

### Parental Notification Form

Michigan Profile for Healthy Youth



Our school is taking part in the Michigan Profile for Healthy Youth Survey supported by the Michigan Departments of Education and Community Health. The research survey will ask about the health behaviors of 7<sup>th</sup>, 9<sup>th</sup>, and 11th grade students. The survey will ask about behavior and attitude related to nutrition, physical activity, injuries, tobacco, alcohol, and other drug use. It will also ask about sexual behaviors that cause AIDS, other sexually transmitted diseases, and pregnancy.

Students will be asked to complete an online survey at a private computer terminal. Participation in the survey will cause little or no risk to any student. The only potential risk is that some students might find certain questions to be sensitive. The survey has been designed to protect each student's privacy. **Students will not be asked to provide their name or any other identifying information.** Also, no school or student will ever be mentioned by name in any reported results. The results of this survey will help students in the future. We would like all selected students to take part in the survey, but **the survey is voluntary.** No action will be taken against the school, you, or the student if the student does not participate. Students can skip any question that they do not wish to answer. In addition, students may stop participating in the survey at any point without penalty.

The surveys are available at the school for your review. If you have any questions please contact

\_\_\_\_\_ at \_\_\_\_\_.

If you object to your child's participation in the survey, please complete the form below. **You only need to return this form if you do not give your child permission to take the survey.** Please see the other side of this form for more facts about the survey. Thank you.

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Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

I have read and understand this form concerning the MiPHY Project.

[  ] My child **does not** have my permission to participate.

Parent's Signature: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Date: \_\_\_\_\_

***Note: You DO NOT need to return this form if you give your child permission.***

## Michigan Profile for Healthy Youth (MiPHY) Survey

### Fact Sheet for Parents/Guardians

**Q. Why is the survey being done?**

A. The Michigan Departments of Education and Community Health have provided this survey as a means for local school districts to assess student needs and develop education programs and other strategies to help reduce health risk behaviors.

**Q. What kinds of questions are asked on the survey?**

A. The MiPHY includes questions about a range of health risk behaviors and attitudes that can lead to serious health problems.

**Q. Are sensitive questions asked?**

A. Some questions may be considered sensitive. The only way to determine the extent to which adolescents are at risk, however, is to ask questions about these behaviors. Questions are presented in a straightforward and respectful manner and those that focus on risk behaviors always begin with an abstinence or non-use answer choice. In addition, students always have the option to skip questions.

**Q. Will student participation be anonymous? Will student privacy be protected?**

A. Yes. Survey administration procedures have been designed to protect student privacy and allow for anonymous participation. Students will not enter their names or other identifying information at any point during this survey.

**Q. Will students be surveyed again to see how their behavior changes?**

A. No. It will be impossible to track students who participate because no identifying information will be collected.

**Q. How was my child selected?**

A. Students in grades 7, 9, and 11 are randomly selected and invited to participate in the survey.

**Q. How long will it take to fill out the survey?**

A. It will take approximately one class period to complete the online, multiple-choice survey.

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