

## **STUDENT SURVEY FACT SHEET**

**(To Be Sent With Parental Notification Form Letter)**

### ***What is the KIP Student Survey?***

The Kentucky Division of Mental Health and Substance Abuse with the support of the Governor's Office of Drug Control Policy and the Federal Center for Substance Abuse Prevention jointly sponsor this statewide student survey to assess the extent of alcohol, drug, and tobacco use among 11 to 18--year-olds throughout Kentucky and to evaluate the impact of prevention efforts aimed at reducing substance use.

### ***What is the purpose of the Student Survey?***

The Student Survey is part of the Kentucky Governor's Youth Substance Abuse Prevention Initiative (The KIP Project). Students in grades 6, 8, 10 and 12 will be asked to complete a survey that will be used for research purposes only. Their responses to the survey will be compiled to provide information to your school district about students' use of tobacco, alcohol, and drugs. It also provides information about school safety issues.

### ***Does my child have to complete the survey?***

No. Participation in the Student Survey is completely voluntary. Your child will not be penalized in any way if he/she refuses to participate. We are asking your permission for your child to participate in this survey. The survey will be conducted by program evaluation personnel and trained volunteers during a regular class period at school.

### ***Will anyone know how my child answered the questions?***

No. Your child's responses to the questions will be confidential. His or her name will not appear on the survey forms and no one except the research evaluation staff will see the individual responses. The answers from all youth participants will be summarized so it will be impossible to identify your child in the responses.

### ***What kinds of questions are on the survey?***

Examples of questions to be asked in the Student Survey are listed below by subject.

- ◆ Alcohol, tobacco, and drug use: How often (if ever) have you smoked cigarettes in the past month (30 days)? On how many occasions (if any) have you had more than a sip or two of beer, wine, or hard liquor (for example, vodka, whiskey or gin) during the last 30 days? How often (if ever) have you smoked marijuana?
- ◆ Attitudes toward alcohol and drug use: How wrong do you think it is for someone your age to drink beer, wine, or hard liquor (for example, vodka, whiskey or gin)? How wrong do you think it is for someone your age to smoke marijuana? In the past 30 days, how many times did you speak with a friend about a personal or family problem?

- ◆ Antisocial behavior: How many times in the past year (12 months) have you been suspended from school? How many times in the past year (12 months) have you taken a handgun to school?

This survey has been administered to many thousands of students across the Commonwealth and the vast majority has experienced little difficulty in answering the questions. Because answering questions about personal and sensitive behaviors can be uncomfortable, students are assured that they may skip any questions they do not want to answer. Students are also told that if, after completing the survey, they have any personal concerns, and they should talk to their school counselor, who can direct them to resources for consultation.

***What benefits are there from my child participating in this research?***

Although your child will not directly benefit from completing the survey, his/her answers—along with those of thousands of others—will provide valuable information that may be used to improve programs for youth.

***How do I give permission for my child to participate in the survey?***

If you give permission and your child agrees to participate in the survey, you do not need to do anything. Your child will be provided with a survey form during the class period designated for the survey. If you **object** to your child's participation in the evaluation survey, you must complete the attached form, sign your name in the space provided and return the form to {insert program administrator's name} at your child's school by {insert date}. If you like, you may also call {insert program administrator's name} at {insert phone number} if you have questions.