95th percentile for body mass index, by age and sex.
- † Students who were ≥95th percentile for body mass index, by age and sex.
- ‡ Students who were ≥85th percentile for body mass index, by age and sex. Source: CDC, Youth Risk Behavior Survey, 2001.

Using YRBSS Data

State and local health and education officials use YRBSS data in a variety of ways:

• To implement or modify programs to address the behaviors of young people in a specific area.

In New York City, YRBSS data on unintentional injuries led to the development of a program called "Safety Makes Sense."

• To set program goals and objectives and to monitor progress toward those goals.

In Wyoming, YRBSS data helped in assessing the implementation of health education standards.

• To create awareness of the extent of risk behaviors among young people and encourage action.

In Wisconsin, YRBSS data were published in the state's medical journal to help educate new physicians about adolescent health issues and ways to improve adolescent health.



CDC's Leadership Role

To ensure the availability of accurate and current information on health risk behaviors among young people, CDC provides funding and technical support to states and major cities to conduct a Youth Risk Behavior Survey (YRBS). In addition, CDC supports coordinated school health programs in a number of states to provide young people with the information and skills they need to avoid unhealthy behaviors.

Assisting with State and Local Surveys

With technical assistance from CDC, state and local departments of education and health conduct a YRBS every 2 years. Sites can add or delete questions in the core questionnaire to better meet the interests and needs of the state or major city. School-based surveys were last conducted and analyzed in 2001 among students in grades 9-12 in 38 states and 19 major cities. The average sample size of the surveys was 1,819 students.

CDC's technical assistance includes

- Training for state and local coordinators.
- Sample selection and data processing.
- Help with applying survey results to improve school health programs and policies.

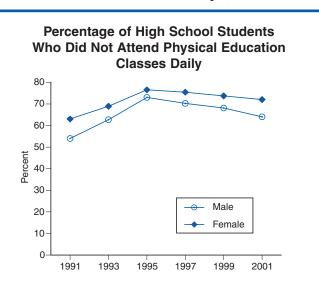
Conducting National Surveys

In addition to assisting states and major cities, CDC conducts a national YRBS every 2 years to produce data representative of students in grades 9–12 in public and private schools in the 50 states and the District of Columbia. The 2001 survey had more than 13,000 respondents.

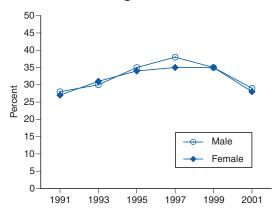
To provide critical information on health risk behaviors among young people in high-risk situations and those in college, CDC conducted additional national surveys:

- The National Alternative High School Youth Risk Behavior Survey, conducted in 1998 among a representative sample of almost 9,000 students in alternative schools.
- The National College Health Risk Behavior Survey, conducted in 1995 among a representative sample of about 5,000 undergraduate students. CDC hopes to conduct another survey in 2005.

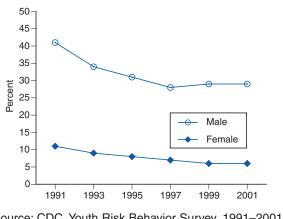
Results from National Surveys, 1991–2001



Percentage of High School Students Who Smoked a Cigarette in the Past Month



Percentage of High School Students Who Carried a Weapon in the Past Month



Source: CDC, Youth Risk Behavior Survey, 1991-2001.

Participants in the 2001 YRBSS

These sites conducted their own surveys.

Vermont

States

West Virginia Alabama Wisconsin Arkansas Wyoming Colorado Delaware Cities Florida Georgia Baltimore Hawaii Boston Idaho Chicago Illinois Dallas Indiana Detroit District of Columbia Iowa Kansas Fort Lauderdale Kentucky Houston Louisiana Los Angeles Maine Miami Massachusetts Milwaukee New Orleans Michigan Mississippi New York City Missouri Orlando Montana Palm Beach Philadelphia Nebraska San Bernadino Nevada New Hampshire San Diego New Jersey San Francisco New York North Carolina North Dakota Oregon Rhode Island South Carolina South Dakota Tennessee Texas Utah

Purposes of the YRBSS

- Determine the prevalence of health risk behaviors.
- Assess whether the prevalence of these behaviors increases, decreases, or remains the same over time.
- Examine the co-occurrence of health risk behaviors among young people.
- Provide comparable national, state, and local data.
- Monitor progress toward achieving the *Healthy People 2010* objectives, which are based on the 10 leading health indicators.

Access YRBSS Data Using Youth 2001 Online

Youth 2001 Online is a useful tool available at the YRBSS Web site (http://www.cdc.gov/yrbss). Youth 2001 Online contains results for national, state, and local surveys conducted from 1991 through 2001. Youth 2001 Online allows people to

- Create tables and graphs showing survey results.
- See results from national, state, and local surveys.
- Explore results by race/ethnicity, sex, or school grade.
- Compare survey results for two locations or survey years.
- Create reports that identify behaviors whose rates have changed significantly over time.

Future Directions

CDC will continue to help states and cities gather the data they need to monitor young people's health-related behaviors and strengthen programs to promote lifelong healthy choices among youth. In addition, CDC will find new ways to help education and health professionals analyze and use YRBSS data and maximize the data's effectiveness in improving school health policies and programs.

For more information or additional copies of this document, please contact the Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Mail Stop K–32, 4770 Buford Highway NE, Atlanta, GA 30341-3717, (888) 231-6405. healthyyouth@cdc.gov http://www.cdc.gov/yrbss

