Appendix H. School Recruitment Script for the "Student Health Survey"

Form Approved OMB No: 0920-XXXX Expiration Date: XX/XX/XXXX

## SCHOOL RECRUITMENT SCRIPT

## PRIOR TO CALLING, GATHER THE DISTRICT FILE FOLDER CONTAINING NAMES OF CONTACT PERSONS AND RELATED NOTES.

- 1. Hello, my name is [YOUR NAME] and I'm calling to follow up on the letter you received from CDC, the U.S. Centers for Disease Control and Prevention. We would like to invite your school to participate in a methodological study of the Youth Risk Behavior Survey (YRBS) sponsored by CDC. I think that you are already familiar with the YRBS. Your State conducted a YRBS using essentially the same questionnaire. Your district has previously done the YRBS. The survey also is done at a national level.
- 2. I'm calling to follow up on a conversation that you may have had with [DISTRICT CONTACT] regarding this study. Do you have a few minutes to talk with me right now? [IF NOT] When would you like me to call you back or would you prefer to make an appointment?
- 3. We spoke to [NAME] in the School District on [DATE]. (He/she) has given (his/her) approval for our contacting you today.
- 4. My basic reason for calling now is to make sure that you had spoken with [DISTRICT CONTACT], to tell you more about the study and to answer any questions that you may have, and to discuss your school's involvement in the survey.

## (OVERVIEW OF STUDY)

The student health survey, also referred to as the Youth Risk Behavior Survey (YRBS), is sponsored by the Centers for Disease Control and Prevention (CDC). This survey is an important study that asks about a variety of health topics that are pertinent to today's youth, including nutrition, physical activity, injuries, tobacco, alcohol, and other drug use. It also asks about sexual behaviors that cause AIDS, other sexually transmitted diseases, and pregnancy.

This year, the CDC is assessing the feasibility of administering the survey via the web vs. paper-and-pencil. Specifically, the 2008 methodological study will look at the effects on prevalence estimates, student participation rates, and data completeness/quality of the setting (regular classroom vs. computer lab vs. on their own), mode (paper vs. computer), presence of others (group administrations vs. individual administrations), and skip patterns (no skip patterns vs. skip patterns).

## (BURDEN AND PROCEDURES)

That may sound complicated, but I can make it sound less complicated. From your school, we would like to invite 4 classes of EITHER 9<sup>th</sup> grade or 10<sup>th</sup> grade students to participate. We

Public reporting burden for this collection of information is estimated to average 25 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, GA 30333, ATTN:PRA (0920-XXXX).

expect this to amount to about 100 to 120 students. We will want to select these classes from a required subject area of your choosing.

After the four classes have been identified, we will randomly assign three classes to a "school-based" condition – that is, the students in those classes will complete the survey during a regular class period. Two of the three classes will complete the survey in a computer lab, while the third class will complete the survey in a regular classroom using a paper-and-pencil questionnaire. The fourth class will be randomly assigned to the "on your own" condition. That means the students from that classroom will be asked complete the survey via the web, on their own time, at a place of their choice. This could be anywhere the student chooses: at school, at home, at a library or community center with Internet access.

Your school's participation in this survey is completely voluntary. The student's participation is also voluntary. Safeguards for respondents will be maintained throughout the entire survey process. CDC plans to report results from this study only in aggregate form without any identifiers relating to student name, school or school district.

[NAME] at the District thought this is something that would appeal to you. We think it's an important study because more and more tests and surveys are done on the computer.

What kind of resources does your school have in terms of computer labs? How many labs are there?

Are students who are enrolled in required courses at 9<sup>th</sup> and 10<sup>th</sup> grades normally run through the labs?

Have you run students through the computer labs before in conducting student assessments, standardized tests, or surveys?

Is this something you think your school can help us with?

Your labs all operate with broadband rather than dial up, correct?

Can your system support having a class of 30 students using the Internet at the same time?

We are asking your school to host this data collection along with some other schools in the area. We'll want to work with you or someone else you designate to coordinate our contact with the school. We'll need the teachers to send home the parental permission forms, keep track of them when they are returned, and send out reminder notes when necessary. In appreciation of your school's participation in this study, a check for \$500 will be sent to you following completion of data collection.

- 5. The exact timing of data collection at schools in your area has yet to be determined. The data collection period will occur between January and April 2008.
- 6. Do you have any questions that I can answer for you? Are there any issues you would like to discuss? If you have no further questions, can we count on your school's participation in the survey?
- 7. (IF SCHOOL IS DISINCLINED TO PARTICIPATE OR REFUSES, RECORD ALL REASONS AND CIRCUMSTANCES CONCERNING REFUSAL.) Thank you very much for the time you've spent talking to me today. (END CONVERSATION ON POSITIVE NOTE ALLOWING FOR FUTURE CONTACT ON THIS ISSUE.)

- 8. Now, I'd like to obtain some of the information from you that we need to plan your school's participation in the survey. This includes selecting classes, getting names of teachers, and some other things. Could you verify that your school contains the grade range we have listed which is \_\_\_\_\_? Is [SCHOOL CONTACT's] name correct? Is the school's phone number and address correct?
  - A. <u>CLASS SELECTION</u>: At each school, we want to randomly select 4 classes of either 9<sup>th</sup> <u>or</u> 10<sup>th</sup> grade classes to be in the study. The classes have to be selected randomly so that we have a scientifically defensible and representative sample.
  - B. <u>TYPES OF CLASS USED</u>: Does your school have homerooms? (IF YES:) How long are homeroom period? Could the survey be administered in homeroom? (IF NOT:), for [grade selected 9<sup>th</sup> or 10<sup>th</sup>] grade students, what academic subjects do <u>all</u> [grade selected 9<sup>th</sup> or 10<sup>th</sup>] grade students take? (VERIFY:) If we used the subject for [GRADE], would <u>every</u> student at this grade level have a chance to be selected? In other words, do all students in this grade take this subject?
  - C. <u>CLASS SECTIONS</u>: (USE WORKSHEET.) Now I'd like to select the actual classes. First, can you tell me how many classes (sections) you have in [9<sup>th</sup> OR 10<sup>th</sup>] grade? I need to list each of the class sections for that grade. (IF USING HOMEROOMS, ALPHABETIZE BY LAST NAME OF TEACHER. OTHERWISE, USE NUMERICAL SECTION NUMBER SEQUENCE. Using the random numbers, we have selected the following four classes:

Teacher 1

Teacher 2

Teacher 3

Teacher 4

(REVIEW ALL TEACHERS AND SECTIONS AT CONCLUSION OF CLASS SELECTIONS. OBTAIN THE MOST CURRENT CLASS ENROLLMENT FOR EACH.)

D. <u>SPACE</u>: We will be administering the school-based survey to two of the four classes using computers. We would like to administer the survey in your computer lab during the same time as the selected class. Each student will need to have access to a computer for survey administration

E. <u>SCHEDULING:</u> Scheduling information will help us plan the timing of the visits to your school and the actual data collection activities. I'd like to ask a series of questions. The reasons for most questions will be self-evident. When are each of the following:

Start of school day for most students
End of school day for most students
Lunch period(s)
Time at which most teachers arrive at school
Time at which most teachers leave school
Homeroom" meetings of classes

- F. <u>FACILITIES</u>: Now I would like to discuss the physical environment of your school to better understand how our data collectors will enter, exit, and maneuver through your school.
  - Are there special requirements for entering and exiting the building?
  - Are ID badges required? If yes, where do we get them? Or would a picture ID suffice?
  - Do our data collectors need to be escorted through the school? If yes, how do we make arrangements for an escort?
- 9. <u>PARENTAL PERMISSION FORMS:</u> One very important task for which we depend on you and your teachers is the distribution of parental permission forms. We've learned that response rates depend a lot on who sends them home and how they go home. Who do you want to be responsible for the permission forms?
  - Homeroom or Classroom Teacher
  - Contact Person
  - Principal
  - Other:

Permission forms will be available in Spanish for parents who speak and read only Spanish. Will you need any of these?

- No
- Yes--Roughly how many?

To personalize the form and increase parental perception that this is an important study, we can insert the name of the Superintendent, Principal, or other Contact Person in the form. Would you prefer that we do this? The form could be copied on school letterhead. (IF YES: DETERMINE IF SCHOOL WANTS TO DO IT OR ASK THAT LETTERHEAD BE SENT IMMEDIATELY.) It also would appear more "official" if you can insert it in a school envelope.

•	No YesWhich name(s)?		
On average what is a typical class size?		(#) students	

10. REACHING TEACHERS: We will need to meet with the teachers of the four identified classes to review the status of parental permission forms. To the extent that you can generalize, what are the best times to meet with the teachers? Bear in mind, we don't want to take the teachers out of their classrooms. We are talking in terms of before school, after school, or lunch periods, for the most part. We would be glad to meet with all of the teachers at the same time.

Grade (9<sup>th</sup> <u>OR</u> 10<sup>th</sup>)

Class Teacher Times

1.

2.

3.

- 11. <u>HOLIDAYS/INSERVICE/BAD DAYS:</u> To avoid any major scheduling conflicts, we would like to identify with you the best window of opportunity to administer the survey between February and April 2008. Can you please tell me any holidays, in-service days, or other days that may be particularly inconvenient for your school to participate?
- 12. <u>CONTACT PERSON</u>: We appreciate the time that you have taken out of your busy schedule to arrange the details of this study. We are extremely grateful to you and your teachers for their receptiveness and willingness to participate in the study. Do you wish to remain the contact person in your school or would you like someone else to be the contact person from now on? It is not necessary that you or your designated representative be present when the study is conducted.
- 13. <u>ALTERNATE CONTACT:</u> We would also like to identify the name and contact number for someone within the school to whom we can refer students in case they have questions or concerns about the survey or its contents. This may be your school guidance counselor or school nurse. Can you provide me with that information?

Referral Contact and Telephone:

4.

14. <u>CONFIRMATION LETTER</u>: In the next few days, a confirmation letter will be sent to you summarizing everything we have just discussed. Please read this carefully. We will enclose survey-related materials for your files. We also will send to you (or the designated contact person) a teacher packet for both of the participating classroom teachers. In addition, a package with parental permission forms and other materials will be sent to your school 2 or 3 weeks before the anticipated start of data collection. This package will include information packets for the teachers with instructions on what to do prior to arrival of the data collector. We would appreciate it if [YOU/THE CONTACT PERSON] would make sure that the packets are distributed to the teachers and that the teachers distribute the permission forms immediately.

15. importan	Are there any other special circumstances or requirements you think are t for us to know about, concerning your staff, the students, or the school premises?	
16. be sent to	Again, in appreciation of your school's participation in this study, \$500 will you following administration of the questionnaire.	
Thank you very much for your time and cooperation with us on this very important survey. Please feel free to call our toll-free hotline (800) 675-9727. You may also contact Dr. Danice Eaton at CDC. Her number is (770) 488-6143.		
Admin Use Only	:	
]	Date and Time of Call	
]	Interviewer ID	