

# Milwaukee 2019 District-Level YRBS Results (MPS Middle School Version)

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# REPORT OVERVIEW

## Who Took The Survey?

Both the State Youth Risk Behavior Survey (YRBS) and National YRBS are based on a scientific sample of students in all eligible grades. For local YRBS surveys, such as this, schools were strongly encouraged to administer the survey on a school-wide basis to all grades (i.e., on a census basis). However, some schools opted to survey only select grades.

While surveying based on convenience is appealing to many schools, there are tradeoffs in terms of data quality. If the district had a relatively low response rate, or if certain groups of students were systematically excluded, the quality of the results could suffer.

All participating schools with 20 or more responses are being provided with their school-level results, regardless of response rates or grades surveyed. Additional district-level reports, such as this, are available for all districts in which more than one school took the relevant version (high school or middle school) of the YRBS. The indicators below are intended to help districts, schools and other YRBS stakeholders self-assess the quality of their data and, if necessary, work towards improvements in future rounds of data collection.

### SCHOOL PARTICIPATION WITHIN DISTRICT

Number of public schools in district with any of grades 6-8: **84**

Number of schools participating: **72**

*(Note: This is the number of school officially registered. If a YRBS coordinator only registered a school with grades 7 and 8, but then also administered the survey using the same credentials to the 6th graders in a companion school, it may look like only one school participated when in fact the survey was administered across two schools. If, in the same scenario, the school with grade 6 was registered separately from the school with grades 7 and 8, then both schools would be counted towards the number of schools participating.)*

### SURVEYED GRADES AND RESPONSE RATES

Below is a summary of participation by grade level.

#### Grade 6 Participation

Number of schools surveying grade 6: 71

Grade 6 response rate: 72%

Grade 6 participation level: Strong (70% or higher)

#### Grade 7 Participation

Number of schools surveying grade 7: 69

Grade 7 response rate: 70%

Grade 7 participation level: NA

#### Grade 8 Participation

Number of schools surveying grade 8: 69

Grade 8 response rate: 70%

Grade 8 participation level: NA

### Overall Participation

Total number of usable surveys: **11148**

*(Note that this might be slightly lower than the number of students offered the survey.)*

Percent of middle schoolers in district participating: **70%**

Overall participation level for middle school students: **NA**

**OPTIONAL MODULES** Schools could select one of four content-based optional modules if they so desired, as well as a four question high risk groups “mini module” with demographic questions. District-level results are included if all schools within a district selected the same optional module and/or mini module.

Optional module data available in this report: **No optional modules selected district-wide**

Mini “high risk” module selected by all schools? **No**

If only some participating schools in the district selected an optional module, results are available in the school-level reports. Below is a count of the number of schools that selected each optional module.

Number of schools selecting optional module 1: 0

Number of schools selecting optional module 2: 0

Number of schools selecting optional module 3: 0

Number of schools selecting optional module 4: 0

Number of schools selecting high risk mini-module: 0

## What's In This Report?

This report is organized by YRBS topic area. Each topic area contains key charts that highlight a few questions from that topic area, plus a narrative overview of other key data pieces.

**Topic Areas** contain bar charts of key questions for:

- The relevant student population overall
- Breakdown by sex (male/female)
- Breakdown by grade level

Topic areas may also contain some narrative providing an overview of any other relevant questions.

**Higher Risk Populations At A Glance:** Provides bar charts of four key questions comparing certain vulnerable or higher risk student populations to their peers. The four questions include: mental health concerns, bullying, sense of school belonging, and having a teacher to talk to.

These questions were selected for two reasons: 1) they are particularly salient to schools and focus on things that schools may be able to address, either in whole or in part; 2) a high percentage of students overall experience these indicators, which makes it more likely that there will be enough data to disaggregate by the selected student populations. Low prevalence questions, such as drug use, are less likely to produce enough data for this purpose at the school or even district level.

All middle school surveys will have information on three higher-risk populations: food insecure students, students of color, and students with low grades. That is because the questions on food security, race/ethnicity and average grades are on the standard middle school survey. In addition, schools could opt for a “high risk groups optional module”. Schools that included that module in their survey will also have data on LGBT students, students with physical disabilities or chronic health conditions, and students with special education services.

Additional information for each high risk population is covered in the detailed data tables in the appendices.

**Question-Specific Tables:** The appendices contain detailed, question-by-question tables that provide YRBS numbers for students overall and by subgroup. To keep the report a reasonable length, not all questions have charts in the topic area section. If you don't see a chart of the question you're looking for, please look the number up in the question-specific table.

**Optional Modules:** The local YRBS was standardized to allow for consistent and stable comparisons across middle schools. In order to still allow some customization, schools were allowed to choose one additional optional module if they desired. If all schools in the district selected an optional module, data from that module appears in this section.

## ANSWERS TO COMMON QUESTIONS

**Why is data for that question/subgroup missing?** There are a few reasons why data for a particular group—or an entire question covered in this report—might be missing:

If the school opted not to survey a given grade, then responses for that grade will be listed as 0 and/or not displayed in charts. If the exclusion of that grade meant that certain subgroups were missed altogether (e.g., the school has only 4 Hispanic/Latino students and they were all in grades not surveyed), then tables for that subgroup will also indicate that it is missing.

If the numbers reported for a question or subgroup were too small to report, data will not be displayed. When a subgroup is missing from a chart, or you see “–” in a table, that might be due to small numbers. This is calculated for each question. Therefore, both the size of the student respondent population (or subpopulation) and the likelihood of the risk behavior will play a role in which data are reportable. Large, diverse schools with a high response rate might be able to see breakdowns of the data for rare risk behaviors, while very small schools might not be able to see data on some common risk behaviors.

The YRBS asks students to honestly and anonymously report on highly sensitive information. When very few students report a risk behavior, there are both privacy protection and data quality reasons not to report such numbers. From a privacy standpoint, reporting small numbers at the school, district, or even county level might make it easy to guess (correctly or incorrectly) a student's identity. DPI policy requires redaction of such small numbers, particularly for sensitive questions or topics. From a data quality perspective, small numbers are inherently unstable.

Small schools are statistically more likely to have more such redaction. This means that small schools may see lots of “–” and missing bar chart columns in their reports. Note that:

- The redaction itself is informative in that it means very few students reported the risk behavior.
- The redacted information from small schools is part of district reports such as this, as well as county-level reports (where available). Thus, the data are still used to produce local YRBS numbers, even if it doesn't show up at the school level. (Note that very small numbers are still redacted in district and county-level reports, but the greater number of student responses means that small numbers are less likely to be a problem at this level.)
- If numbers for a given behavior and/or subpopulation still do not appear in district or county-level reports, refer to neighboring county numbers and/or the statewide numbers instead. While they may not be an exact match for your school, they can provide a guidepost for the likely prevalence in your area.

### **Where does the information come from?**

All data in this report comes solely from the YRBS survey. Some of the YRBS questions ask students to self-report on information that is also maintained by the school (e.g., grade level, race, sex, special education status and academic grades), or by other organizations such as health care systems (e.g., asthma, concussions, mental health). However, none of the information used here comes from any identifiable data source. Because the survey is confidential and anonymous, there is no way to get such information from schools, and no attempt is made to do so. Similarly, the YRBS includes questions that ask students whether or not they have certain medical conditions (e.g., asthma) or whether they have experienced symptoms that describe depression or anxiety. The responses are student self-reports of medical or psychological conditions, rather than professionally verified diagnoses. The integrity of the YRBS depends on keeping responses entirely anonymous and confidential. To help the reader know that information is based on student self-reported YRBS answers, rather than school or health care records, sometimes charts are explicitly labeled “Self-Reported”. However, all questions are self-reported, even if the chart or table does not explicitly say “Self-Reported”.

**Is the data high quality?:** The YRBS is a reliable and valid survey instrument used across the country for over 20 years. Wisconsin does not currently collect official, state-level YRBS data at the middle school level. However, as is true of the high school survey, Wisconsin's 2019 Middle School YRBS is based on the Centers for Disease Control and Prevention's (CDC's) official Middle School YRBS. In addition, the information prepared for this report follows CDC protocol in applying numerous data quality checks, which are used to identify and remove likely invalid responses. These checks help to ensure that the data used for reports are as clean as possible.

The conditions under which a survey is taken can affect data quality. If a school and/or district has substantially fewer usable surveys than students who were offered the survey, that indicates either that many students failed to answer questions, or that their answers were consistently flagged as likely to be invalid. If this is the case for your school, you may want to consider tweaking your survey administration methods to make sure that students are not rushed and also that they have

confidence that no one can see their screen. Guidance for administering a high quality local YRBS is provided on the “Conducting A YRBS” webpage.

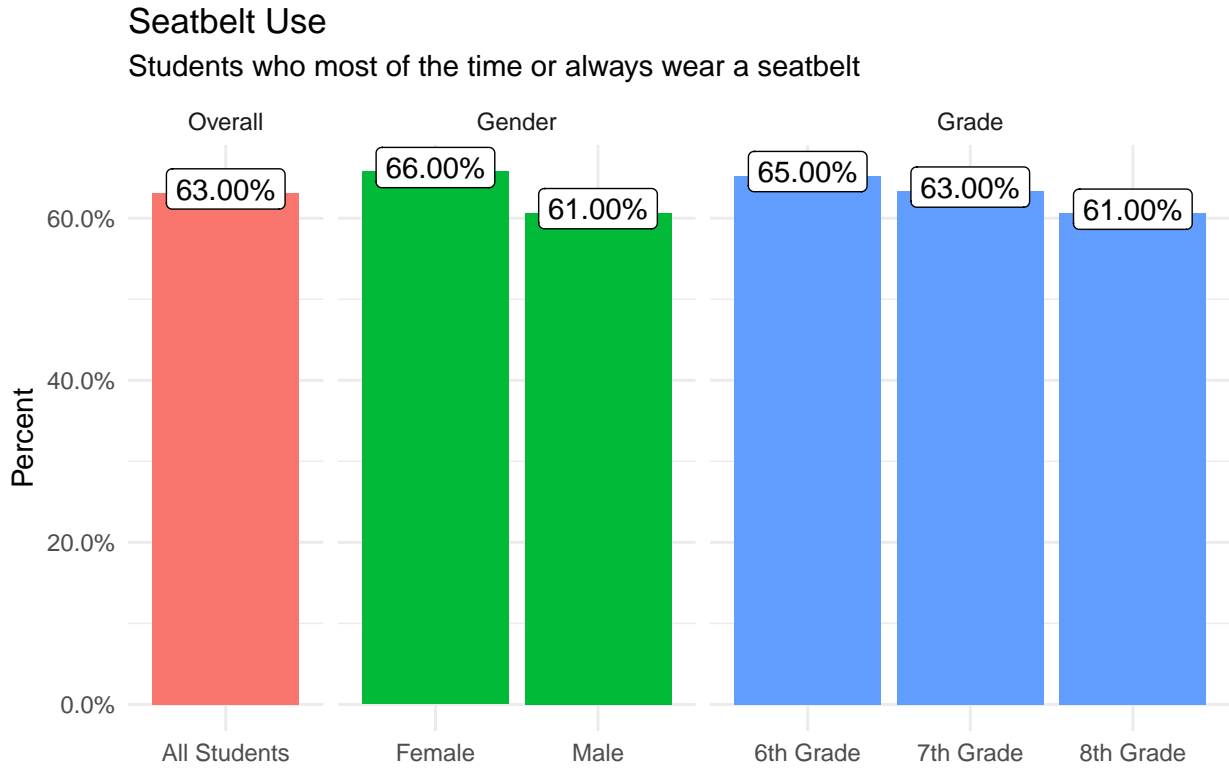
## **Report Version**

This report was updated on September 19, 2019.



# MOTOR VEHICLE AND BICYCLE SAFETY

## Seatbelt Use



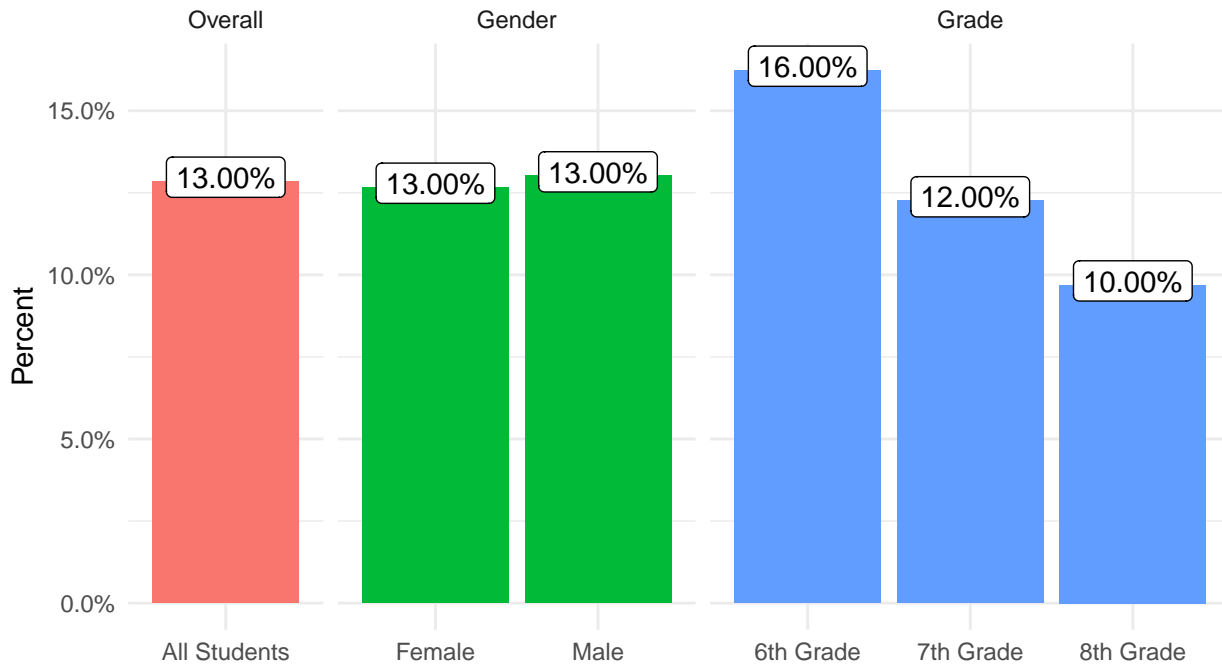
Missing bars mean numbers are too small to report

16% of students said that they never or rarely used a seatbelt.

## Helmet Use

### Bicycle Helmet Use

Bicycle riders who most of the time or always wear a helmet



Missing bars mean numbers are too small to report

The middle school YRBS asks students “How often do you wear a helmet when riding a bicycle?” Students who answered “I do not ride a bicycle” were excluded from the analysis. The chart above shows helmet use among students who answered that they used a helmet “most of the time” or “always”. Other answers included “sometimes” or “never”. **73%** answered that they “never” wear a helmet when riding a bicycle.

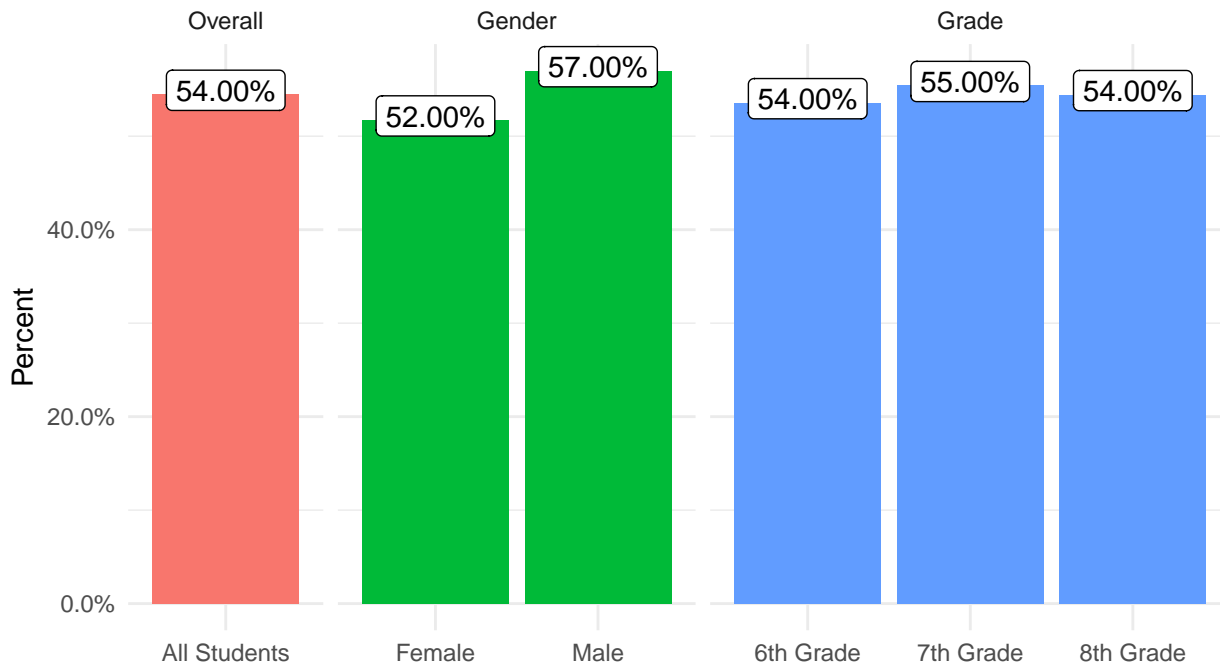
## SCHOOL SAFETY

### Perceptions of safety

How safe do students feel at school? The charts in this section show students' perceptions of their own physical safety as well as the general issue of violence as a problem at their school.

#### Feel Safe At School

Students who most of the time or always feel safe at school

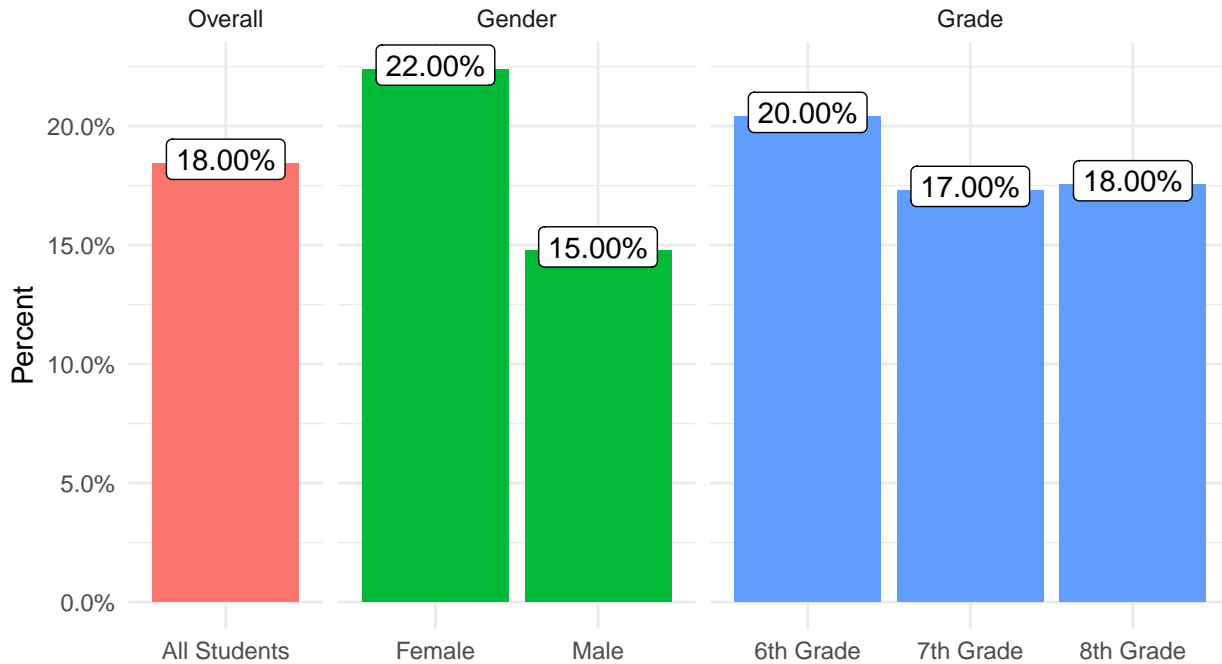


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19% of students said that they rarely or never feel safe at school. Perceptions of safety are often highest among students with higher status and lower among students of color, students with disabilities, and LGBT students. If this school selected the “high risk optional module”, information for those subpopulations will appear at the end of this report.

### Safety and Attendance

Students who missed school because they felt unsafe (past 30 days)



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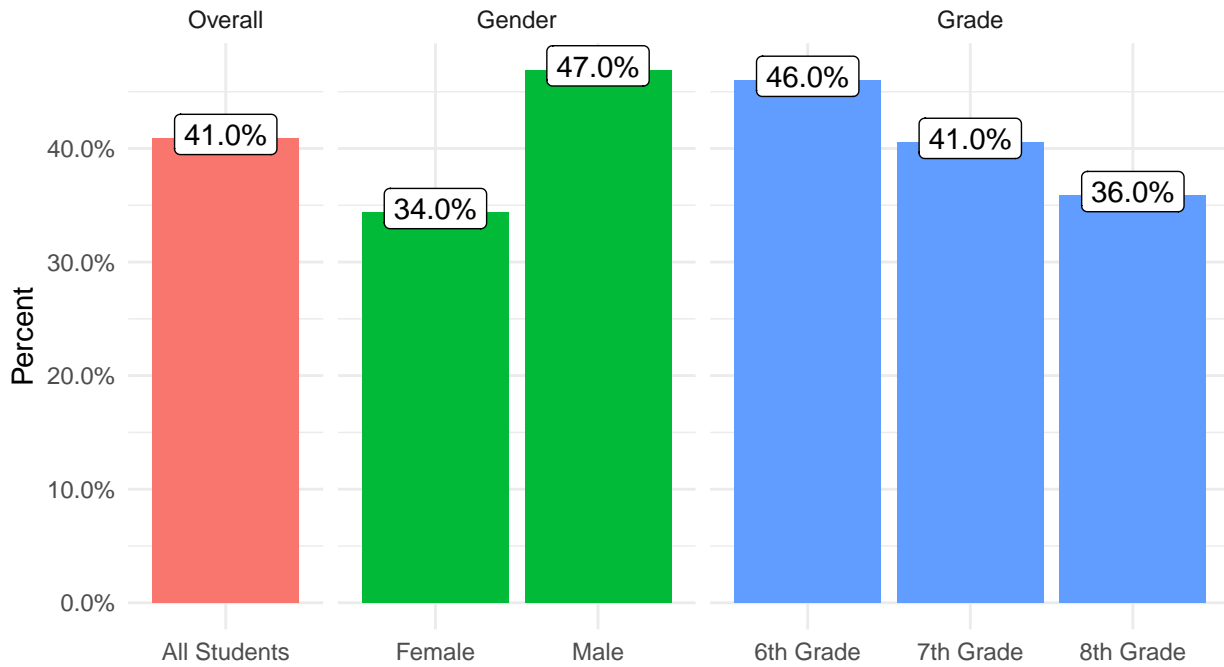
A perceived lack of safety can affect school performance and school attendance. The chart above shows the percent of students who reported missing one or more days of school because of safety concerns either at school or en route to school. To see differences by subgroup, refer to the question-specific tables.

## Violence and Weapons At School

The middle school survey includes two questions related to violence and weapons at school.

### Fight at School

Students who were in a physical fight at school (past 12 months)



Missing bars mean numbers are too small to report

The chart above shows students who answered that they had been involved in one or more physical fights on school property in the past 12 months.

Students were also asked whether they had carried a weapon such as a gun, knife, club or other weapon on school property in the past 12 months. 8% said that they had done so one or more times in the past 12 months.

To see more information on each of these questions, refer to the question-specific tables.

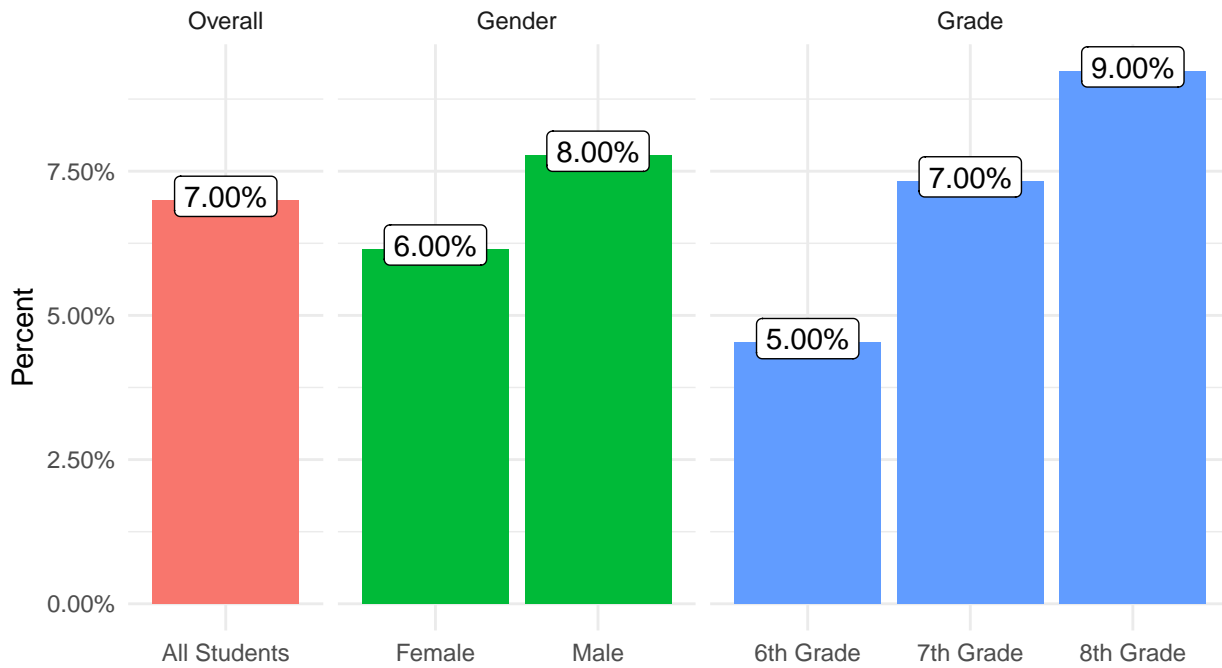
For information and resources on school-based violence prevention, see DPI’s Safe Schools resources: <https://dpi.wi.gov/sspw/safe-schools>.

## Drugs at School

The YRBS asks students two questions about drugs at school: whether they had acquired drugs at school during the past 12 months, and whether they had attended school under the influence of drugs or alcohol during the past 12 months.

### Drugs At School

Were offered, sold, or given drugs on school property (past 12 months)



Missing bars mean numbers are too small to report

See DPI's Alcohol and Other Drug Addiction (AODA) webpage for information, tools and resources: <https://dpi.wi.gov/sspw/aoda>.

## **SCHOOL CLIMATE**

Closely related to school safety is the broader issue of school climate: whether students feel a sense of inclusion and engagement in their school. All YRBS surveys included some questions on school climate, which are reported in this section. Schools that opted for the “School Climate” optional module will find results from those questions at the end of this report.

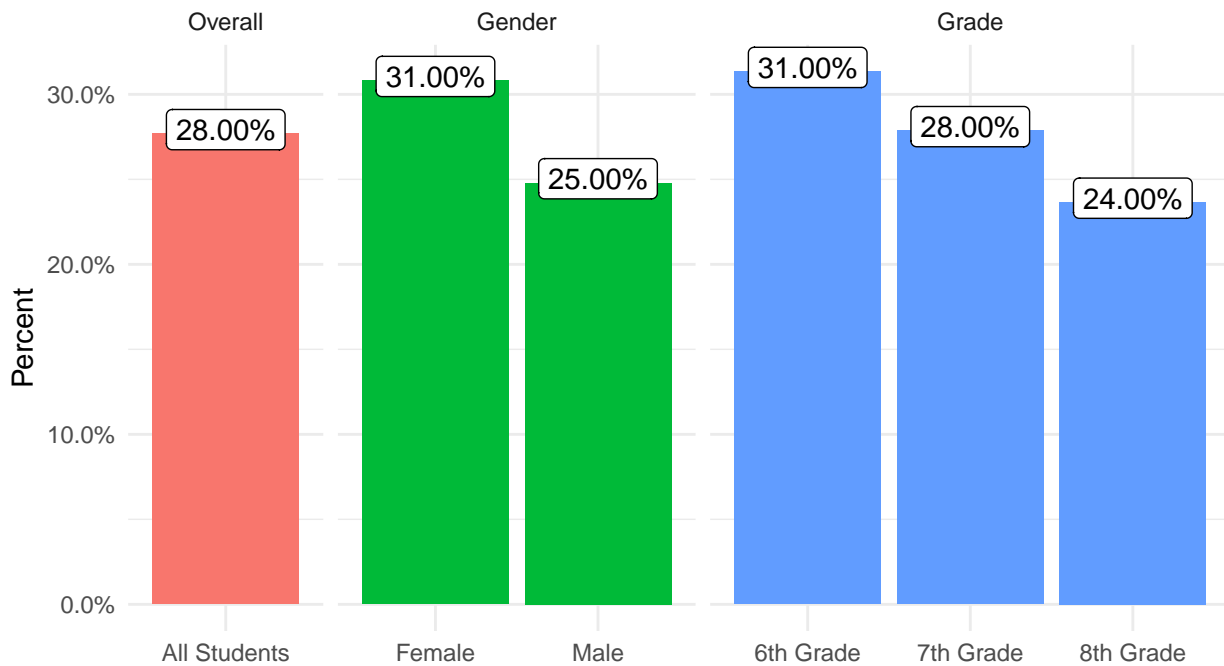
This section covers questions on bullying, belonging, and supportive adults at school.

## Bullying

Students were asked three questions on bullying: whether they have been bullied at school in the past 12 months, whether bullying is a problem at school, and whether they have been electronically bullied (at school or elsewhere) during the past 12 months. The questions do not ask about the frequency or intensity of the bullying; only whether or not it had occurred.

### Bullied At School

Students who experienced bullying at school during the past 12 months



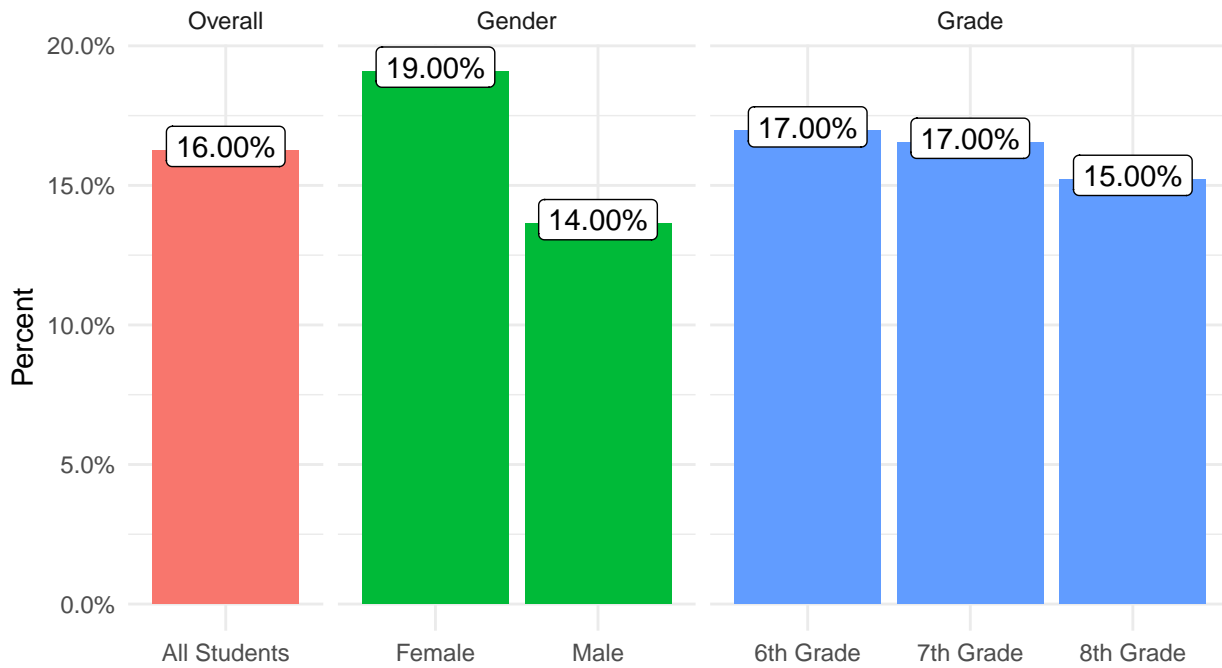
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Oftentimes students who are bullied at school are also bullied online.



### Bullied Online

Students who were electronically bullied (past 12 months)



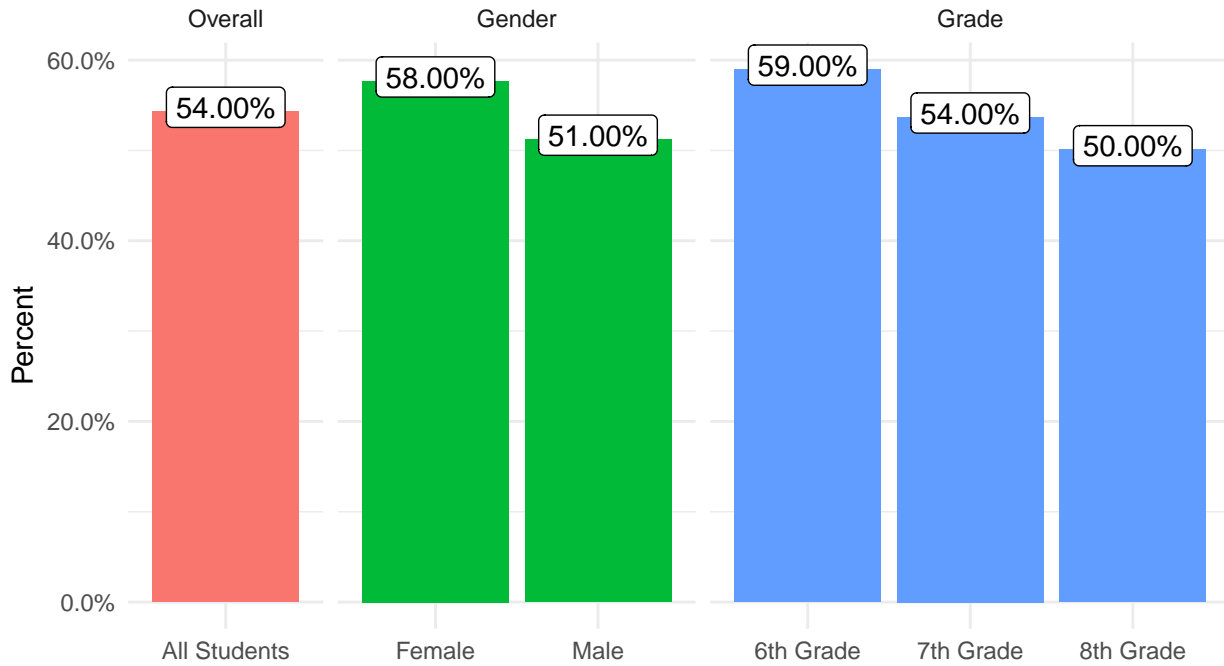
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Overall, **34%** experienced bullying either at school, online, or in both forms.

Regardless of whether or not they themselves have been bullied, students may have perceptions of how pervasive and harmful bullying is at their school. Overall, **54%** of students agreed or strongly agreed that bullying was a problem at their school.

### Bullying Is A Problem

Students who agree or strongly agree that bullying is a problem at their school



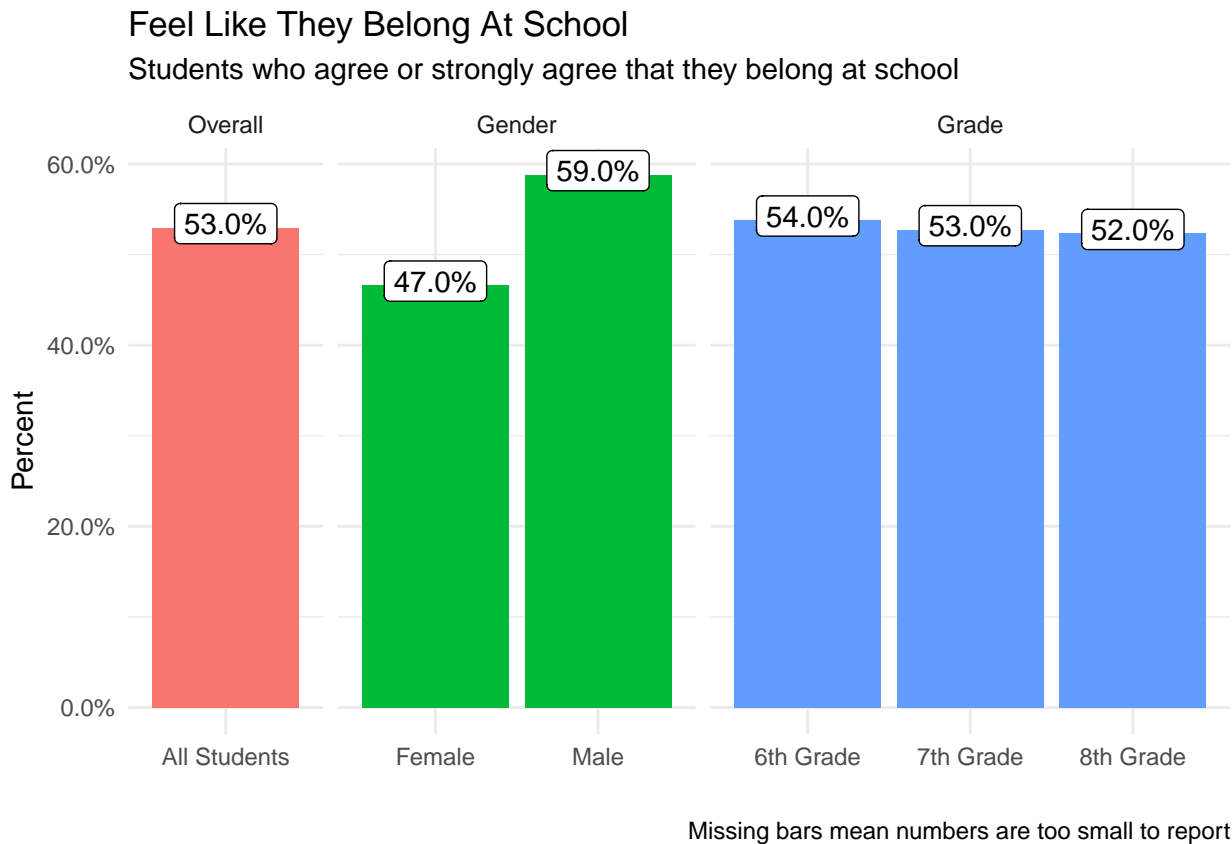
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See DPI's Bullying Prevention webpage for information and resources on bullying prevention: <https://dpi.wi.gov/sspw/safe-schools/bullying-prevention>.

## School Connectedness

Students who feel connected, included, and engaged at school generally do better academically and socially. Strong school connectedness can also buffer young people against anxiety, depression, and peer pressure.

The chart below shows how students responded to a question asking them to what extent they “feel like [they] belong at this school”.



**15%** of students responded that they did *not* feel like they belonged at their school (e.g., either disagreed or strongly disagreed with the statement), while some students indicated that they were “not sure”.

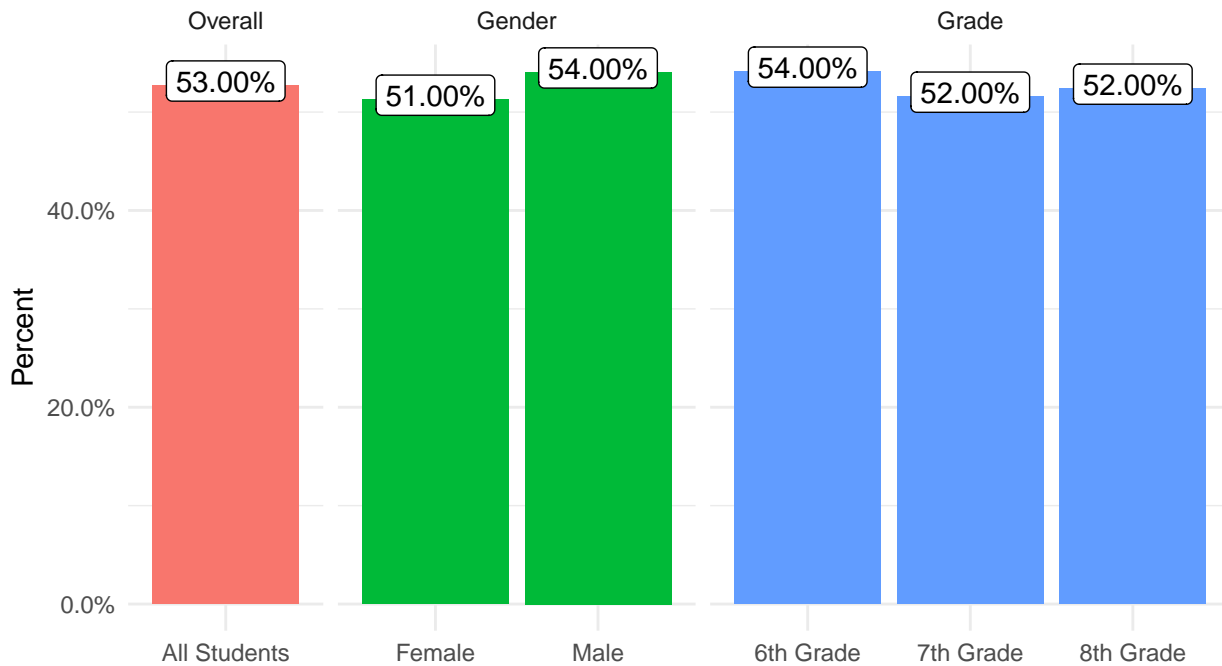
The section on “Protective Factors” provides additional information on school belonging. Similarly, the section on “Higher Risk Populations At A Glance” shows how this sense of belonging breaks down for different groups of students.

While higher risk groups often report a lower sense of belonging, teachers, administrators, and classmates within a school can have a tremendous impact on how included or excluded such students feel.

Extracurricular activities can play a key part in students’ sense of school connectedness and make them more likely to graduate (see e.g. Putnam 2015). The middle school version of the YRBS asks students whether they participate in “any school activities, such as sports, band, drama, or clubs”. The chart below shows students who answered “yes”.

## Extracurriculars

Students who participate in school activities, teams, or clubs



Missing bars mean numbers are too small to report

Research indicates that:

- Being engaged in sports, drama, or other extracurricular activities can play a positive role in students' mental and physical health, as well as academic outcomes.
- At the same time, such activities are often out of reach for students with the greatest needs. Students from economic disadvantage, as well as those with trauma, face greater barriers to such participation.

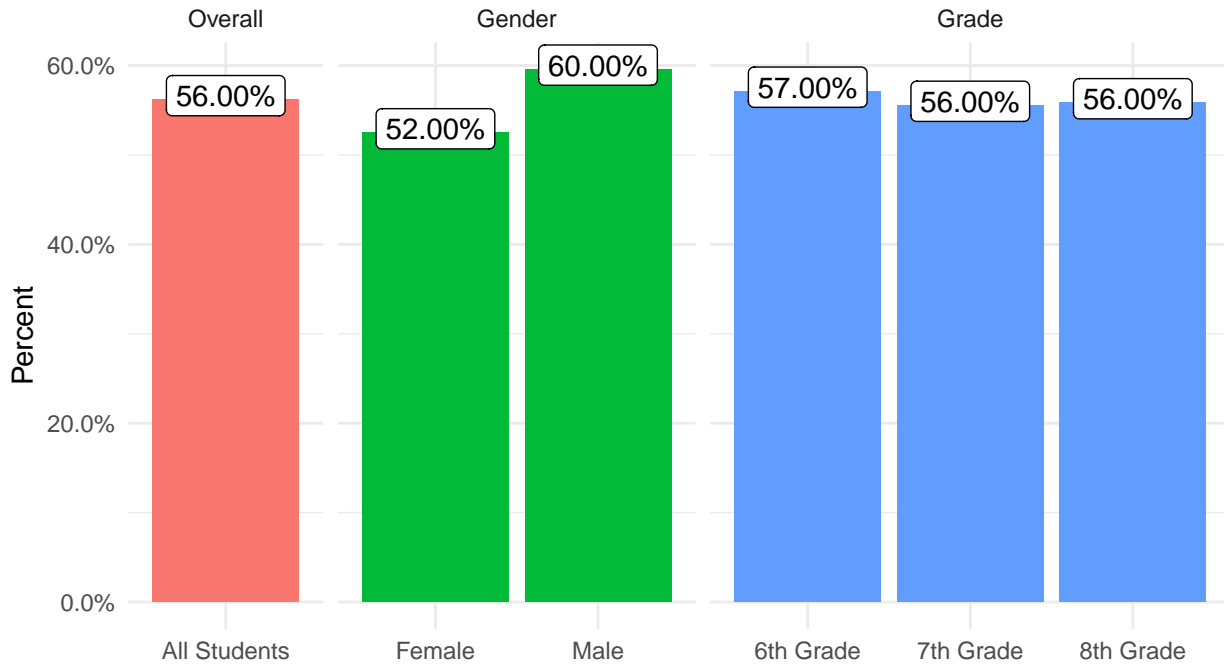
Schools can help by removing even minor economic barriers to participation (such as fees or gifts that students are asked to provide teammates before games), actively recruiting less-involved students, and trying to learn more about other reasons for non-participation. For more information, see the works by Putnam and Paluch et al. in the selected references section.

## Connections to Staff

Strong, positive connections to adults are a protective factor for both educational and health outcomes. Whether or not young people feel supported by, and connected to, teachers and other school staff, can make a big difference in the short and long-term (see e.g. the references to Centers for Disease Control and Prevention 2009; Putnam 2015, Tough 2018, and Steiner et al 2019 in the "Selected References" section).

### Teachers Care

Students who agree/strongly agree that teachers care about them

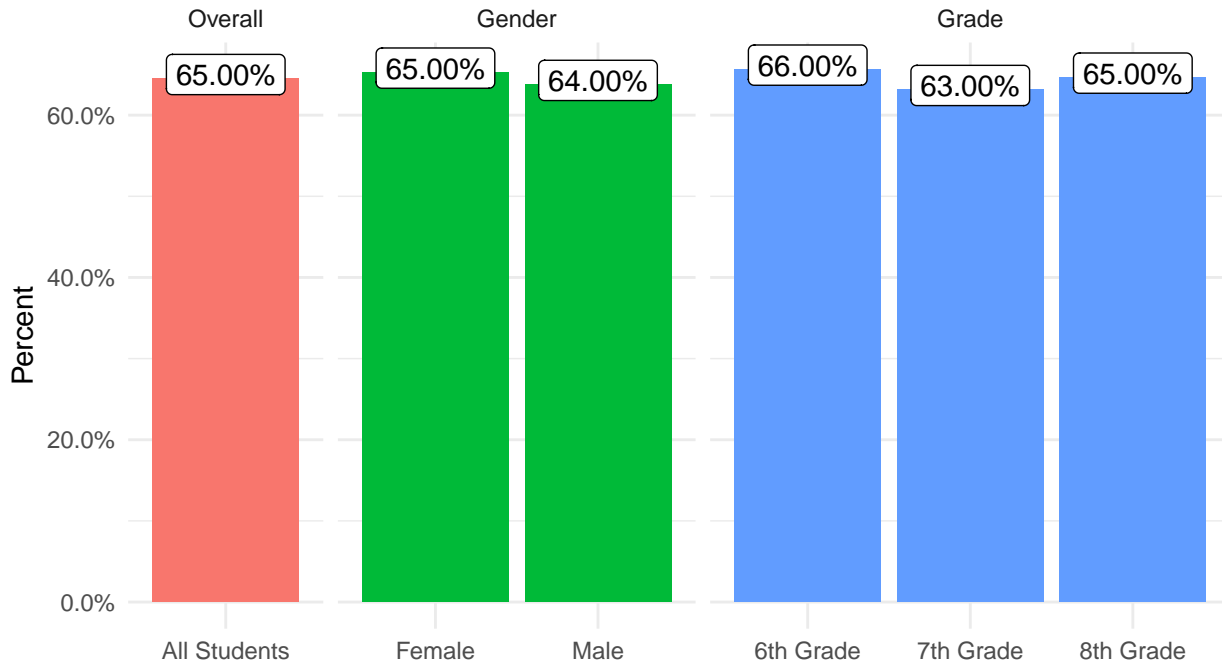


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Students who believe that their teachers care about them are more likely to stay in school and be invested in their education. Another factor that can make a tremendous difference for students' school experience is whether or not they have at least one trusted adult at school. The chart below shows results for this question.

### Have a Teacher They Can Confide In

Students who have at least one teacher or other adult at school to talk to



Missing bars mean numbers are too small to report

14% of students said that they did not have a teacher or other adult at the school with whom they could talk about a problem. Schools can make special efforts to connect staff with those students who may feel more isolated or marginalized.

# MENTAL HEALTH AND WELLBEING

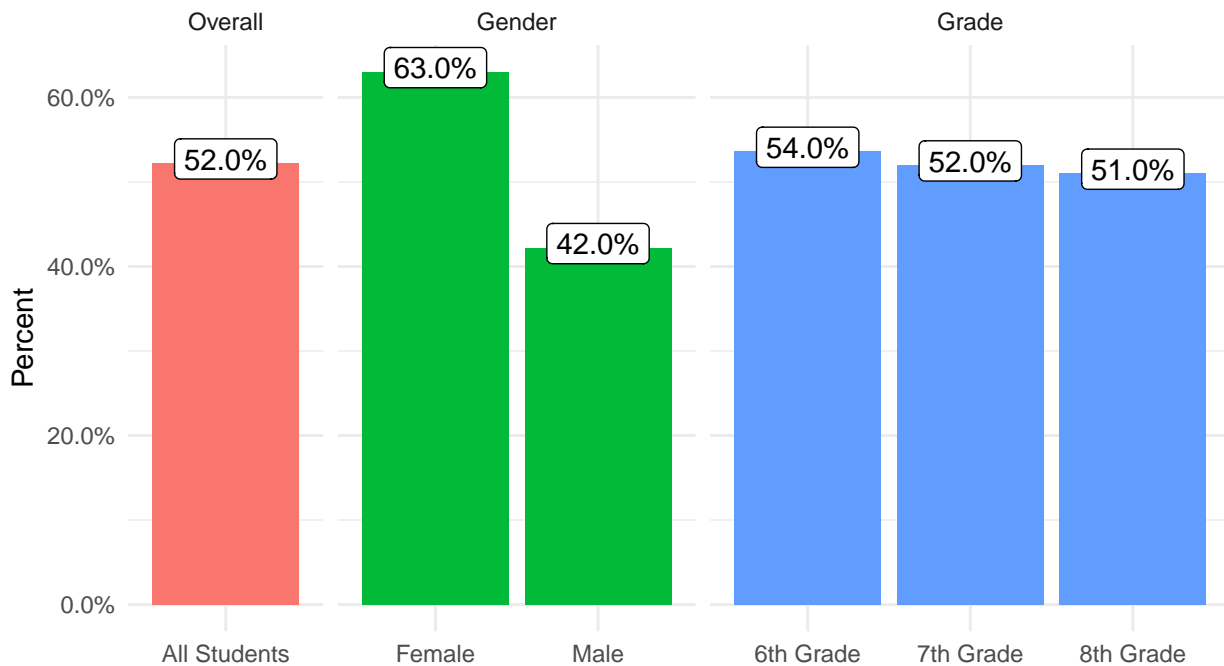
Students were asked about their mental wellbeing over the past year, as well as any experiences harming themselves or considering or attempting suicide.

## Anxiety, Depression and Self-Harm

Students were asked two questions about whether they had experienced “significant problems” due to anxiety or prolonged sadness. They were not asked whether they had a mental health diagnosis. Students were also asked about non-suicidal self-harm.

### Self-Reported Anxiety

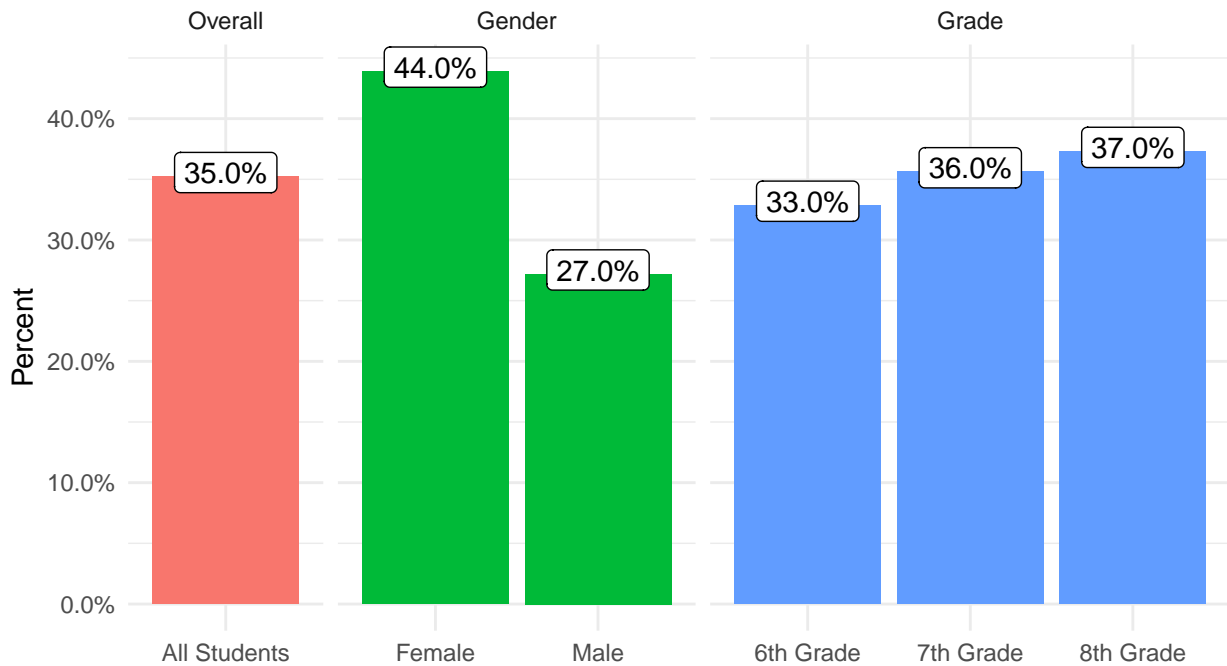
Students who had experienced significant problems with anxiety (past 12 months)



Missing bars mean numbers are too small to report

## Self-Reported Depression

Students who experienced prolonged, disruptive sadness (past 12 months)



Missing bars mean numbers are too small to report

The question on self-reported depression asked whether students had felt “so sad or hopeless almost every day for two weeks or more in a row that [they] stopped doing some usual activities” within the past 12 months.

In general, self-reported rates of anxiety and depression were higher for students who:

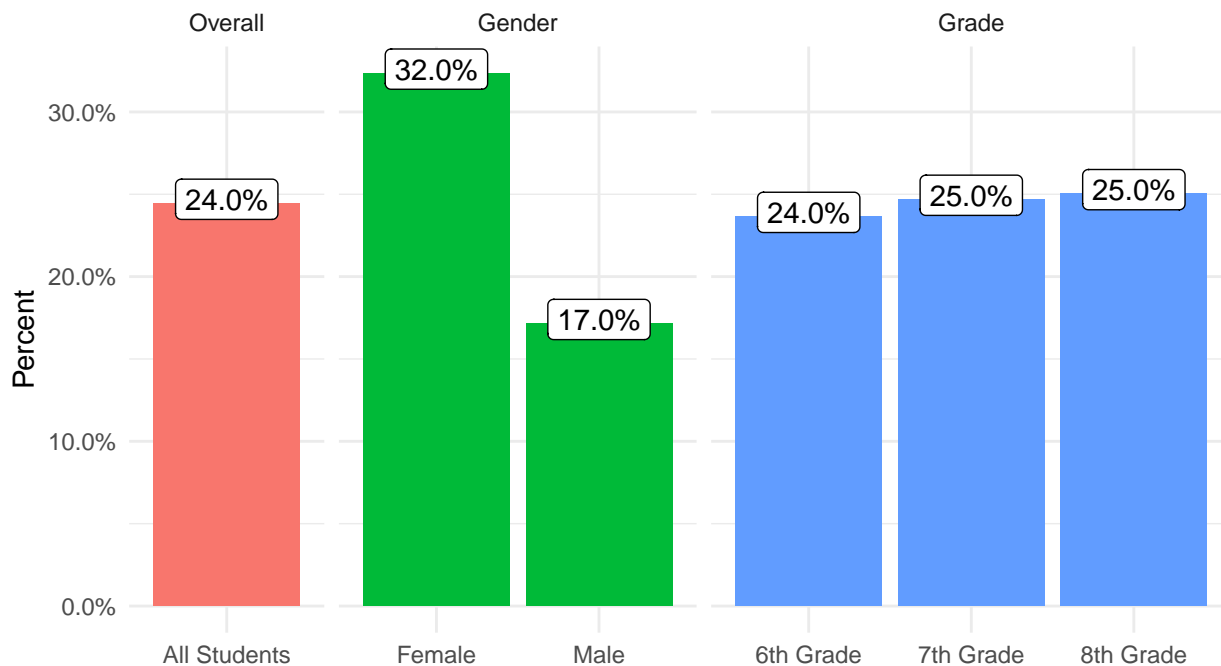
- had a low sense of school belonging
- had experienced bullying, violence or trauma
- had low grades
- had anything else that set them apart from their peers, including race, class, sexual orientation and disability

Specific rates for subgroups can be found in the “Higher Risk Populations At A Glance” section and in the question-specific tables at the end of this report.



## Self-Harm

Students who intentionally self-harmed without intending to die (past 12 months)



Missing bars mean numbers are too small to report

Students also reported on whether or not they had engaged in non-suicidal self-harming practices during the past year. **24%** of students reported having engaged in a self-harming practice at least once.

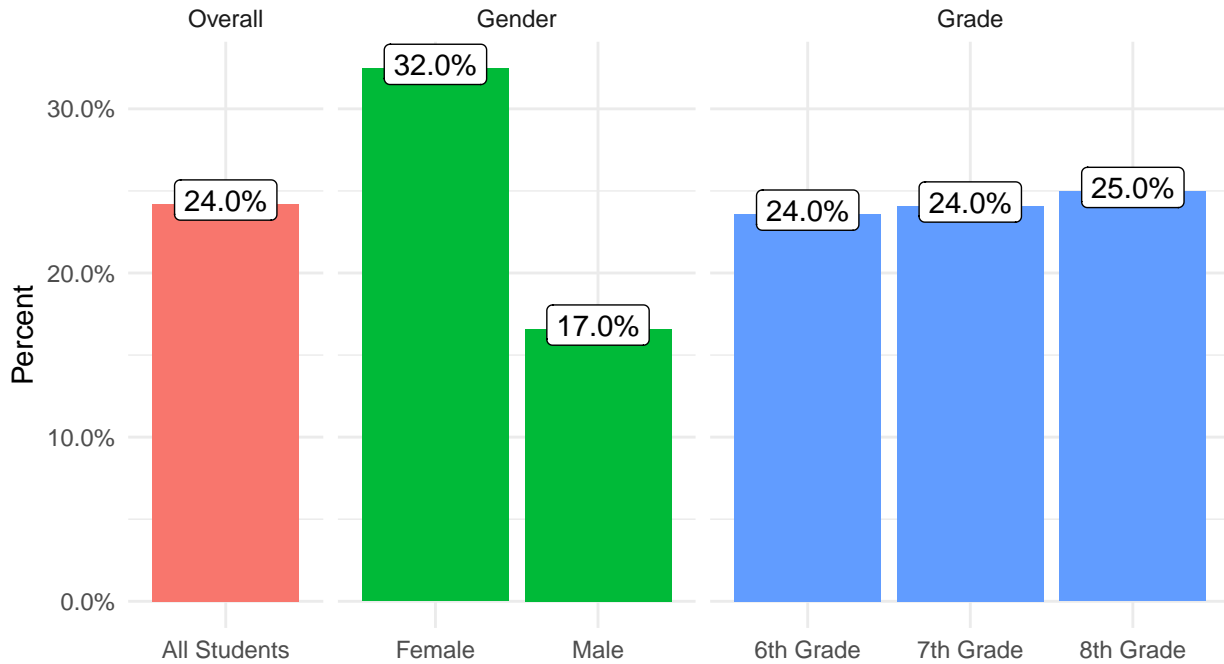
Overall, **66%** answered affirmatively to at least one of the questions about anxiety, depression, or self-harm.

## Suicidal Thoughts and Behavior

In recent years, youth suicides and suicidal ideation have been on the rise (see e.g. Ruche et al). The YRBS asks students whether they have seriously considered, planned, and attempted suicide.

### Considered Suicide

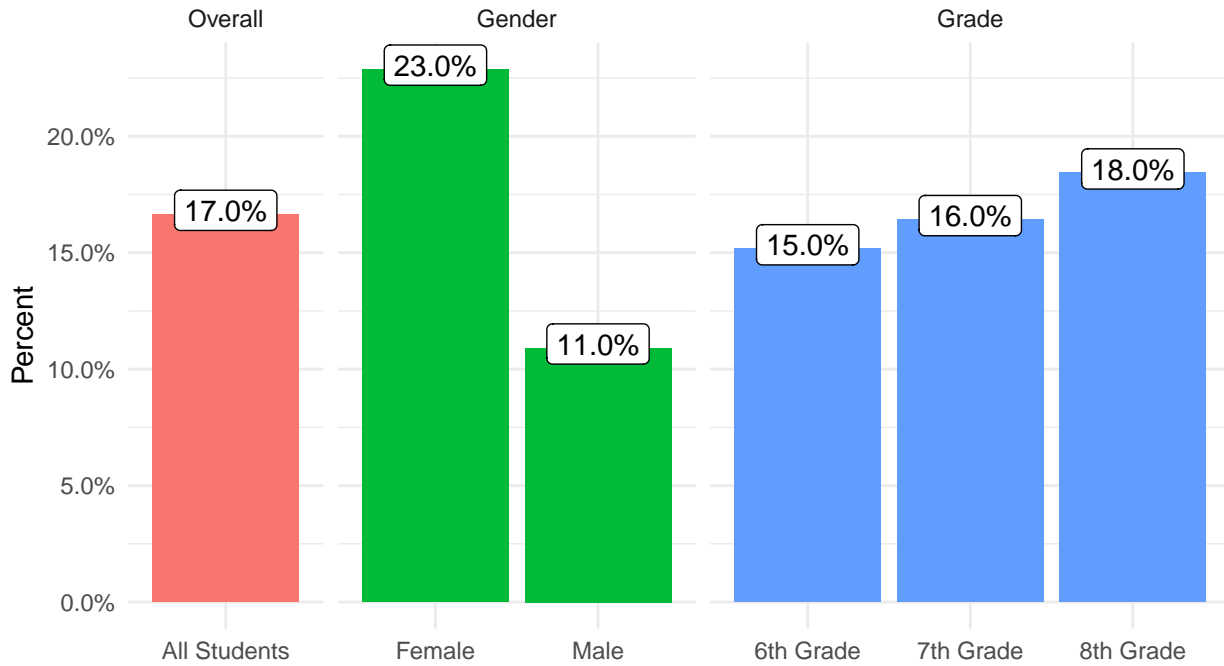
Students who seriously considered suicide (past 12 months)



Missing bars mean numbers are too small to report

### Had a Suicide Plan

Students who made a plan for a suicide attempt (past 12 months)



Missing bars mean numbers are too small to report

**17%** of students have made a plan about how they would attempt suicide.

**12%** of students have attempted suicide. See the appendix for more detailed tables on suicidal planning and attempts.

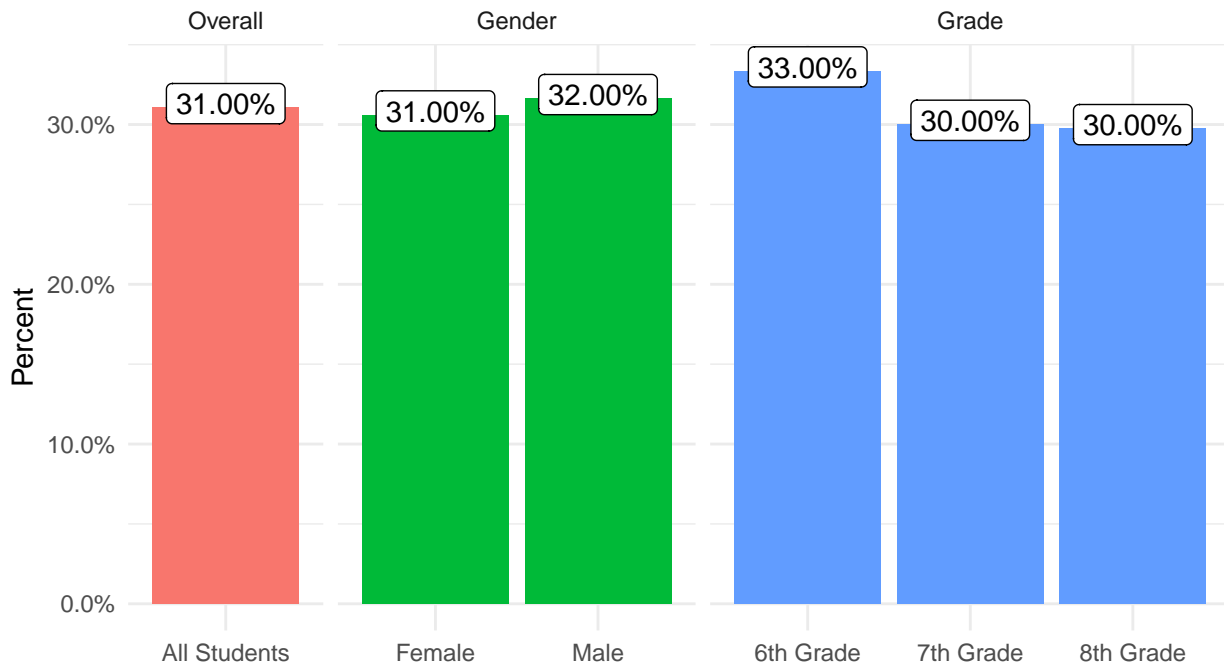
DPI offers schools a number of resources for suicide prevention and postvention, including trainings and curricula. Suicide prevention resources are available at: <https://dpi.wi.gov/sspw/mental-health/youth-suicide-prevention>

## Help-seeking and Supports

Students were asked general questions about access to emotional supports. The questions were not specific to suicide or any mental health condition. The chart below shows the percentage of students who agreed that they “get the help they need” when they are in emotional distress.

### Emotional Support

Students who most of the time or always get emotional help when needed



Missing bars mean numbers are too small to report

Conversely, **43%** of students said that they rarely or never get the help they need.

Students were also asked whom they rely on for emotional support through the following question: “When you feel sad, empty, hopeless, angry, or anxious, with whom would you most likely talk about it?” Students could only pick one response, so selections may represent students’ most frequent or otherwise primary (but not necessarily exclusive) source of support.

### Who Do Students Turn To For Emotional Support?

ADULT (parent, teacher or other adult): **41%**

PEER (friend or sibling): **37%**

NOT SURE: **22%**

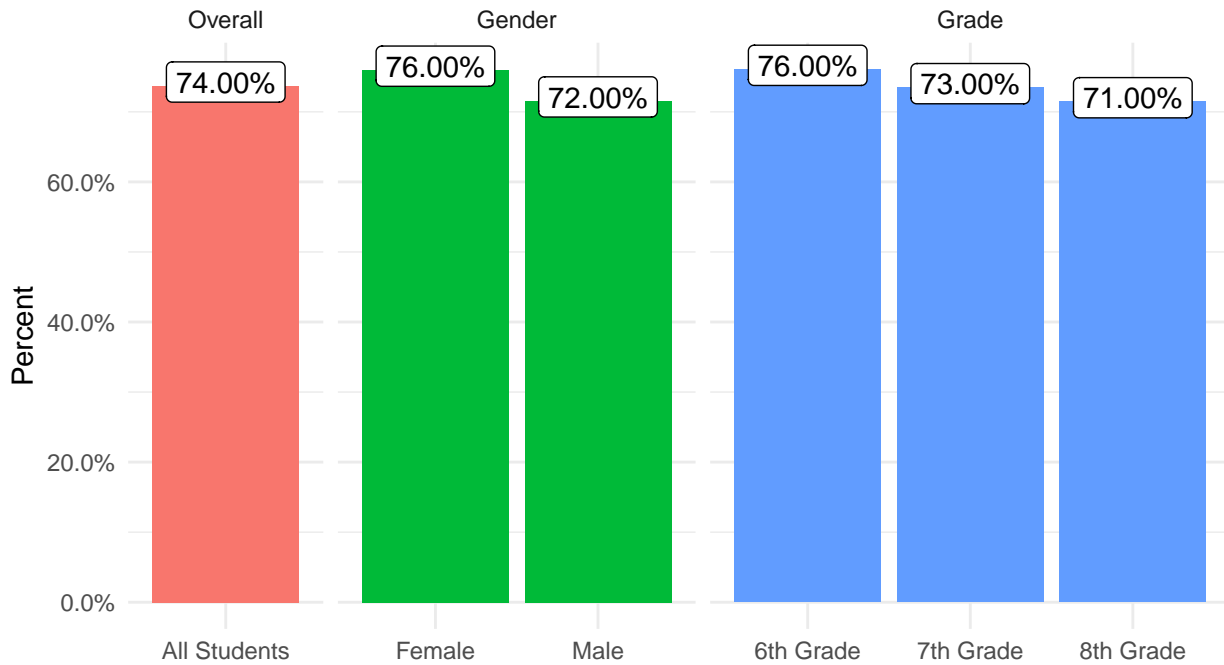
Peers are often an important source of support for students. Peer-based programs seek to leverage this natural support by helping young people help one another. Evidence-based, peer-supported programs in suicide prevention, bullying prevention, and other areas can be an important tool for schools and communities.

Supportive adults are a vital resource in a young person’s life. Parents are a primary source of support for many young people. Having other supportive adults is also important. Students were

asked how many adults besides their parents they could speak with about an important question affecting their life. The chart below shows students who had at least one such adult.

### Have a Supportive Adult

Students who could turn to at least one adult besides parents



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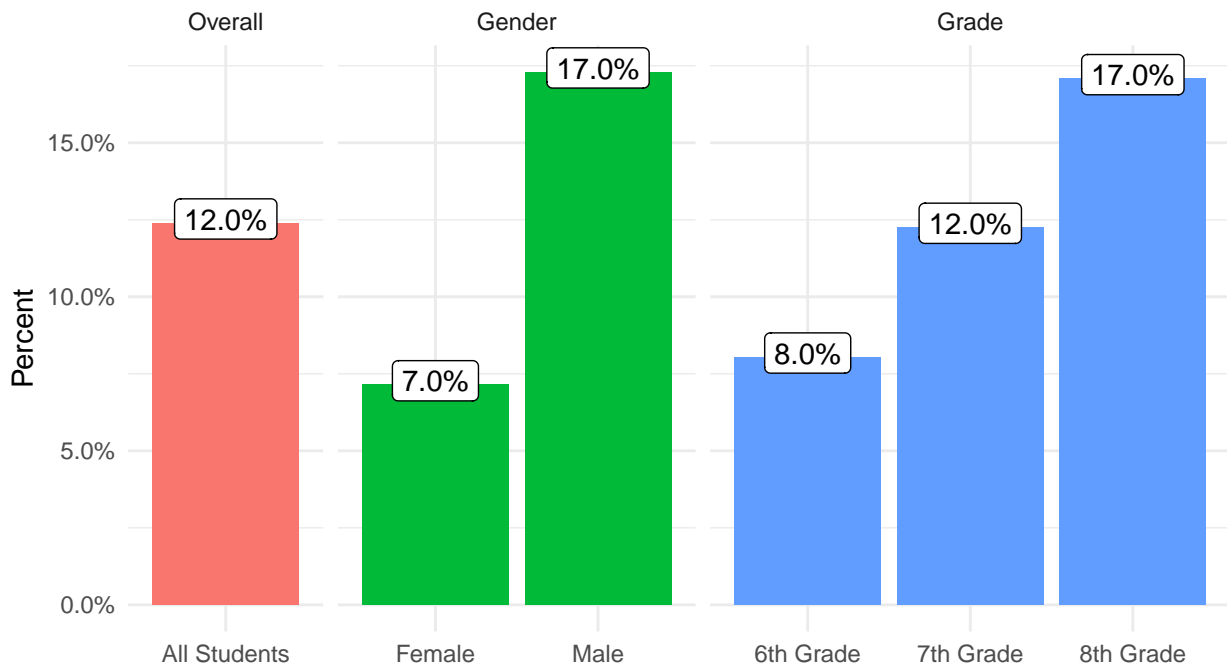
Regardless of whether students actually use such adults as a frequent source of support, the mere presence of such adults in a young person’s life is an important protective factor. For more information on this question, see the “Protective Factors” section.

## SEXUAL BEHAVIOR

The middle school version of the YRBS only includes one question on sexual behavior that can be used to inform public health initiatives and/or school health practices. The question asks “Have you ever had sexual intercourse?” Another question on sexting appears in the section on Technology Use and Online Behaviors. A question on sexual abuse or coercion appears in the “Trauma and Adversity” section of this report.

### Ever Had Sex

Percent of students who have ever had sexual intercourse



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# TOBACCO

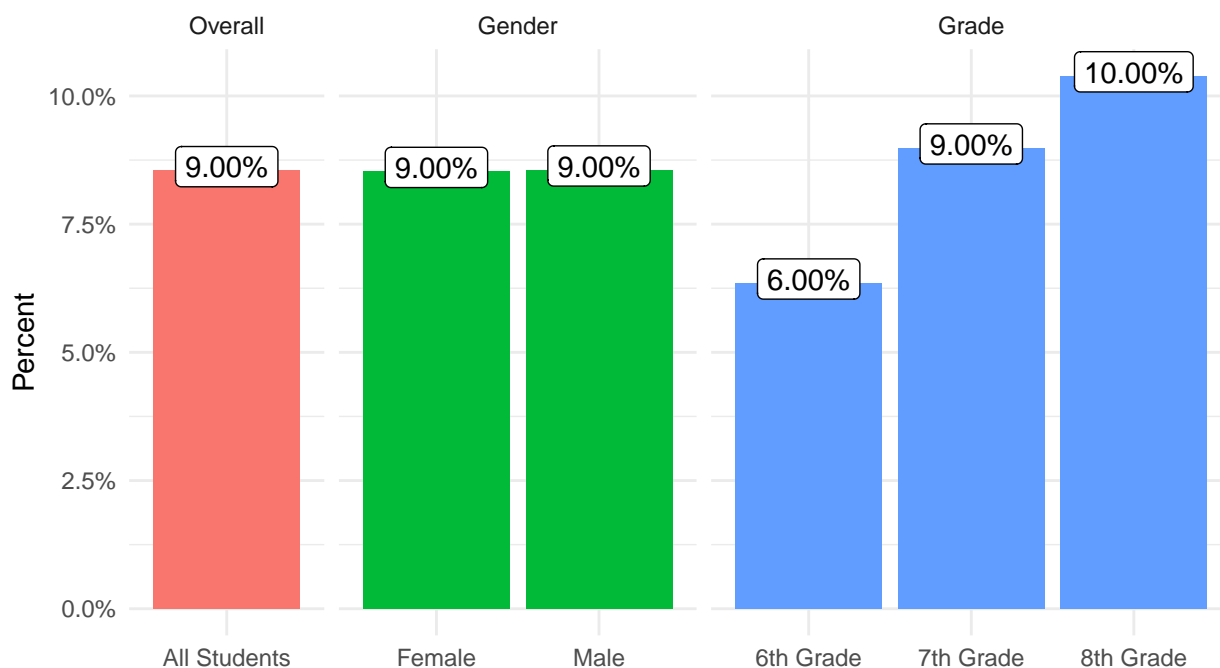
The YRBS asks about both traditional tobacco products and electronic tobacco products. (Schools that opted for the Drug Free Communities Optional Module or the Youth Tobacco Survey Optional Module will find those results at the end of this report.)

## Vaping

Questions about electronic tobacco were added to Wisconsin’s state (high school) YRBS in 2017. The 2019 middle school survey asked about current use of electronic vapor products, such as JUUL.

### Currently Vape

Students who used vaping products (past 30 days)



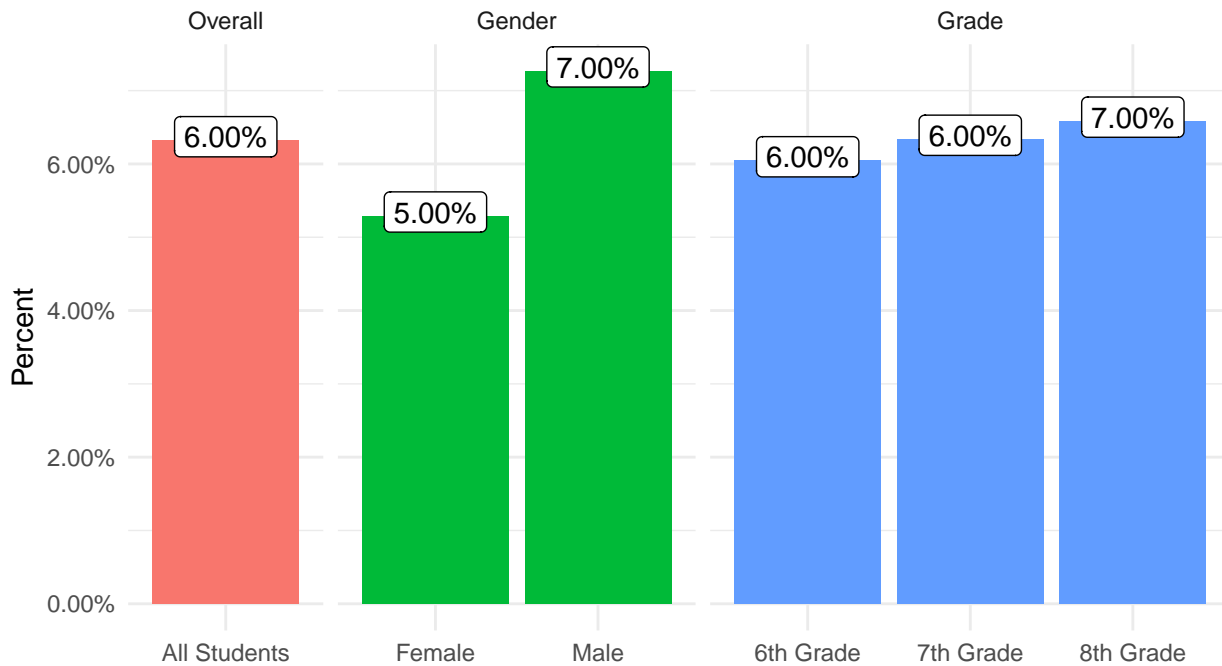
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## Other Tobacco Products

Students were asked about current use of a number of other tobacco products, including cigarettes, cigars, and chew or other smokeless tobacco products. The chart below shows the percent of students who responded affirmatively to any of these questions about traditional tobacco products.

### Use of Any Other Tobacco Products

Students who have used cigarettes, chew, cigars or cigarillos in the past 30 days



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The overall 30-day use rates for specific tobacco products were as follow:

**Chew/smokeless tobacco: 3%**

**Cigars, cigarillos, little cigars: 4%**

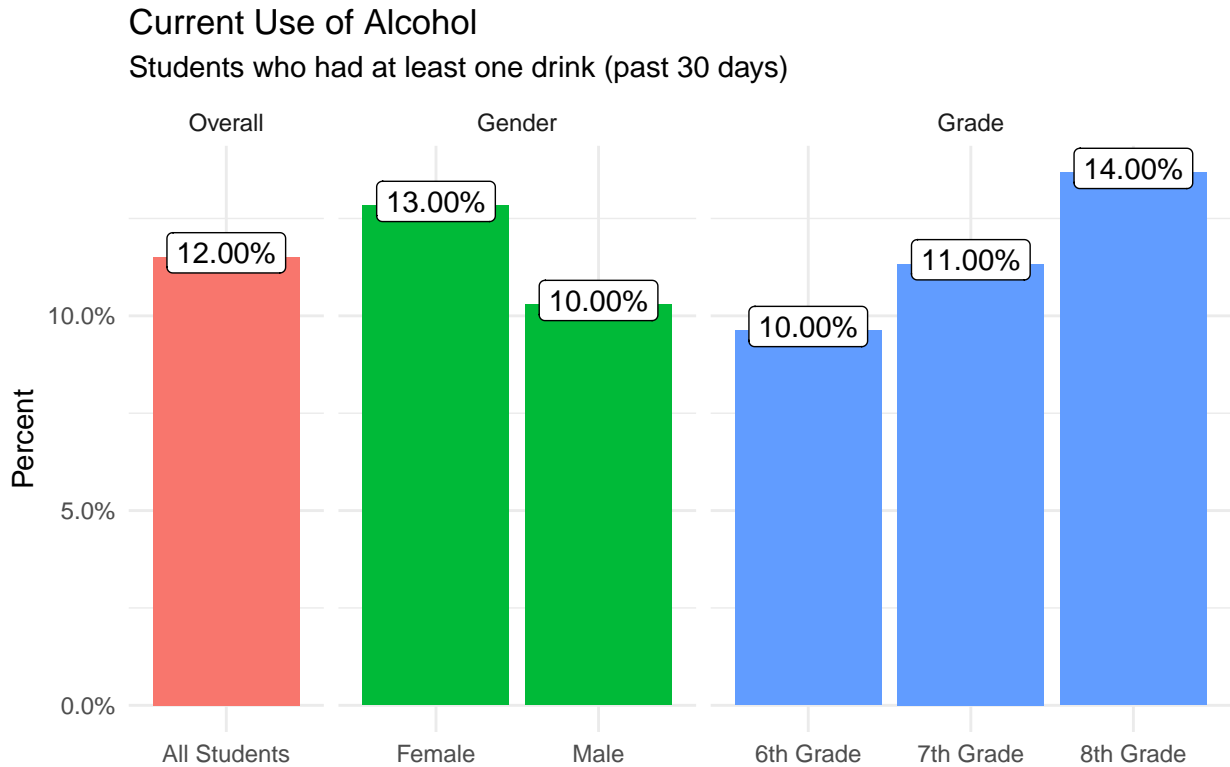
**Cigarettes: 3%**

For more information on the rates of use for each of these products, see the question-specific tables at the end of this report.



## ALCOHOL

The middle school version of the YRBS asks students about current alcohol use (past 30 days). Students were counted as having used alcohol in the past 30 days if they had “at least one drink of alcohol”.



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hol”.

(Schools that opted for the Drug Free Communities Optional Module will find those alcohol-related questions at the end of this report.)

See DPI’s Alcohol and Other Drug Addiction (AODA) webpage for information, tools and resources: <https://dpi.wi.gov/sspw/aoda>.

## DRUG USE

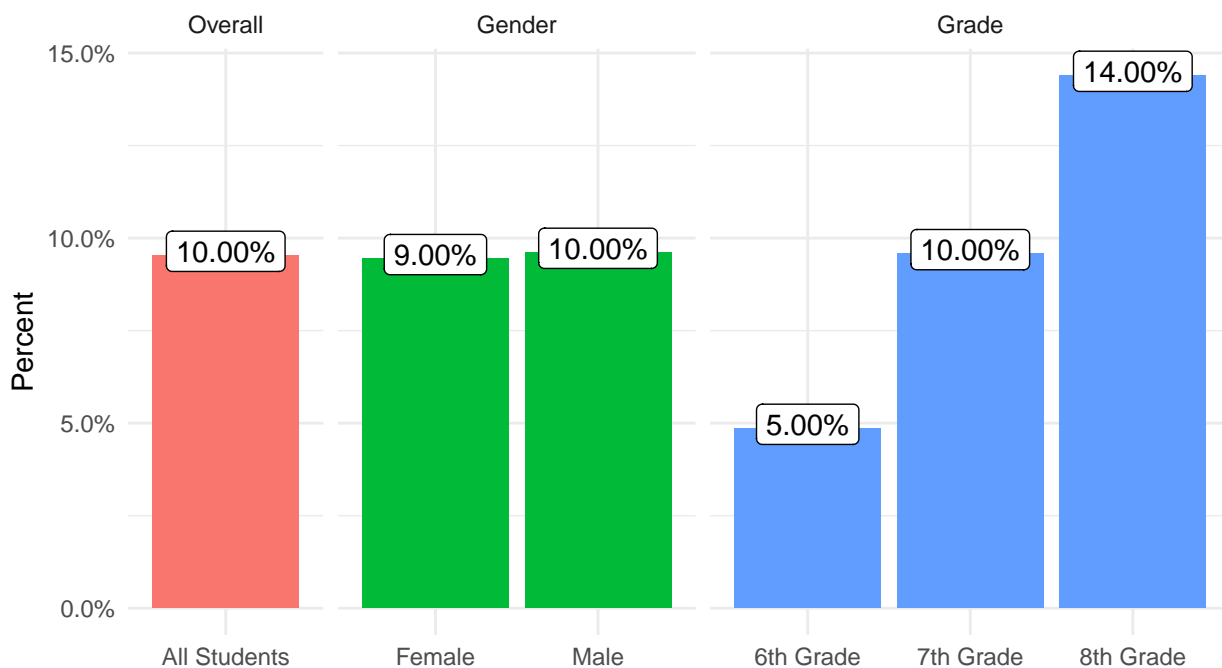
The YRBS asks students about use of illegal drugs as well as abuse of legal drugs. (Schools that opted for the Drug Free Communities Optional Module will find those questions at the end of this report.)

### Marijuana

The middle school version of the YRBS asks students about current use of marijuana.

#### Current Marijuana Use

Students who have used marijuana in the past 30 days



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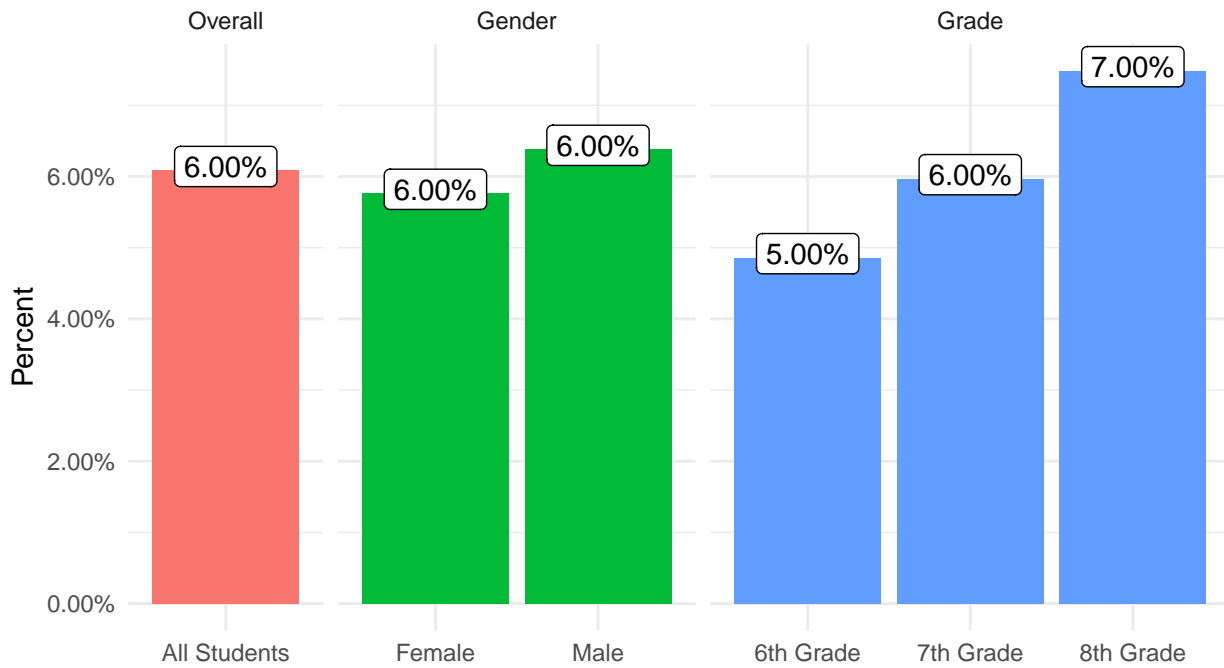
In general, such students who start using substances earlier are also more likely to report indicators of trauma, violence, or abuse. A trauma-informed lens is advised when working with students with early alcohol or drug use.

## Other Illegal Drugs

The middle school version of the 2019 YRBS asks about use of any illegal drug besides marijuana in the past 12 months. Since prevalence for this measure is generally low, data may not appear here at the school or district level. Please see county and/or CESA reports for additional information.

### Other Drug Use

Students who used other illegal drugs besides marijuana

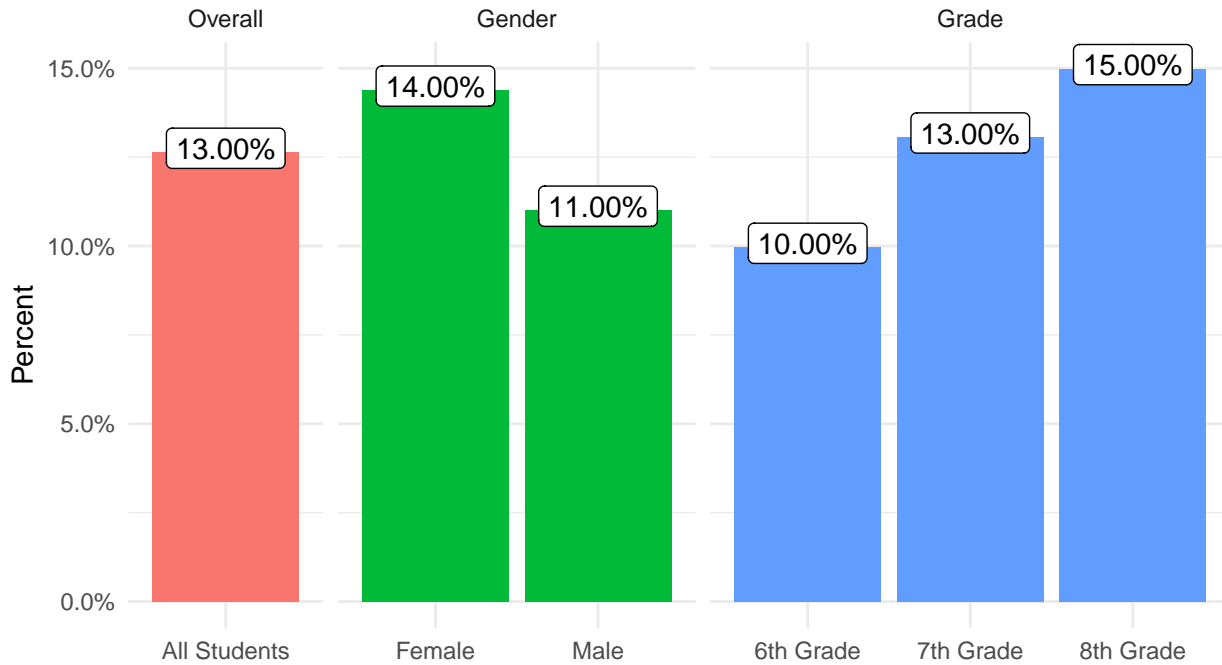


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## Abuse of Legal Substances

### Any Legal Drug Misuse

Students who misused over-the-counter and/or prescription pain medicines



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Stu-

Students were asked about the unauthorized use of prescription painkillers and over-the-counter medications. Overall, **13%** of students had ever engaged in such use, with **10%** of students reporting use of a prescription painkiller without a doctor’s prescription and **5%** reporting use of an over-the-counter drug to get high. The chart above shows the percent of students who answered affirmatively to one or both of these questions.

For more information, see the question-specific tables at the end of this report.

# TECHNOLOGY USE AND ONLINE BEHAVIOR

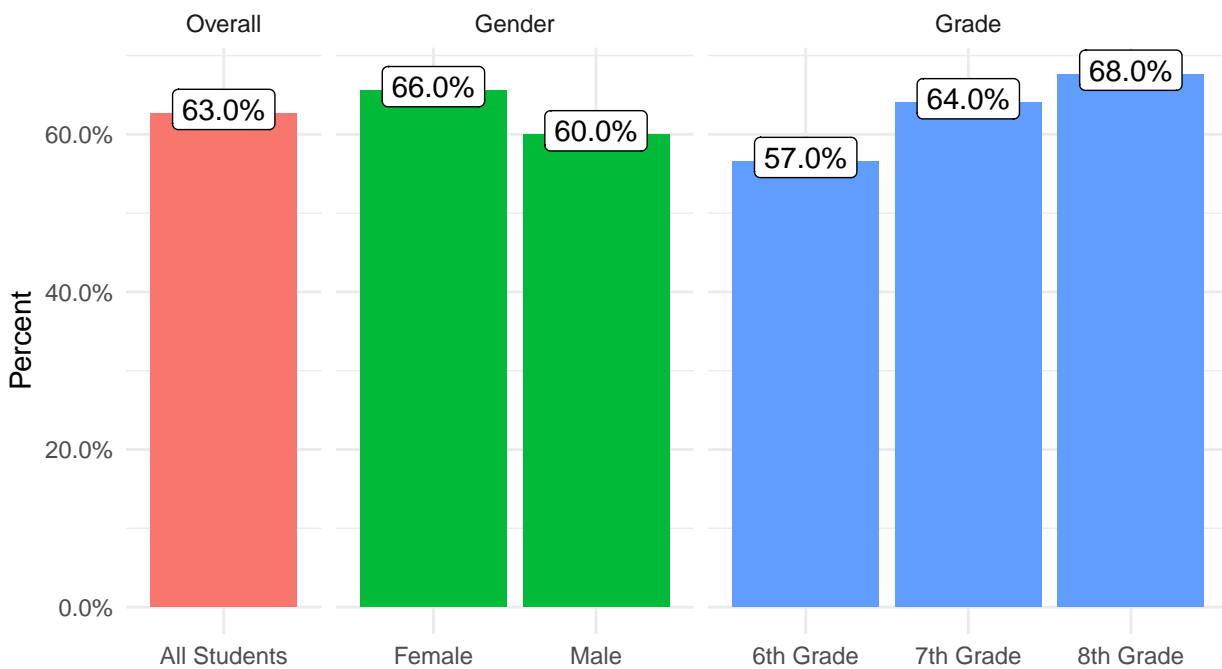
## General Use Patterns

The middle school version of the 2019 YRBS included three questions related to students' recreational use of technology.

The chart below shows the percent of students who reported spending three or more hours per day engaged in video games, social media, texting, or other recreational activities using a computer, phone, gaming system or tablet.

### Moderate to Heavy Screenshot

Students who spent 3+ hours/day on phone, Xbox, or other device

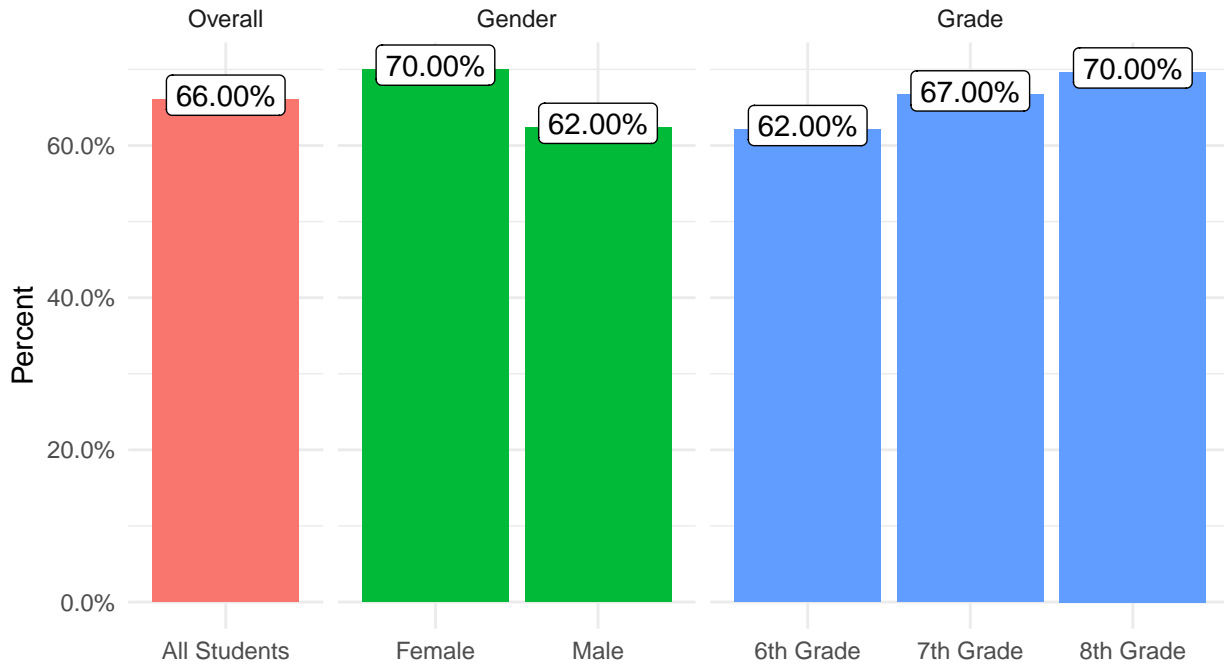


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Another online behavior that can affect both mental and physical health, as well as academic performance, is late-night screen use. When students stay up late, they miss out on sleep. Students were asked about the number of nights per week that they used technology between midnight and 5am. The chart below shows responses for students who reported that they did so at least one school night per week.

### Late Night Screen Use

Students who use technology between midnight and 5am on school nights



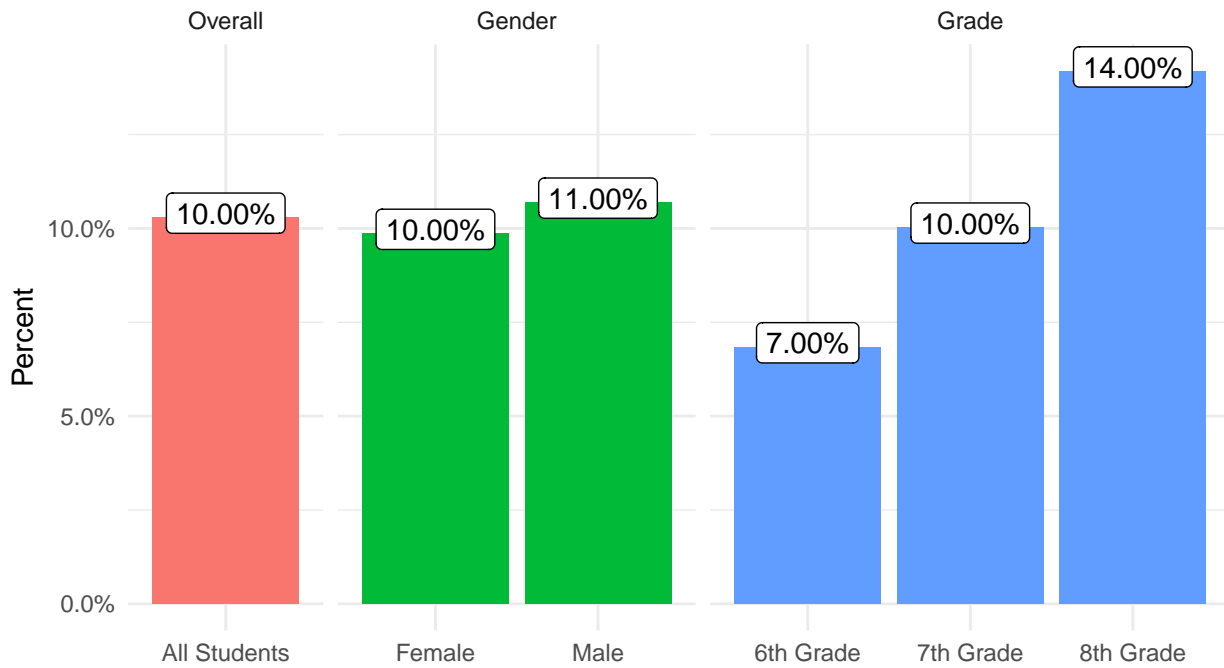
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## Sexting

A question on sexting was included for the first time in 2019. The question specifically asked whether students had sent, received, or shared nude photos or other sexual images in the past 30 days.

### Sexting

Students who sent, received, or shared nude photos or sexual images (past 30 days)



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Online bullying is covered in the “Bullying” section of this report.

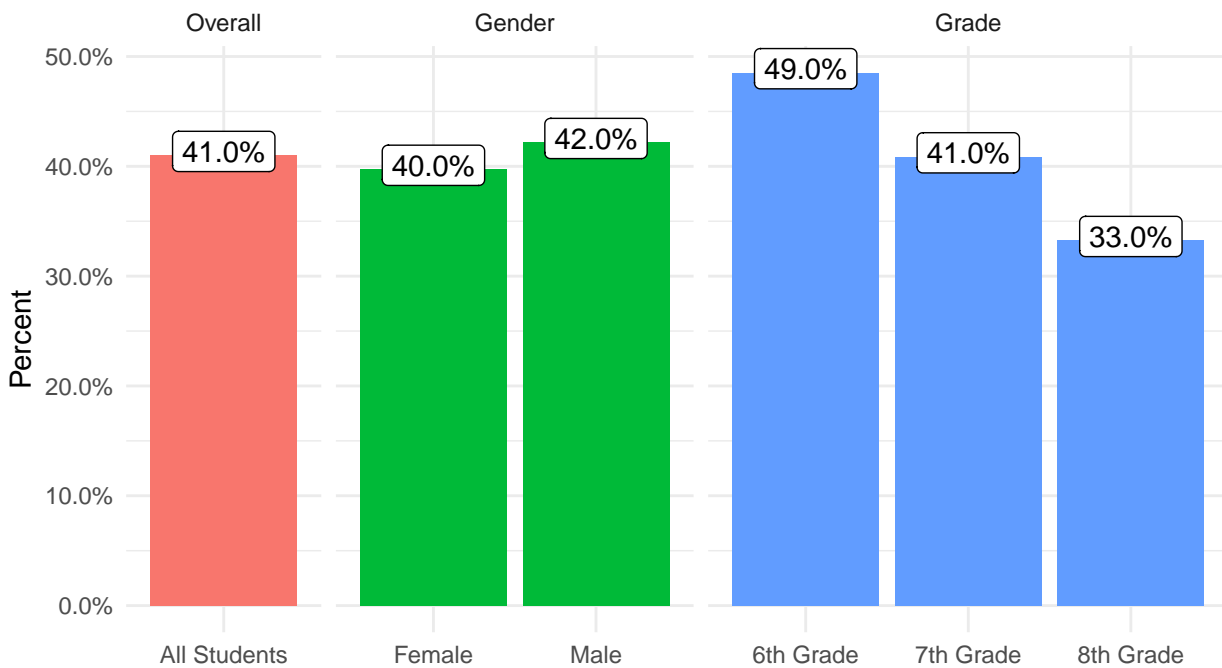
# PHYSICAL HEALTH AND NUTRITION

## Sleep and Exercise

### Sleep

Wisconsin’s 2017 YRBS results showed a decrease in the amount of sleep students reported (statewide results from 2019 are not available at the time of this report). The charts below show results for students who reported greater and lesser amounts of sleep.

**Sleep 8 or More Hours Per Night**  
Students reporting 8+ hours of sleep per night

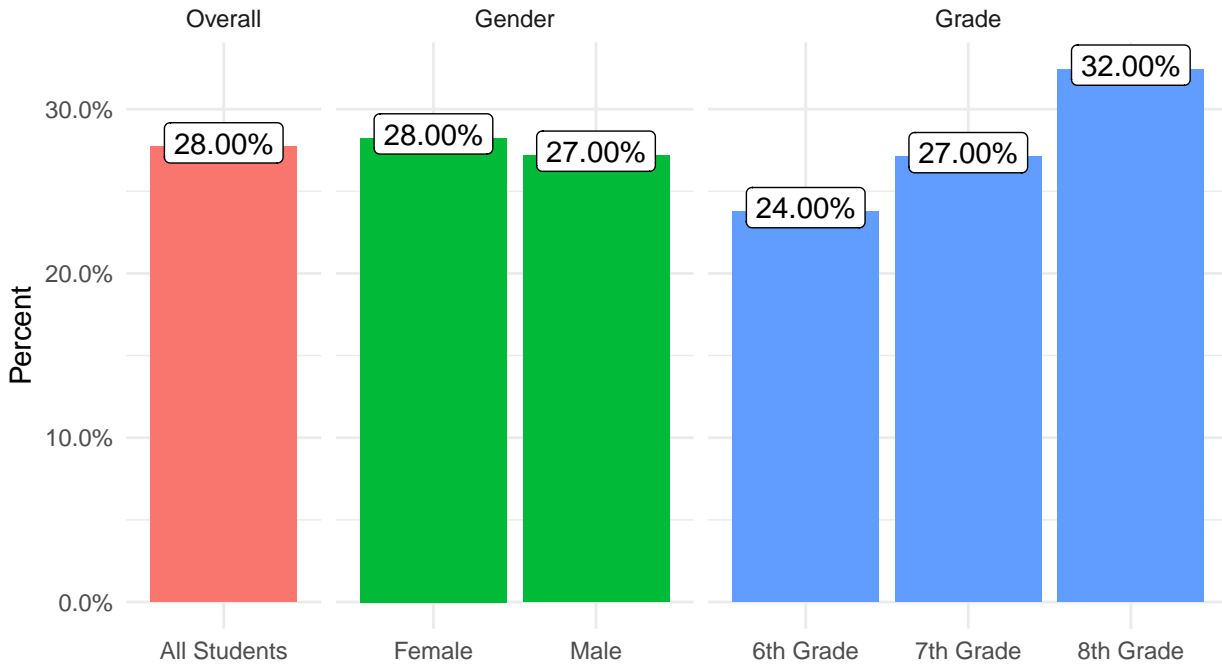


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### Sleep 5 or Fewer Hours Per Night

Students reporting 5 or fewer hours of sleep per night



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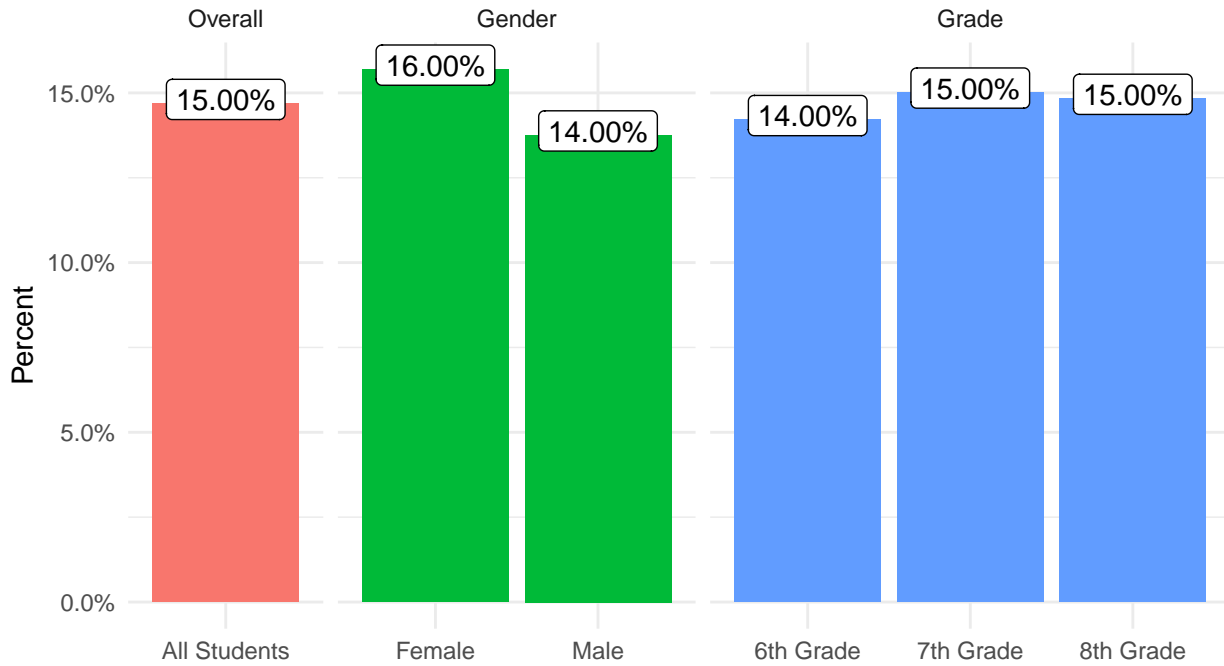
One factor that can interfere with sleep is nighttime screen use. See the section on Technology Use And Online Behavior for a breakdown of screen use at night.

### Exercise

Students were asked how many days a week they participated in an hour or more of physical activity.

### No Sustained Exercise

Students who exercised zero days in the past week

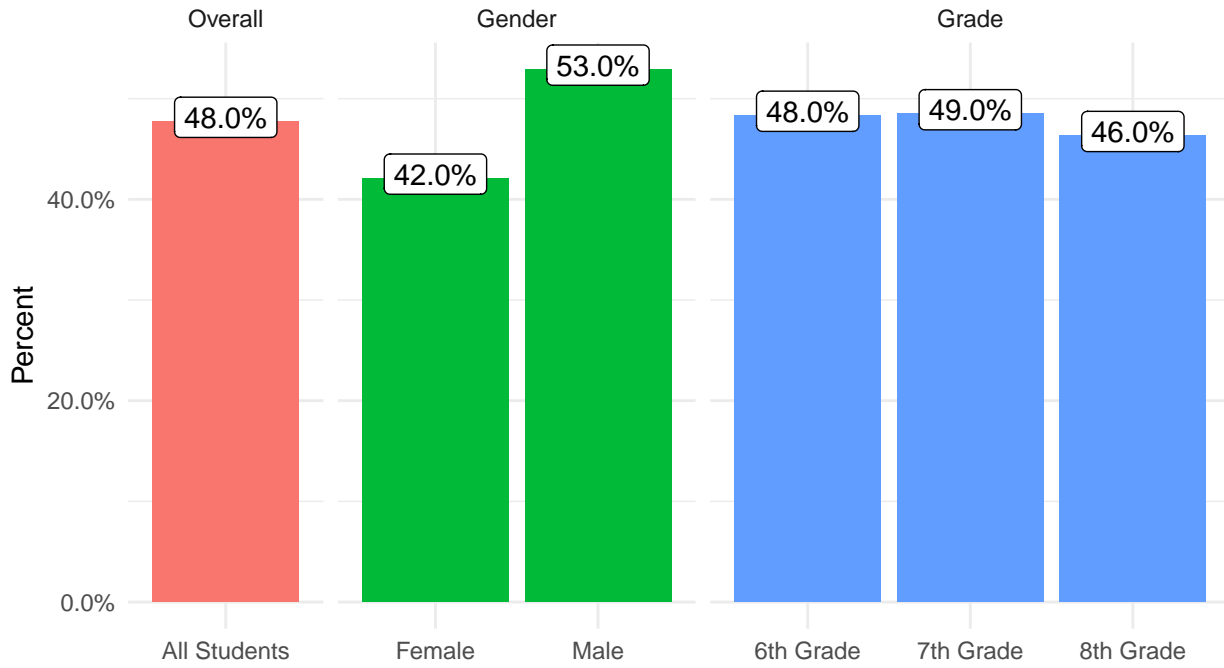


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The chart below shows students who did report engaging in an hour or more of physical activity for four or more days per week.

### Exercise on Most Days

Students who exercised 4–7 days in the past week



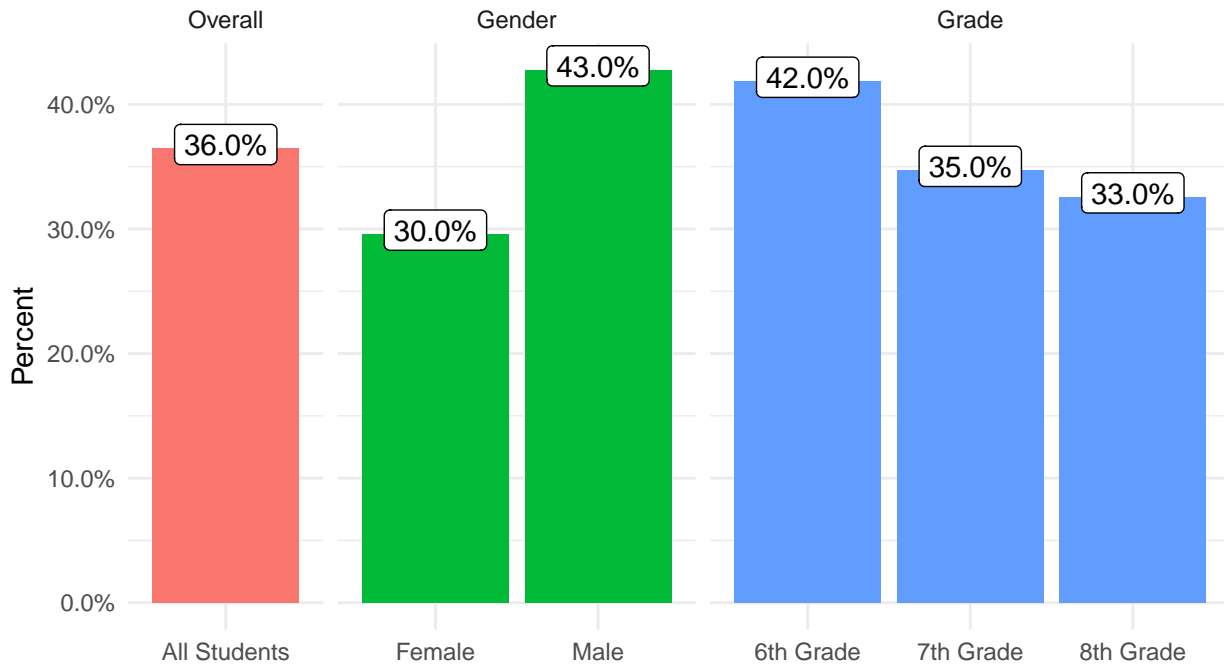
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## Breakfast

Students were asked how often they eat breakfast.

### Breakfast Daily

Students who ate breakfast every day (past 7 days)



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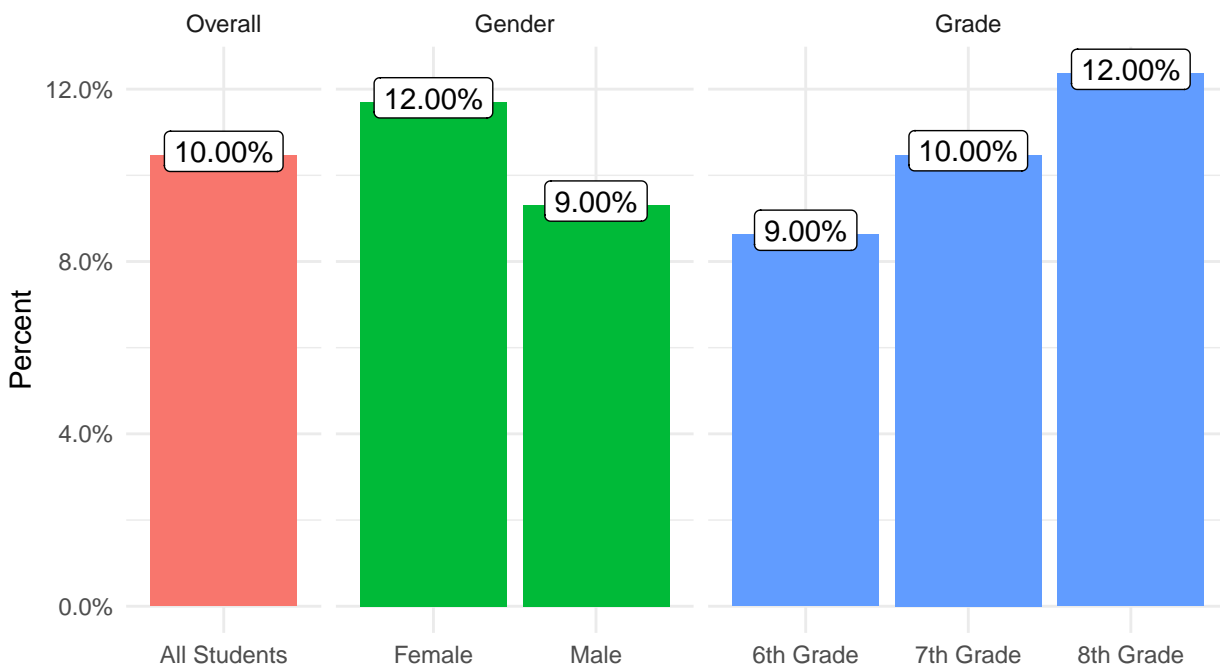
While the chart above shows the percentage of students who ate breakfast every day, **40% of students ate breakfast less than half the time (0-3 days in the past week)**. While missing breakfast may be a choice for some of these students, lack of food is likely an issue for at least some of these students. See the section on “Access to Food and Housing”.

# TRAUMA AND ADVERSITY

## Exposure to Violence

Experiences of violence and other forms of trauma can affect all aspects of a student’s life, including their health, their behavior, and their ability to engage meaningfully in their education. The middle school version of the 2019 YRBS included one question asking students whether “anyone ever forced you to do sexual things when you did not want to”. **Note that this is not a screener and cannot be used to identify individual students.** The question instead provides a general sense of how prevalent unwanted sexual contact is for this group of students. Student Services staff are trained to help identify students who may have suffered trauma and to address such situations appropriately.

**Experienced Unwanted Sexual Contact**  
Students who were ever forced to do sexual things

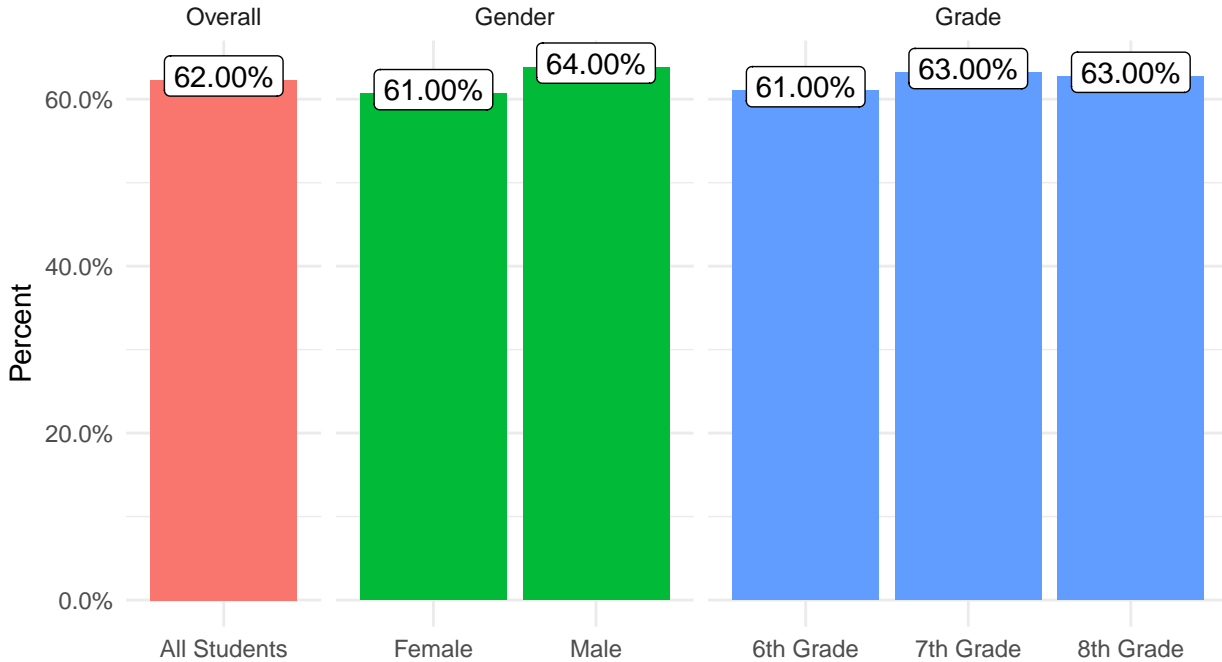


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The survey includes a question on perceptions of safety within the student’s neighborhood.

### Safe Neighborhood

Students who most of the time or always feel safe in their neighborhood



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In contrast to the chart above, **21%** of students rarely or never feel safe in their neighborhood.

As described in the section on School Safety, **18%** of students missed school once or more within the past 30 days due to feeling unsafe at school or on their way to or from school.

Schools are tasked with enforcing attendance, yet it is also important to note that students might miss school because they feel unsafe at school or at home. DPI provides schools with resources and guidance on how to promote attendance as well as how to engage in trauma-sensitive disciplinary practices. See e.g. <https://dpi.wi.gov/sspw/pupil-services/school-social-work/contents/attendance-truancy-dropout/resources> as well as the sections on discipline and trauma-sensitive schools at <https://dpi.wi.gov/sspw>.

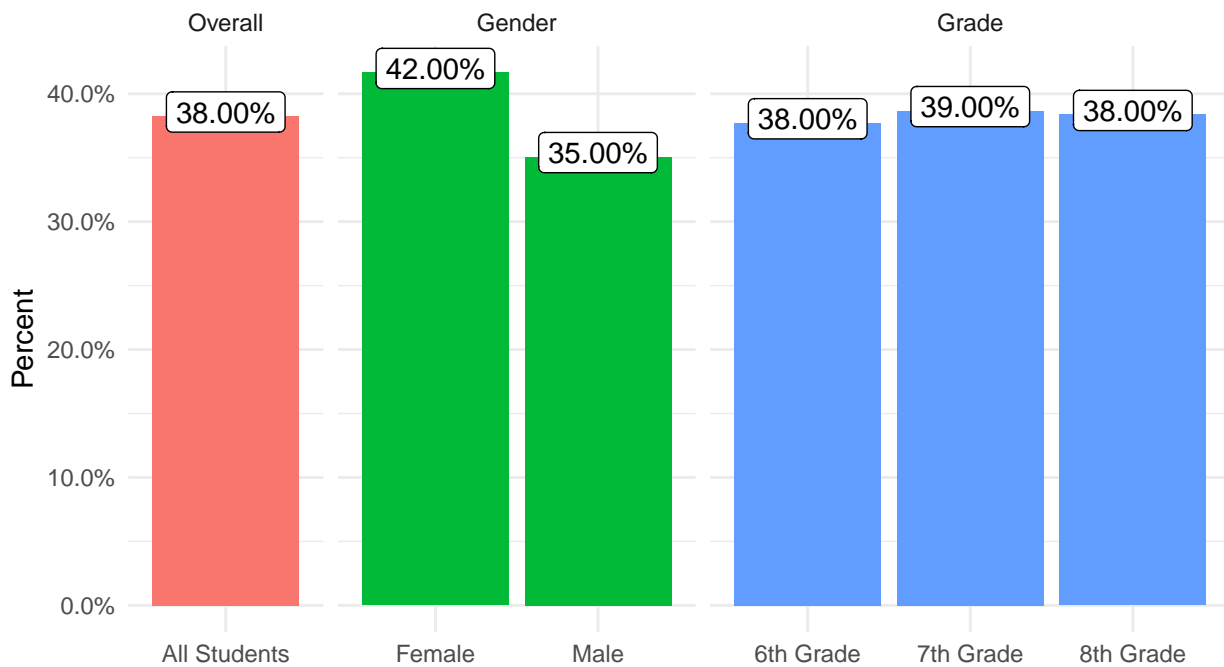
For information on prevention of sexual violence at school, see <https://dpi.wi.gov/sspw/safe-schools/resources-reduce-and-respond-sexual-violence-schools>

## Access to Food and Housing

Access to stable housing can have a tremendous impact on students’ health and academic success. A move or other change of housing is a significant transition, even if the move is voluntary and the student is well supported. Students who are forced to move often—due to eviction, abuse, or other situations—obviously face significant risks. The middle school version of the 2019 YRBS asked students to report on the total number of residences they have had in their lifetime. The chart below shows the percent of students indicating four or more residences.

### Moved Many Times

Students who have lived in four or more residences



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Have lived in 1 place: **26%**

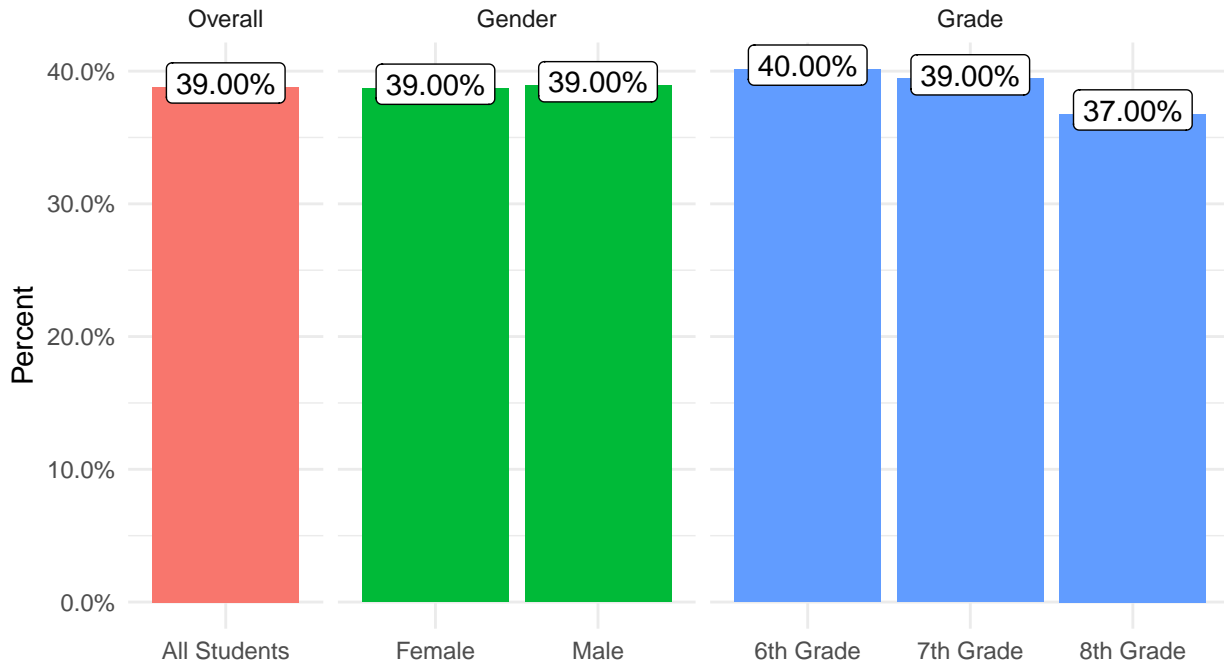
Have lived in 2-3 places: **36%**

Have lived in 4 or more places: **38%**

The YRBS asked students how often they went hungry in the past month due to a lack of food in the home. Students who indicated that they had any such experiences in the past month are reported in the chart below.

### Food Insecurity

Students who experienced hunger due to lack of food at home (past 30 days)



Missing bars mean numbers are too small to report

The chart above includes students who answered that they went hungry rarely, sometimes, most of the time, or always; it excludes students who answered “never”. In terms of students who regularly experience hunger at home, 6% of students said that they went hungry “most of the time” or “always”.



## PROTECTIVE FACTORS AT A GLANCE

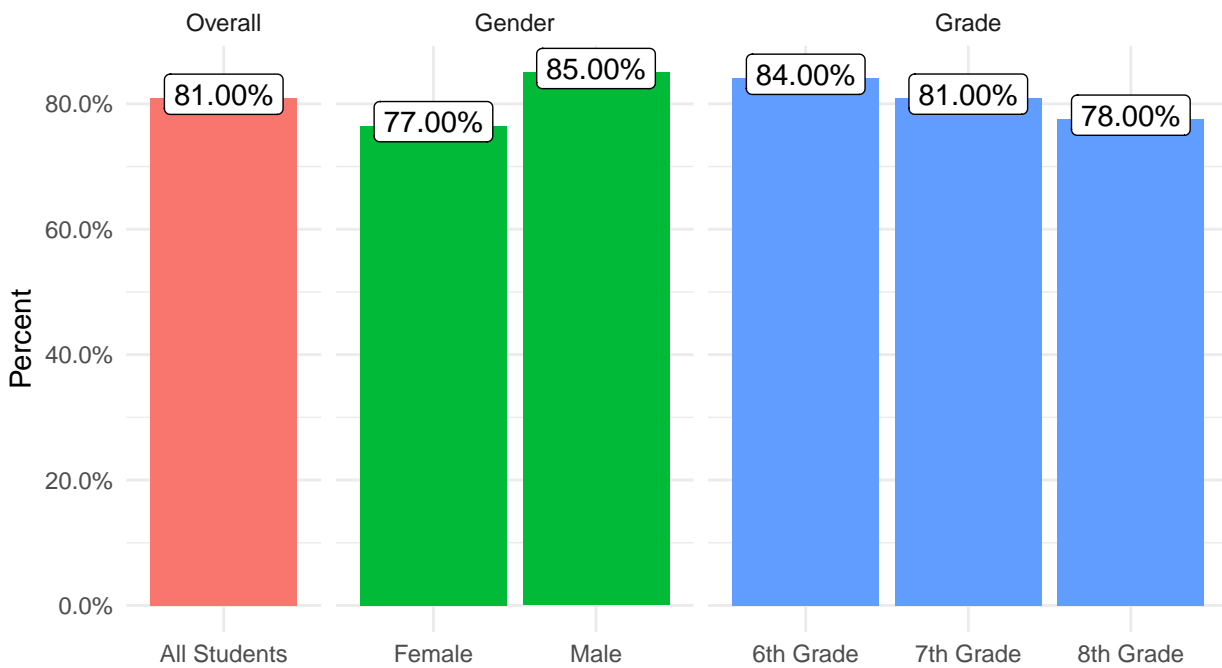
Along with risk behaviors and risk factors, the YRBS includes a few questions that address protective factors. Many of the questions covered in other sections of this report can be seen as protective factors to the extent that students’ responses indicate that they are safe, connected, and supported at home and school. This section covers one additional question on family support and then provides a closer look at school belonging and adult support beyond the family. Taken together, these factors are extremely powerful. A 2019 article in the Journal Pediatrics showed that “school connectedness may have long-lasting protective effects across multiple health outcomes related to mental health, violence, sexual behavior, and substance use. Increasing both family and school connectedness during adolescence has the potential to promote overall health in adulthood” (Steiner et al 2019).

### Family Support

The middle school version of the YRBS asked students about their level of family support.

#### Family Support

Agree or strongly agree that family provides help and support



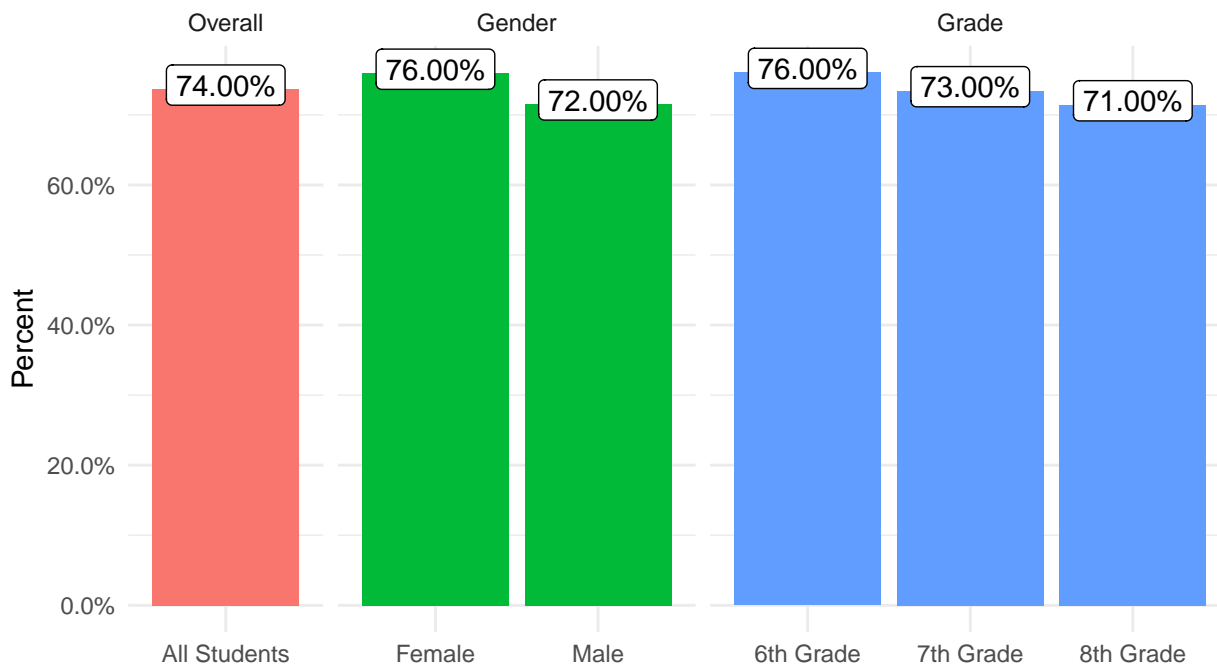
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## Number of Supportive Adults

This section dives into the number of adults besides parents that students said they could talk to about an important issue affecting their lives.

### Other Supportive Adults

Have at least one supportive adult besides parent(s)



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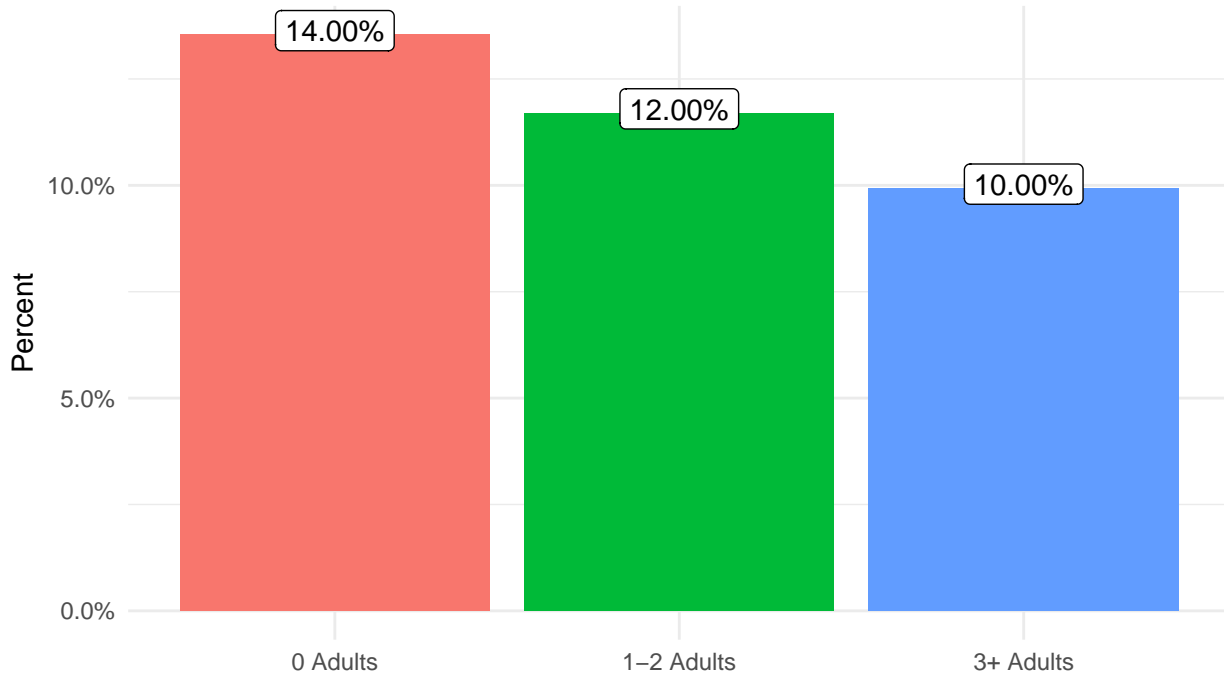
26% of students responded that they had **no** such supportive adults besides their parents.

In the next few charts, responses are grouped by students reporting zero adults, one to two adults, and three or more adults. Having supportive adults at school, home, and elsewhere can reduce the likelihood that young people get bullied or engage in risk behaviors. When young people do find themselves in difficult situations, the presence of supportive adults can also help them to problem-solve and access needed resources or interventions.

This section highlights three different types of behaviors or experiences by students' reported levels of adult support: current alcohol use, being bullied, and sexting.

### Current Alcohol Use

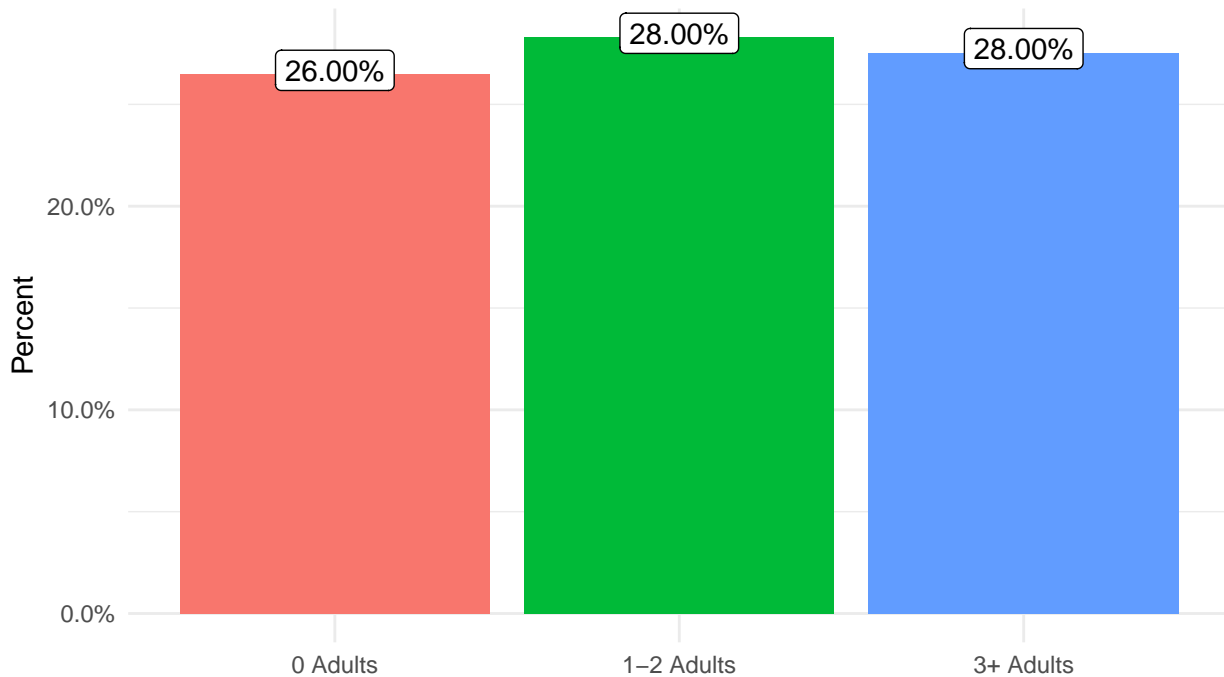
Current alcohol use for students with different levels of adult support



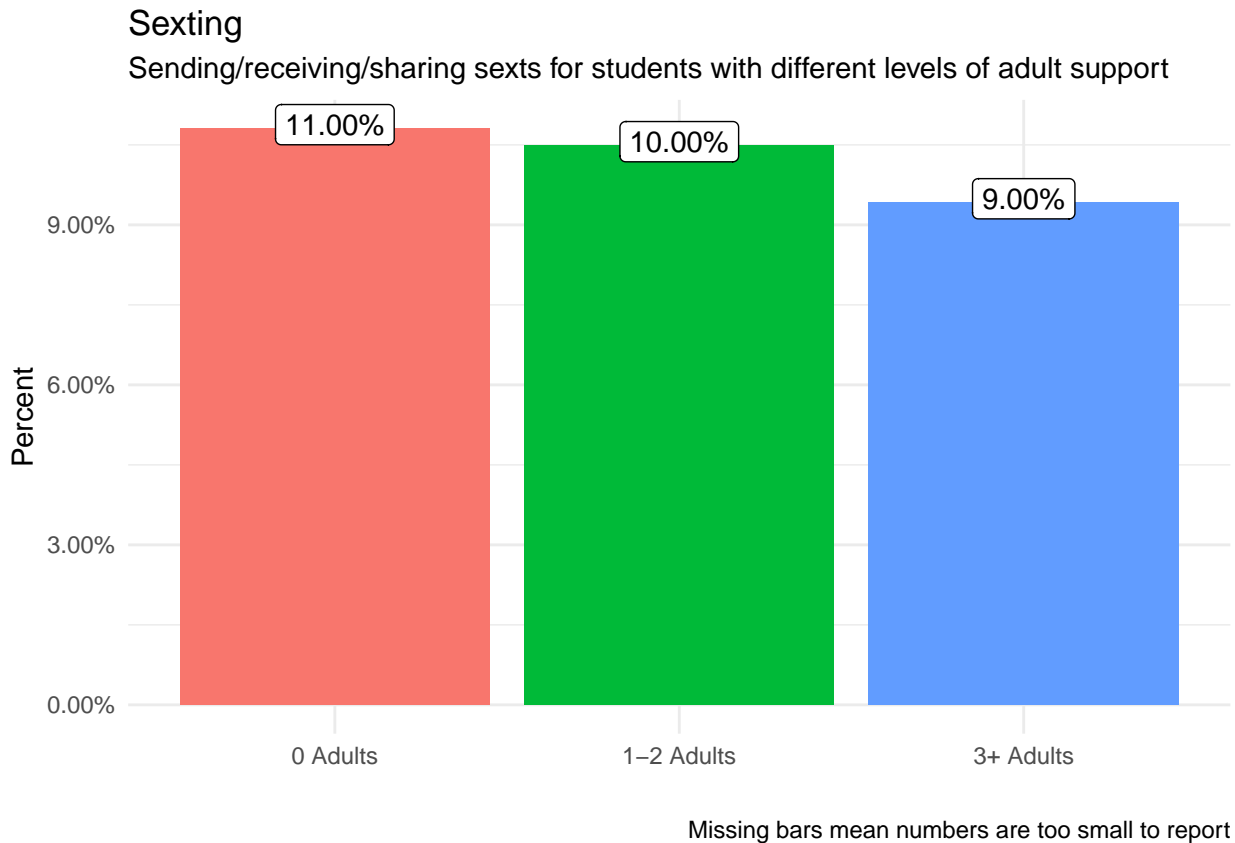
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### Bullied At School and/or Online

Experiences being bullied for students with different levels of adult support



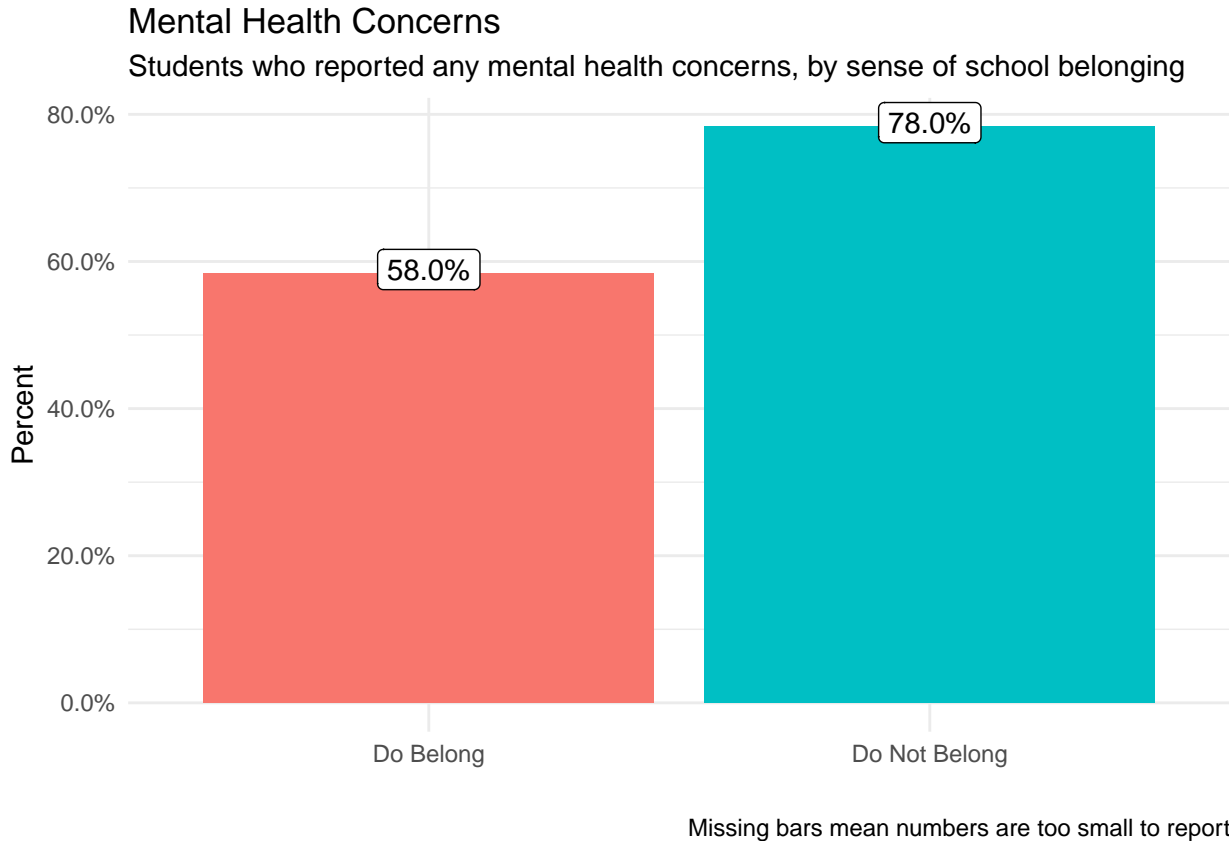
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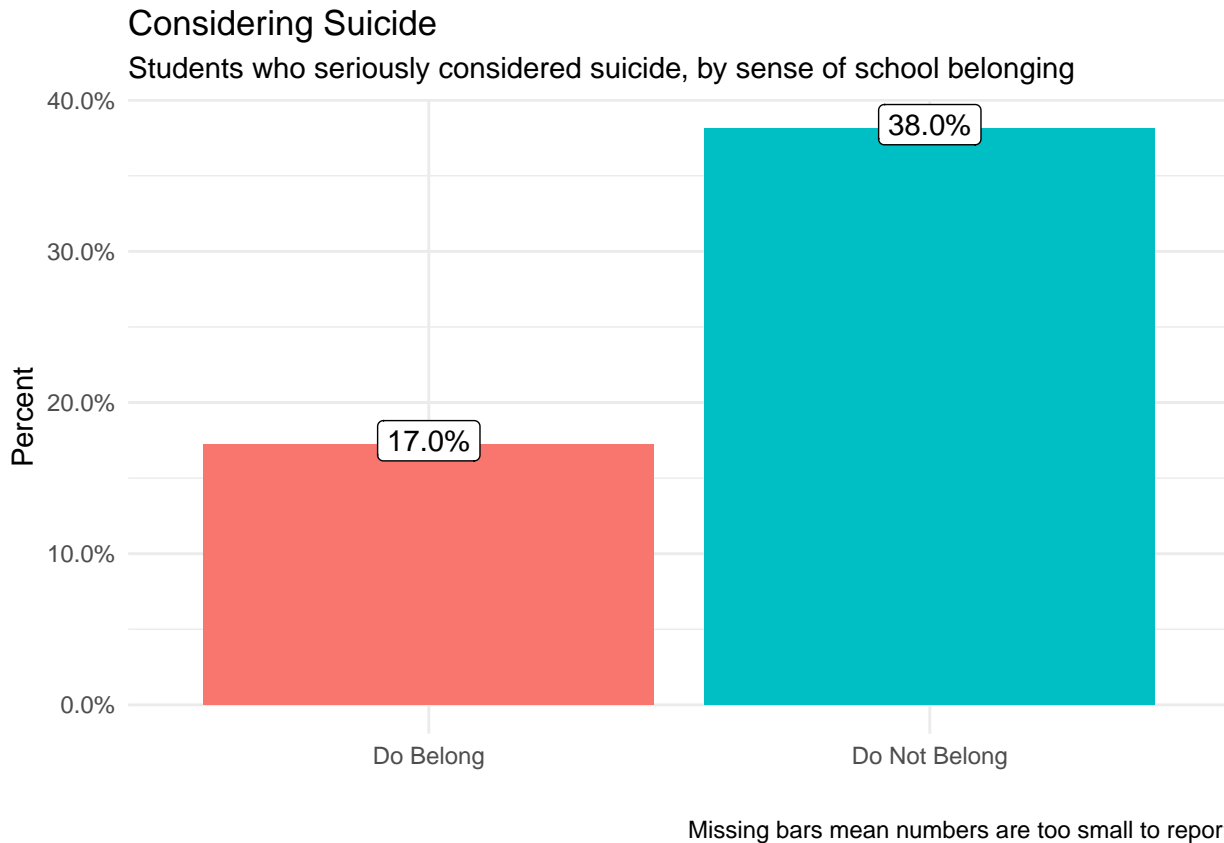
## Sense of Belonging

Basic rates of school belonging are covered in the section on “School Climate” under “School Connectedness”. In this section, responses to that question are cross-tabulated with a few risk factors to highlight the likely differences between students with and without this protective factor.

Students who agreed or strongly agreed that they belonged at their school are in the “Do Belong” category, while students who disagreed or strongly disagreed are in the “Do Not Belong” category. Sense of belonging is cross-tabulated with mental health concerns, suicidality, perceived school safety, and vaping.



The chart above shows the reported rates of mental health concerns for students who do not feel a sense of belonging vs. students who do feel a sense of belonging. “Mental health concerns” combines the YRBS questions on anxiety, depression, self-harm, and suicidality. The bar on the left shows the prevalence of such mental health concerns among students who feel like they belong, while the bar on the right shows the prevalence of such mental health concerns among students who don’t feel like they belong at school.



The chart above limits the relationship between mental health and school belonging to focus on just students who say that they have seriously considered suicide in the past 12 months. Students who do not feel that they belong at school (bar on left) are generally more likely to have considered suicide than students who do feel that they belong at school (bar on right). This does not necessarily mean that school rejection causes suicidality in any way. The relationship could be reversed (students who feel suicidal self-isolate and therefore feel a low sense of belonging) or only loosely related. However, school outreach strategies that promote school belonging are best practices that can be considered as a tier 1 or universal strategy for suicide prevention.

### Feelings of School Safety

Students who feel safe at school, by sense of school belonging

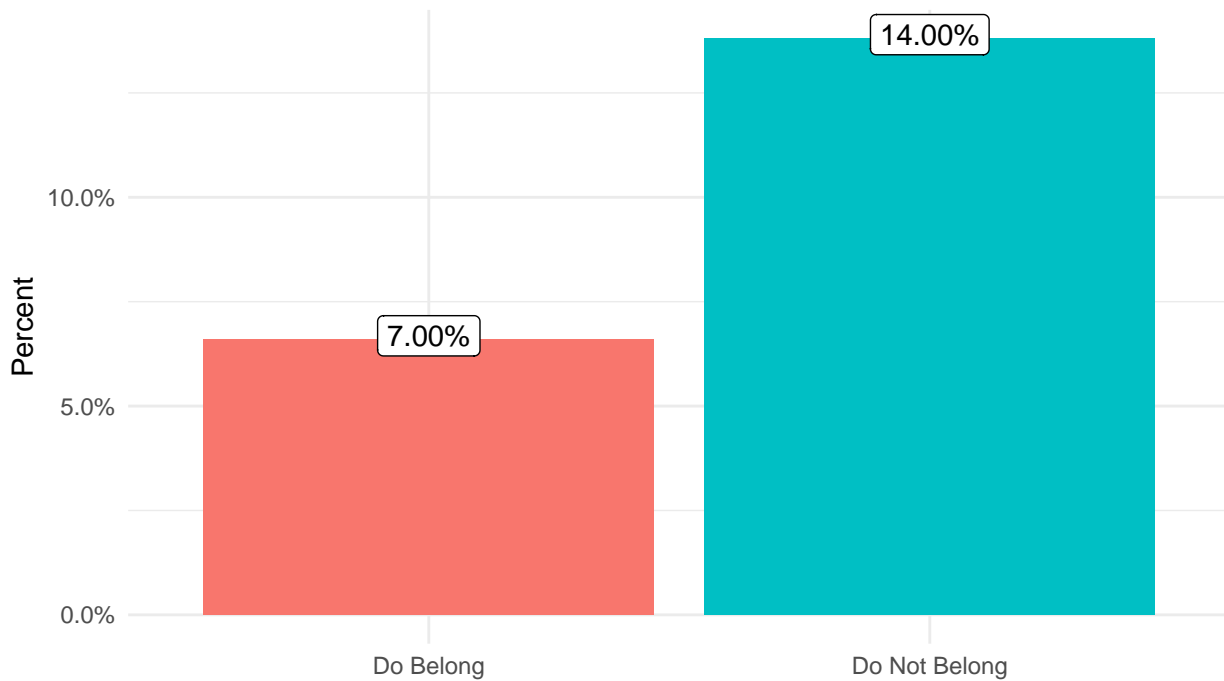


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The chart above shows the percentage of students who feel safe at school “most of the time” or “always”. The bar on the left shows feelings of school safety among students who feel like they belong at school, whereas the bar on the right shows feelings of school safety among students who don’t feel like they belong at school. Note that these two feelings—safety and belonging—can influence one another. A student who feels marginalized within the school might also feel more vulnerable to bullying or school violence. Conversely, it’s hard to develop a sense of belonging in a school that you view as unsafe.

### Currently Vape

Students who have vaped in past 30 days, by sense of school belonging



Missing bars mean numbers are too small to report

Students who do not feel that they belong at school (bar on right) generally are more likely to also use tobacco products or other substances than students who do feel that they belong at school (bar on left). The chart above shows how this breaks down among students using e-cigarettes.

For more information on how to improve school belonging, see <https://www.cdc.gov/healthyyouth/protective/pdf/connectedness.pdf>.



## HIGHER RISK POPULATIONS AT A GLANCE

This section highlights several different subgroups of students whose results tend to indicate that they are more vulnerable than their peers. Disparities in risk or vulnerability are not set in stone; young people in these groups, like their peers, are responsive to welcoming environments and supportive adults. Schools and communities can therefore make efforts to improve outcomes and reduce current disparities.

The high school YRBS contains questions for all of the populations in this section. At the middle school level, only the first three populations (food insecure, race/ethnicity and low grades) are included in the standard middle school survey. Middle schools that registered for the “high risk groups optional module” will have data on the other three groups (LGBT, students with physical disabilities, and students with special education services). Those questions are not included by default in the standard middle school survey.

This section is intended to provide a snapshot of some of the elevated risk areas faced by marginalized or vulnerable students, with an emphasis on areas that might be of particular interest to educators and school administrators. The same four questions are displayed for each subgroup here:

- Their sense of school belonging
- Whether they have experienced bullying in the past year (either in person or online)
- Whether they have a teacher to talk to
- Whether they indicated any mental health concerns

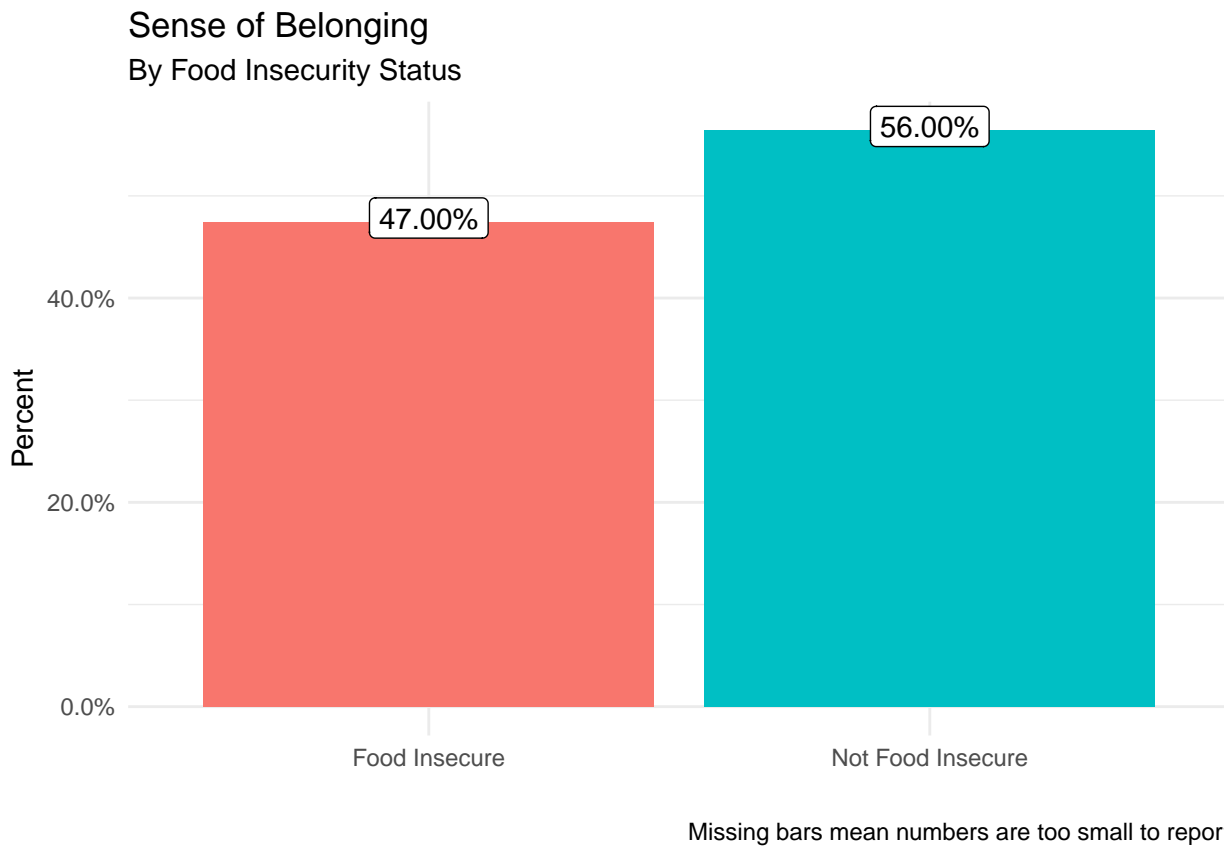
Mental health concerns include students who answered affirmatively to one or more of the questions about anxiety, depression, non-suicidal self-harm, and suicidal thoughts and behavior.

Note that the same data suppression rules governing the rest of this report, help to ensure the privacy of students from these higher risk populations. If your school had few responses from students identifying in any of these categories, you may not have data for this section.

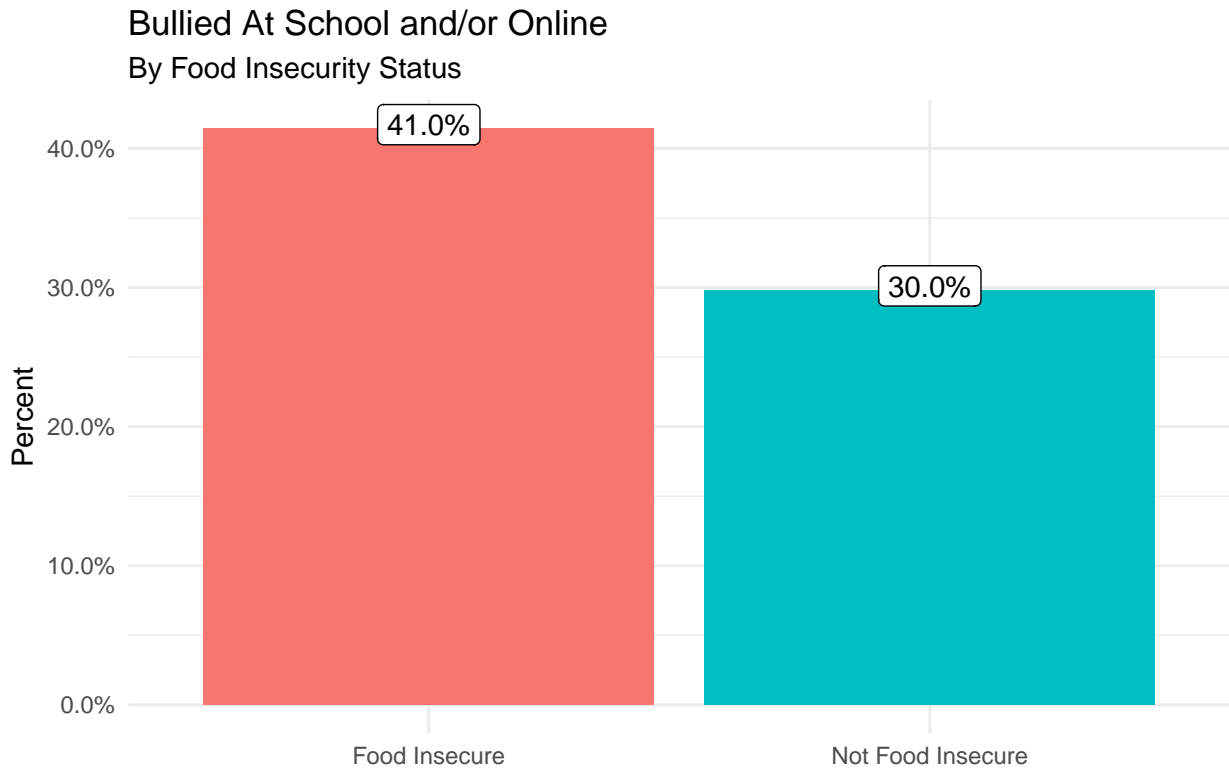
For more information on the responses of the subpopulations covered here, see the question-by-question tables at the end of this report.

## Food-Insecure Students At A Glance

Students living in poverty or with very limited means face increased stresses and risks, compared to their peers. The closest YRBS proxy measure for such students is whether or not they experienced hunger in the past month because there was not enough food at home. Students who indicated that they had experienced such hunger are included in the “Food Insecure” category. Students who had not experienced such hunger are included in the “Not Food Insecure” category.



Living with poverty and scarcity can easily make young people feel like outsiders. This can be particularly pronounced during adolescence, when young people are trying to fit in. The chart above shows the sense of belonging among students who went hungry due to lack of food in the home in the past month (the “Food Insecure” bar on the left) versus the sense of belonging among students who did not face such food insecurity.

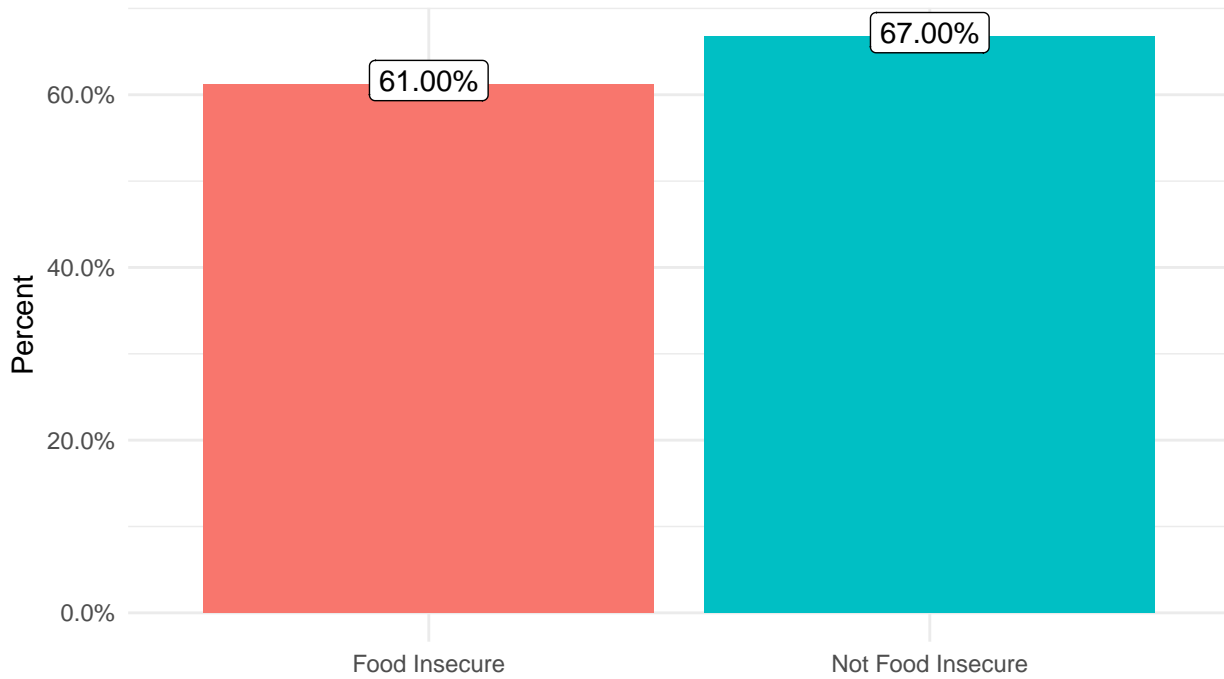


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Class differences provide clear status markers that can become the target of bullying. Students who are hungry and highly stressed by the ongoing insecurity of poverty might also have fewer mental and emotional resources to deflect or withstand taunts, which can increase their likelihood of being bullied.

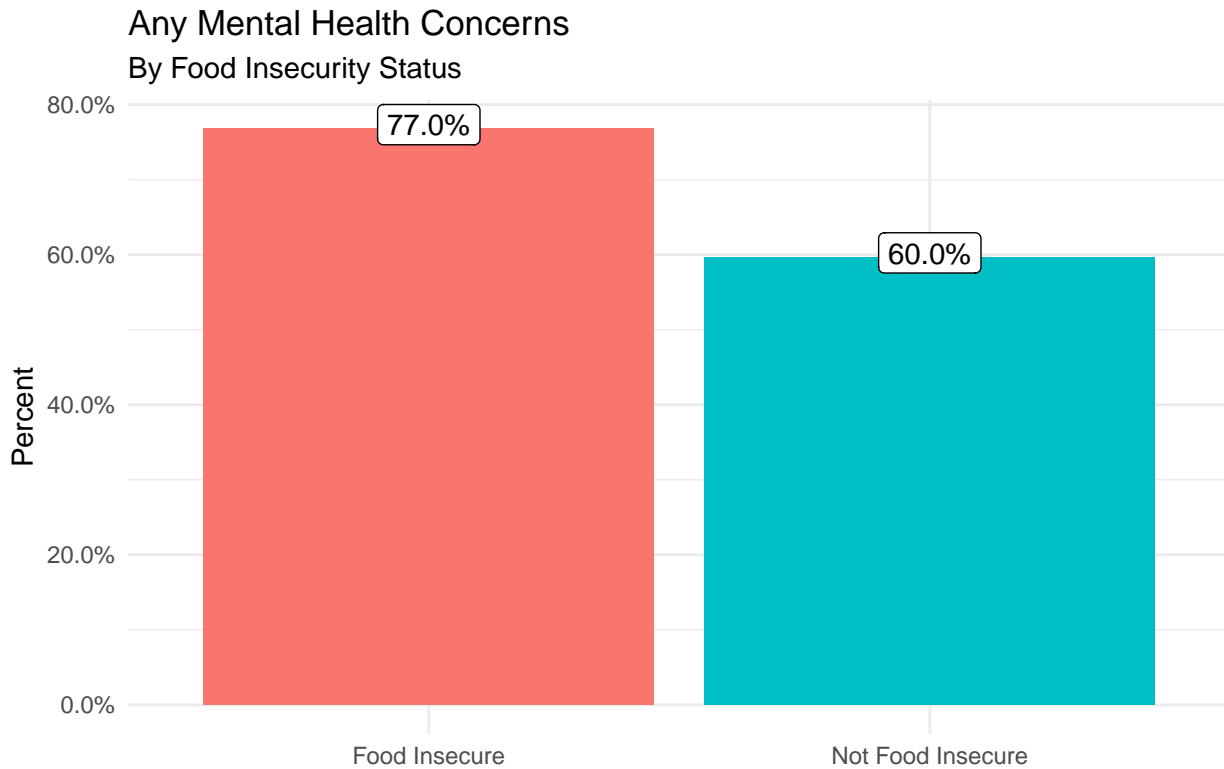
The chart above combines responses to two bullying questions to get a broad sense of bullying. It looks at students whose answers indicated that they had been bullied online, at school, or both.

### Have A Teacher Or Other Adult at School To Talk To By Food Insecurity Status



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Students who lack enough to eat at home are facing a level of stress and strain not faced by most adults. These students therefore have a high need for supportive teachers, school counselors, school administrators, and other adults. However, these students tend to be less likely than their peers to say that they have a teacher or other adult at school in whom they could confide.



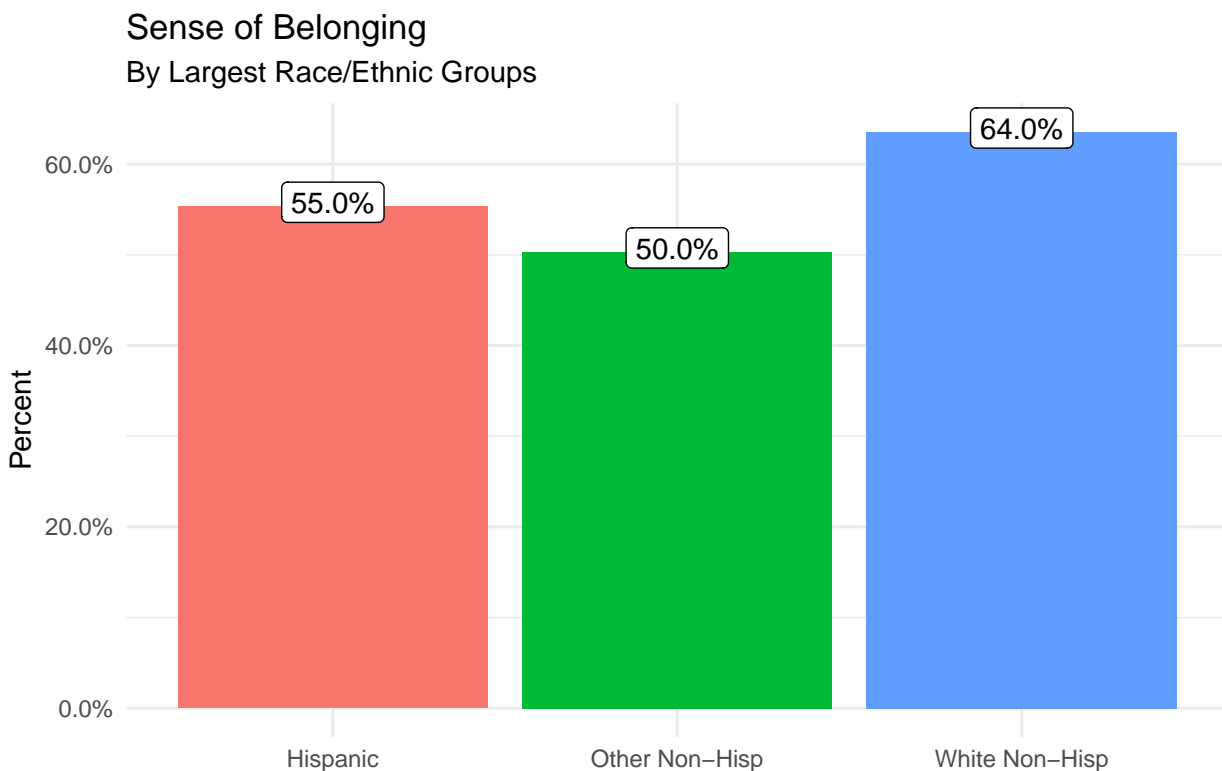
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Poverty and food insecurity take a toll on mental health as well as physical health, especially when many of the people around you do not seem to be facing the same kinds of economic challenges. Worrying about having and maintaining basic necessities; being concerned for parents, siblings, or other family members; seeing others grasp opportunities that elude you and constantly fighting the shame and stigma that our society assigns to people facing poverty, can all take a toll on a young person’s mental and emotional wellbeing. The chart above shows the percent of food insecure vs. not food insecure students who reported anxiety, depression, self-harm or suicidal ideation or behavior.

## Students of Color At A Glance

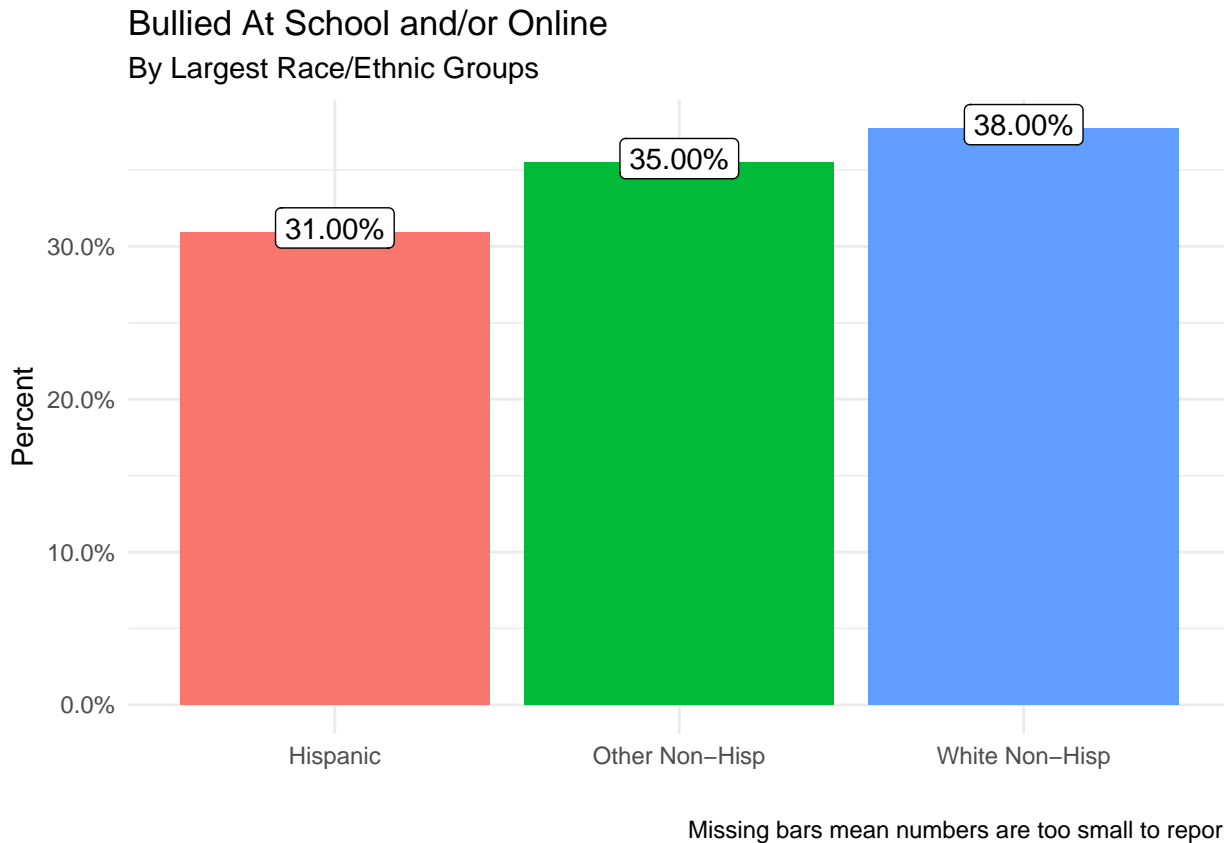
The Department of Public Instruction acknowledges that there are pronounced educational disparities along racial and ethnic lines in Wisconsin. The DPI is committed to addressing such disparities and promoting educational equity. The YRBS helps show some of the non-academic factors that are also relevant to helping all Wisconsin students graduate college and career ready.

For the purposes of this report, students are grouped into three racial/ethnic categories: Hispanic, non-Hispanic White, and Other Non-Hispanic. The “Other Non-Hispanic” grouping is a collective category that compiles many different races. While ideally numbers could be reported separately for each racial group, in the majority of schools the number of students in these individual categories are too small to report. Thus, the grouping is done here to allow for as much reporting as possible while still upholding student privacy and data quality.



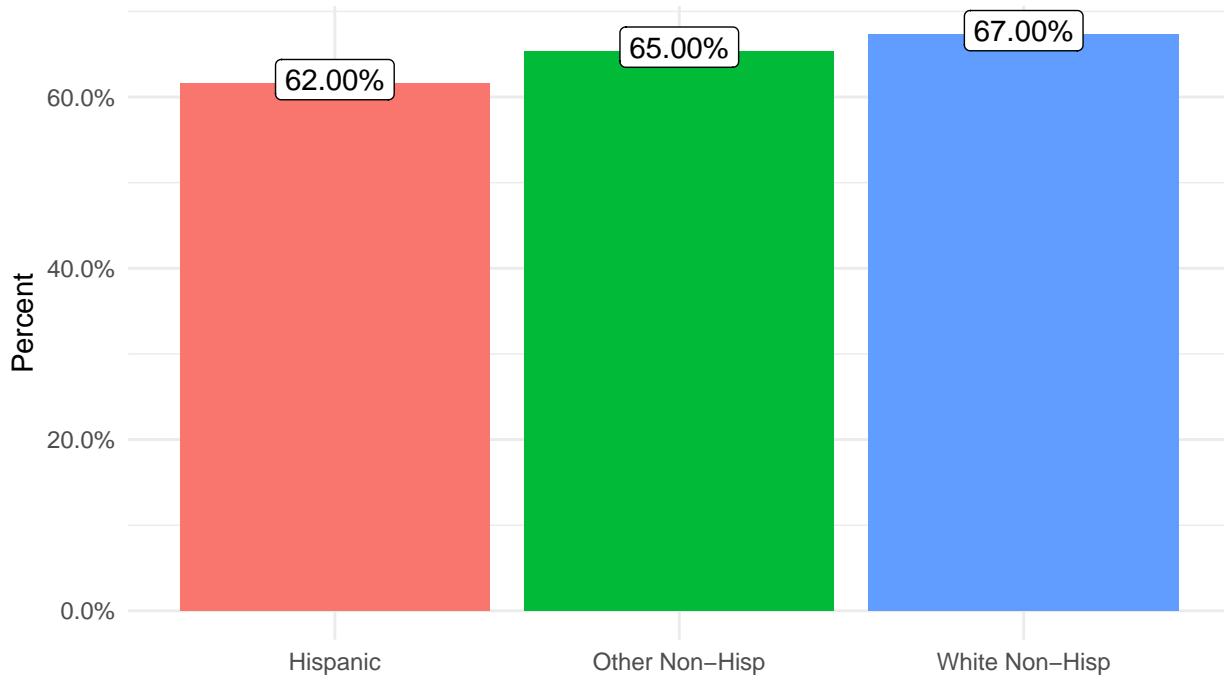
Missing bars mean numbers are too small to report

Students’ sense of belonging can be increased by general efforts to improve school climate, as well as targeted efforts to address any issues that are particularly salient to students of color. While individual schools vary, in general this might include such things as reviewing school disciplinary practices and data for signs of bias or disparities; ensuring that students of color are encouraged to take challenging courses and are offered the same preparation as their peers; ensuring that the school practices and curricula are inclusive; and incorporating student feedback into school change efforts.



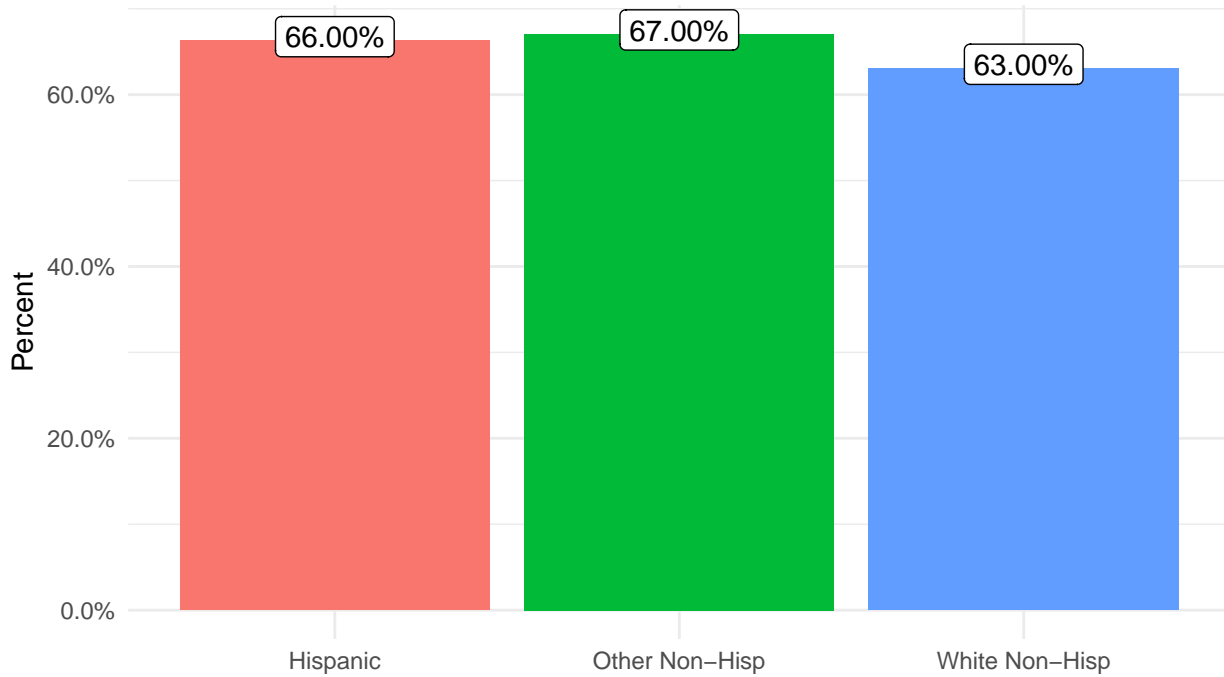
The chart above combines responses to two bullying questions to get a broad sense of bullying. It looks at students whose answers indicated that they had been bullied online, at school, or both.

### Have A Teacher Or Other Adult at School To Talk To By Largest Race/Ethnic Groups



Missing bars mean numbers are too small to report

### Poor Mental Health By Largest Race/Ethnic Groups



Missing bars mean numbers are too small to report

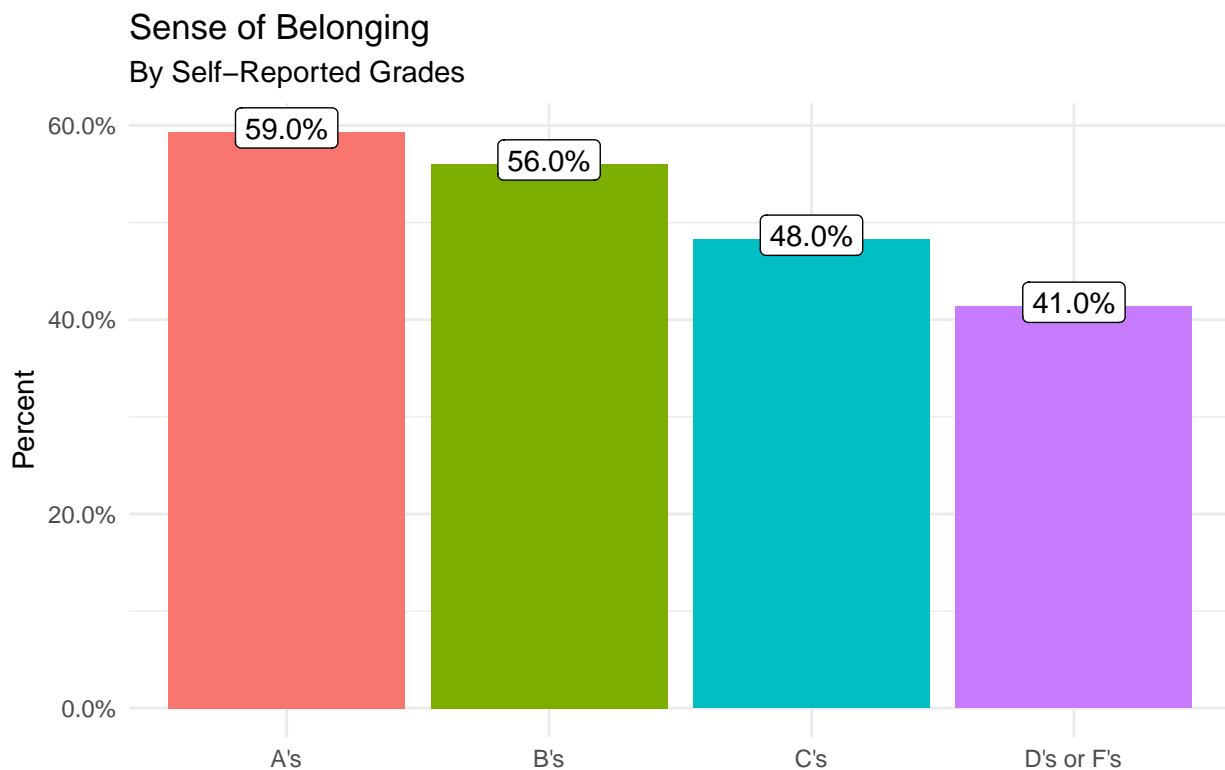


Wisconsin's statewide 2017 YRBS results found notable mental health disparities for students of color (statewide 2019 results were not yet available at the time of this report). For instance, the Center for Disease Control and Prevention's Youth Online analysis tool (<https://nccd.cdc.gov/Youthonline/App/Default.aspx>) shows that African American students in Wisconsin are more likely to have planned a suicide attempt than the national average for African American students (from the national 2017 YRBS; statistically significant at the .05 level). Knowing that some students of color report higher rates of anxiety, depression, non-suicidal self-harm and suicidal thoughts behavior than their peers might help teachers and school officials to be alert to signs of both externalizing and internalizing behavior that could indicate distress. For the specific breakdown of the prevalence of all mental health-related questions, see the question-specific tables at the end of this report.

For more information on how schools can support students of color and become more equitable, see <https://dpi.wi.gov/rti/equity>.

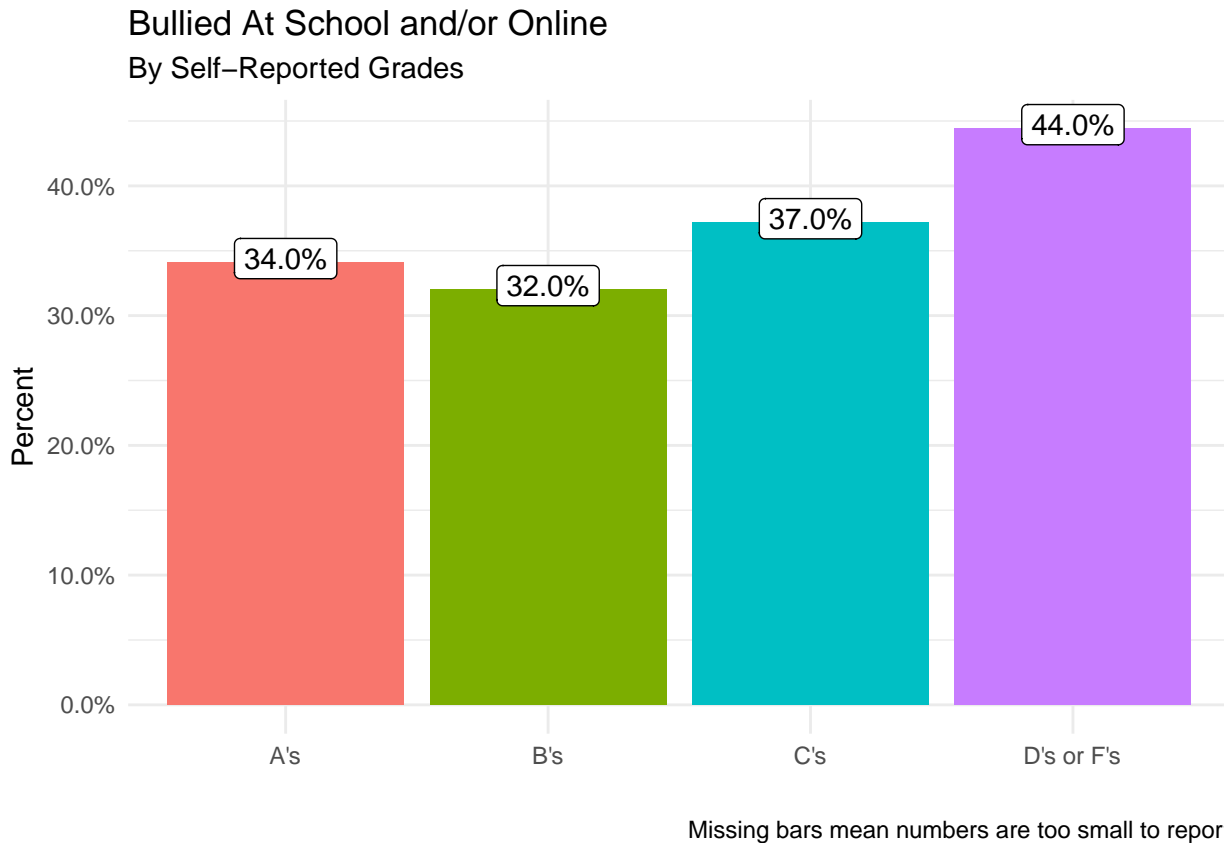
## Students with Low Grades At A Glance

The YRBS asks students to self-report whether they get “Mostly A’s”, “Mostly B’s”, etc. Responses to that question form the basis for the information in this section. The YRBS is a stand-alone, anonymous survey. Therefore, no school records on student grades are ever used. The way the survey is conducted prevents any such use.



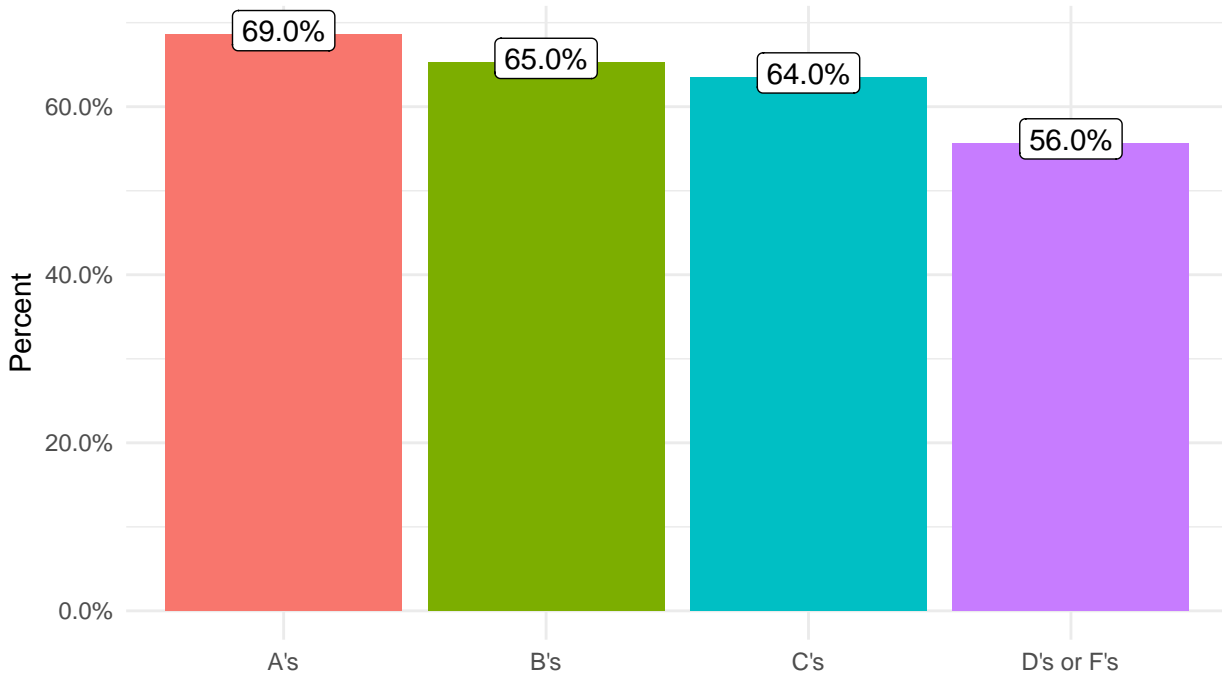
Missing bars mean numbers are too small to report

School belonging and grades are often related. Perhaps it’s not surprising that students who feel less academically inclined, are oftentimes less likely to feel like they belong at school. At the same time, it’s also possible for students’ grades to go down when they feel excluded, marginalized, or just disengaged from school. Schools that provide an array of courses (including the arts and career and technical courses) and extracurricular activities, can help to address this issue.



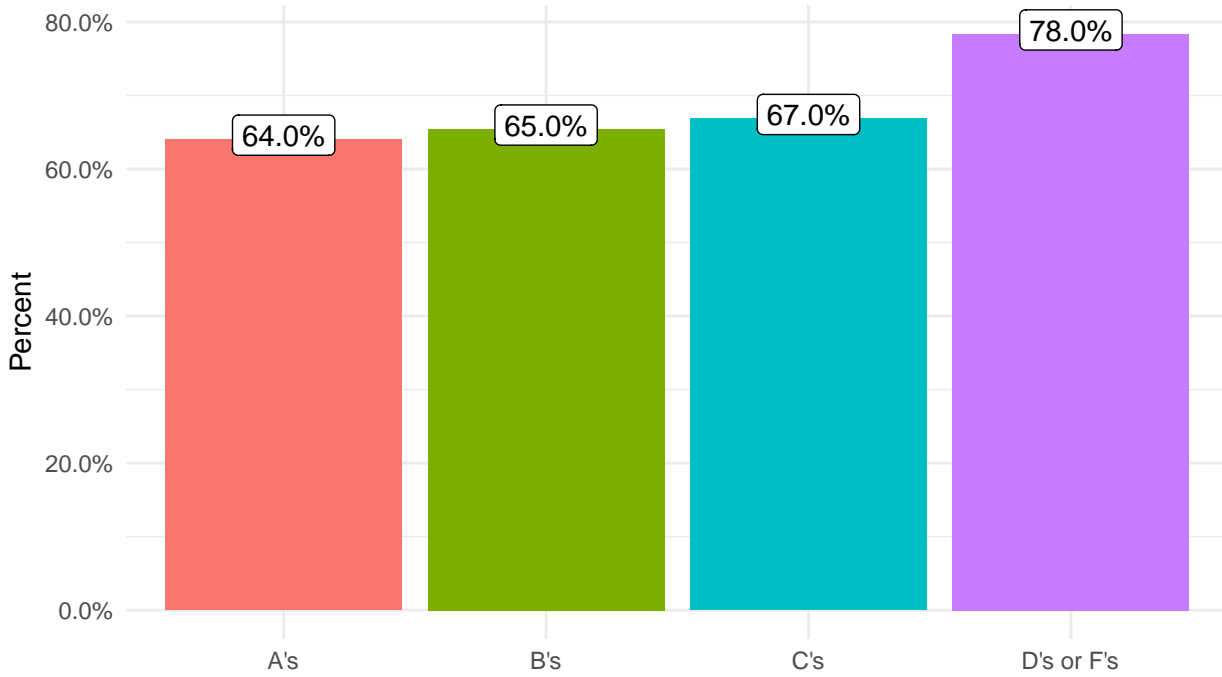
The chart above combines responses to two bullying questions to get a broad sense of bullying. It looks at students whose answers indicated that they had been bullied online, at school, or both.

### Have A Teacher Or Other Adult at School To Talk To By Self-Reported Grades



Missing bars mean numbers are too small to report

### Any Mental Health Concerns By Self-Reported Grades



Missing bars mean numbers are too small to report

The chart above shows the percent of students who answered affirmatively to any of the questions on depression, anxiety, non-suicidal self-harm, or suicidal thoughts and behavior. Wisconsin's 2017 statewide YRBS showed that students with poor grades reported worse mental health outcomes, including anxiety (Wisconsin's 2019 results have not been released as of the date of this report). Being anxious or depressed can make it hard to learn and to follow through on steps such as studying, completing assignments, and turning them in. Similarly, the experience of consistent failure or low performance can exacerbate feelings of depression and anxiety. Teachers and school officials who consider mental wellbeing as a possible factor behind student performance, might be better positioned to route students to resources and to reinvest in low-performing students.

For the specific breakdown of the prevalence of self-reported depression, anxiety, and non-suicidal self-harm, as well as the questions on suicidal ideation and behavior, see the question-specific tables at the end of this report.

## LGBT Students At A Glance\*

\*PLEASE NOTE THAT ONLY MIDDLE SCHOOLS THAT REGISTERED FOR THE “HIGH RISK GROUPS OPTIONAL MODULE” WILL HAVE DATA IN THIS SECTION.

## DATA NOT AVAILABLE: Module not selected district-wide

Sexual minority students tend to be at higher risks than their peers in a number of areas. This section highlights four topic areas related to school connectedness and performance: sense of belonging, bullying, having a teacher to talk to and mental health concerns. LGBT status was based on two YRBS questions: one asking about sexual orientation and the other about gender identity (i.e., transgender vs. cisgender). Students were characterized as “LGBT” if they identified in the YRBS as one or more of the following: lesbian, gay, bisexual, transgender. Students who explicitly identified as straight (in the sexual orientation question) and/or “not transgender” (in the gender identity question) are the comparison group. Students did not have to answer both questions to be included in the analysis, but if they did answer both questions their answers were only included in this analysis if they could clearly and consistently be assigned to LGBT or Straight/Cisgender. Ambiguous responses (e.g. “not sure”) were not used for this particular analysis.

LGBT students tend to have a lower sense of belonging than their peers. However, school climate and culture can influence students’ sense of belonging. Thus, school officials who are concerned about this disparity might look for ways to positively impact school climate overall and for LGBT students in particular.

The chart above combines responses to two bullying questions to get a broad sense of bullying. It looks at students whose answers indicated that they had been bullied online, at school, or both.

LGBT students tend to report higher levels of mental health concerns. They also tend to report fewer protective factors and higher levels of bullying, harassment, marginalization and violent victimization—all of which affect mental and emotional wellbeing (see e.g. Kann et al 2016). The chart above covers students who answered affirmatively to one or more of the YRBS questions on depression, anxiety, non-suicidal self-harm, and suicidal ideation and behavior. Breakdowns for the individual questions can be found in the question-specific in the appendix.

Information for schools on how to support LGBT students can be found at <https://dpi.wi.gov/sspw/safe-schools/lgbt>.

## **Students with Physical Disabilities At A Glance\***

\*PLEASE NOTE THAT ONLY MIDDLE SCHOOLS THAT REGISTERED FOR THE “HIGH RISK GROUPS OPTIONAL MODULE” WILL HAVE DATA IN THIS SECTION.

**## DATA NOT AVAILABLE: Module not selected district-wide**

The middle school high risk group optional module asks students whether they have a physical disability or chronic health condition. Students who answered affirmatively are contrasted here with those who said they did not have such a condition. (*No health records or other sources beyond student responses to this YRBS question are used; student YRBS responses are anonymous and confidential.*)

In general, students who are dealing with disability or chronic illness tend to report more signs of strain and fewer protective factors than their peers. It is also worth noting that in general, people with disabilities are more likely to be victims of violence and abuse than their peers (see e.g. Everett Jones and Lollar, 2008).

As described above, people with disabilities are more likely to experience violence and abuse than people without disabilities (see e.g. <https://www.stopbullying.gov/sites/default/files/2017-09/bullyingtipsheet.pdf>). Additionally, students who have experienced other forms of violence or abuse are at an increased risk of bullying. Those factors, plus the general tendency for students to be targeted for bullying based on lower status or perceived differences, can contribute to potentially higher rates of bullying among students with physical disabilities or chronic health conditions.

The chart above combines responses to two bullying questions to get a broad sense of bullying. It looks at students whose answers indicated that they had been bullied online, at school, or both.

The chart above shows the percent of students who answered affirmatively to any of the questions on depression, anxiety, non-suicidal self-harm, or suicidal thoughts and behavior. (For the specific breakdown of the prevalence of mental health questions, see the question-specific tables at the end of this report.) Physical wellbeing and mental wellbeing are related. If students with disabilities or chronic health conditions feel physically unwell, that can take a toll on their mental health as well. Feeling lonely, marginalized, or being victimized can of course also affect mental health. Schools that help students with health issues to become involved in appropriate physical activity, ensure that such students are connected to staff and are academically challenged, and highlight examples of people with disabilities or health conditions in their curricula, can help with students' general wellbeing. Such steps can complement (not replace) access to mental health care, where appropriate.

## **Students with Special Education Services At A Glance\***

PLEASE NOTE THAT ONLY MIDDLE SCHOOLS THAT REGISTERED FOR THE “HIGH RISK GROUPS OPTIONAL MODULE” WILL HAVE DATA IN THIS SECTION

**## DATA NOT AVAILABLE: Module not selected district-wide**

The middle school high risk groups optional module included a question asking students whether they currently receive special education services or had an individualized education plan (IEP) or 504 plan. Students could answer: “A. Yes, I do”; “B. Not anymore, but I used to”; “C. No, and I never have”; or “D. Not sure”. Students who answered “A. Yes, I do” are categorized here as “Current Services”. Students who answered “B. Not anymore, but I used to” are categorized here as “Past Services”. Students who answered “C. No, and I never have” are categorized here as “Never Services”. Students who answered “D. Not sure” are not included in the charts below, as their response was ambiguous.

Schools were encouraged to survey students with IEPs whenever possible and appropriate. However, it should be noted that some students with IEPs were most likely exempted from taking the YRBS, because the reading level was not appropriate for them or due to other, similar considerations. Thus, the students who indicated IEPs here most likely represent a particular subset of students receiving special education services, in that they are the students who teachers believed were most capable of completing the survey. For that reason, it’s likely that any differences reported here actually understate the differences between students with IEPs overall and their peers. Regardless, it should be noted that the numbers would likely be different if all students with IEPs/504 plans were able to participate.

The chart above combines responses to two bullying questions to get a broad sense of bullying. It looks at students whose answers indicated that they had been bullied online, at school, or both. In general, students with conditions related to special education services are often at higher risk for bullying. See e.g. <https://www.stopbullying.gov/at-risk/groups/special-needs/index.html>

The chart above shows the percent of students who answered affirmatively to any of the questions on depression, anxiety, non-suicidal self-harm, or suicidal thoughts and behavior. For the specific breakdown of the prevalence of mental health questions, see the question-specific tables at the end of this report.



## What helps?

While many factors affect student wellbeing and behavior, there are ways that schools can help. Students who feel seen, supported, included and challenged tend to have better academic and health outcomes. All members of a school community can contribute to a more supportive and inclusive environment through:

- Strong, responsive adult leadership at the district, school, and classroom level
- Having a wide variety of free, readily accessible extracurricular and co-curricular activities that appeal to different types of students, including students with disabilities
- Supportive student programs and organizations. Programs such as Link Crew help students through transitions, while student organizations (e.g., Gay/Straight Alliances (GSA's) or other supportive student groups) offer opportunities for cultural expression
- Equitable access to rigorous academics that engage and push all students to excel
- Curricula that highlight the positive contributions of scholars, artists, or other historical figures who come from a variety of backgrounds, including any of the high-risk groups highlighted in this report
- Classroom practices and school policies that refrain from implicitly or explicitly targeting, shaming or denigrating any social group
- Access to mental health supports as needed
- Access to general health information and health services

### **For more resources and ideas, see:**

DPI's Student Services, Prevention and Wellness (SSPW) Team at <https://dpi.wi.gov/sspw>

DPI's Special Education Team at <https://dpi.wi.gov/sped>

DPI's Equity webpage at <https://dpi.wi.gov/rti/equity>

## APPENDIX A: QUESTION-SPECIFIC TABLES

### Tables of Overall Results

Weighted YRBS Results	
Behavior	Percent
Most of the time or always wear a seatbelt	63%
Most of the time or always wear bike helmet (if ride a bike)	13%
Ate breakfast every day (past 7 days)	36%
Exercise most days (past 7 days)	48%
Participate in school activities, teams, or clubs	53%
Have at least one teacher or other adult at school to talk to	65%
Agree or strongly agree that they belong at school	53%
Agree or strongly agree that teachers care about them	56%
Most of the time or always feel safe at school	54%
Agree or strongly agree that bullying is a problem at school	54%
Bullied on school property (past 12 months)	28%
Electronically bullied (past 12 months)	16%
Composite measure: answered affirmatively to being bullied online and/or at school	34%
Had a weapon at school (past 12 months)	8%
In a physical fight on school property (past 12 months)	41%
Problems with anxiety (past 12 months)	52%
So sad or hopeless that stopped usual activities (past 12 months)	35%
Seriously considered suicide (past 12 months)	24%
Made a suicide plan (past 12 months)	17%
Attempted suicide (past 12 months)	12%
Self-harm (past 12 months)	24%
Composite measure: answered affirmatively to any of the previous six mental health questions	66%
Was offered, sold, or given illegal drugs on school property (past 12 months)	7%
Used any illegal drug besides marijuana (past 12 months)	6%
Smoke cigarettes (past 30 days)	3%
Vaping/juul/e-cigarettes (past 30 days)	9%
Use chew, dip, or other smokeless tobacco (past 30 days)	3%
Use cigars/cigarillos (past 30 days)	4%
Use marijuana (past 30 days)	10%
Drank alcohol (past 30 days)	12%
Missed school due to safety concerns at school or en route (past 30 days)	18%
Sent, received, or shared sexual photos or images (past 30 days)	10%
Ever misused over-the-counter drug	5%
Ever misused prescription pain medicine	10%

<sup>1</sup> – means numbers too small to report at this level.

<sup>2</sup> Composite measures combine responses across two or more questions.

<b>Weighted YRBS Results</b>	
Behavior	Percent
Ever had sexual intercourse	12%
Ever been forced to do anything sexual	10%
Lived in 4 or more residences	38%
Sleep 8 or more hours per night	41%
Spend 3 or more hours per day on phone, Xbox, or other device (excluding use for school work)	63%
Use phone, Xbox or other device after midnight on a school night (not for homework)	66%
Experienced hunger due to lack of food at home (past 30 days)	39%
Most of the time or always feel safe in their neighborhood	62%
Most of the time or always get emotional support when needed	31%
List adult as most likely source of emotional support	41%
Have at least one supportive adult besides parent(s)	74%
Agree or strongly agree that family provides help and support	81%
Have used synthetic marijuana	7%
Have given or received oral sex	9%

<sup>1</sup> Results are based on the grades surveyed.

<sup>2</sup> – means numbers too small to report at this level.

## Tables by Sex

Weighted YRBS Results By Sex		
Behavior	Female	Male
Most of the time or always wear a seatbelt	66%	61%
Most of the time or always wear bike helmet (if ride a bike)	13%	13%
Ate breakfast every day (past 7 days)	30%	43%
Exercise most days (past 7 days)	42%	53%
Participate in school activities, teams, or clubs	51%	54%
Have at least one teacher or other adult at school to talk to	65%	64%
Agree or strongly agree that they belong at school	47%	59%
Agree or strongly agree that teachers care about them	52%	60%
Most of the time or always feel safe at school	52%	57%
Agree or strongly agree that bullying is a problem at school	58%	51%
Bullied on school property (past 12 months)	31%	25%
Composite measure: answered affirmatively to being bullied online and/or at school	38%	31%
Electronically bullied (past 12 months)	19%	14%
Had a weapon at school (past 12 months)	6%	10%
In a physical fight on school property (past 12 months)	34%	47%
Problems with anxiety (past 12 months)	63%	42%
So sad or hopeless that stopped usual activities (past 12 months)	44%	27%
Seriously considered suicide (past 12 months)	32%	17%
Made a suicide plan (past 12 months)	23%	11%
Attempted suicide (past 12 months)	16%	8%
Self-harm (past 12 months)	32%	17%
Composite measure: answered affirmatively to any of the previous six mental health questions	76%	57%
Was offered, sold, or given illegal drugs on school property (past 12 months)	6%	8%
Used any illegal drug besides marijuana (past 12 months)	6%	6%
Smoke cigarettes (past 30 days)	3%	4%
Vaping/juul/e-cigarettes (past 30 days)	9%	9%
Use chew, dip, or other smokeless tobacco (past 30 days)	2%	3%
Use cigars/cigarillos (past 30 days)	3%	5%

<sup>1</sup> – means numbers too small to report at this level.

<sup>2</sup> Composite measures combine responses across two or more questions.

Weighted YRBS Results By Sex		
Behavior	Female	Male
Use marijuana (past 30 days)	9%	10%
Drank alcohol (past 30 days)	13%	10%
Missed school due to safety concerns at school or en route (past 30 days)	22%	15%
Sent, received, or shared sexual photos or images (past 30 days)	10%	11%
Ever misused over-the-counter drug	5%	5%
Ever misused prescription pain medicine	11%	8%
Ever had sexual intercourse	7%	17%
Ever been forced to do anything sexual	12%	9%
Lived in 4 or more residences	42%	35%
Sleep 8 or more hours per night	40%	42%
Spend 3 or more hours per day on phone, Xbox, or other device (excluding use for school work)	66%	60%
Use phone, Xbox or other device after midnight on a school night (not for homework)	70%	62%
Experienced hunger due to lack of food at home (past 30 days)	39%	39%
Most of the time or always feel safe in their neighborhood	61%	64%
Most of the time or always get emotional support when needed	31%	32%
List adult as most likely source of emotional support	36%	47%
Have at least one supportive adult besides parent(s)	76%	72%
Agree or strongly agree that family provides help and support	77%	85%
Have used synthetic marijuana	6%	8%
Have given or received oral sex	6%	12%

<sup>1</sup> – means numbers too small to report at this level.

## Tables by Grade

Weighted YRBS Results By Grade			
Behavior	6th Grade	7th Grade	8th Grade
Most of the time or always wear a seatbelt	65%	63%	61%
Most of the time or always wear bike helmet (if ride a bike)	16%	12%	10%
Ate breakfast every day (past 7 days)	42%	35%	33%
Exercise most days (past 7 days)	48%	49%	46%
Participate in school activities, teams, or clubs	54%	52%	52%
Have at least one teacher or other adult at school to talk to	66%	63%	65%
Agree or strongly agree that they belong at school	54%	53%	52%
Agree or strongly agree that teachers care about them	57%	56%	56%
Most of the time or always feel safe at school	54%	55%	54%
Agree or strongly agree that bullying is a problem at school	59%	54%	50%
Bullied on school property (past 12 months)	31%	28%	24%
Electronically bullied (past 12 months)	17%	17%	15%
Composite measure: answered affirmatively to being bullied online and/or at school	39%	35%	30%
Had a weapon at school (past 12 months)	7%	8%	10%
In a physical fight on school property (past 12 months)	46%	41%	36%
Problems with anxiety (past 12 months)	54%	52%	51%
So sad or hopeless that stopped usual activities (past 12 months)	33%	36%	37%
Seriously considered suicide (past 12 months)	24%	24%	25%
Made a suicide plan (past 12 months)	15%	16%	18%
Attempted suicide (past 12 months)	11%	12%	12%
Self-harm (past 12 months)	24%	25%	25%
Composite measure: answered affirmatively to any of the previous six mental health questions	68%	66%	65%
Was offered, sold, or given illegal drugs on school property (past 12 months)	5%	7%	9%
Used any illegal drug besides marijuana (past 12 months)	5%	6%	7%

<sup>1</sup> – means numbers too small to report at this level.

<sup>2</sup> If grade not surveyed, all values for that grade are 0 or NA.

<sup>3</sup> Composite measures combine responses across two or more questions.

Weighted YRBS Results By Grade			
Behavior	6th Grade	7th Grade	8th Grade
Smoke cigarettes (past 30 days)	3%	3%	3%
Vaping/juul/e-cigarettes (past 30 days)	6%	9%	10%
Use chew, dip, or other smokeless tobacco (past 30 days)	3%	2%	2%
Use cigars/cigarillos (past 30 days)	4%	4%	4%
Use marijuana (past 30 days)	5%	10%	14%
Drank alcohol (past 30 days)	10%	11%	14%
Missed school due to safety concerns at school or en route (past 30 days)	20%	17%	18%
Sent, received, or shared sexual photos or images (past 30 days)	7%	10%	14%
Ever misused over-the-counter drug	4%	6%	7%
Ever misused prescription pain medicine	8%	10%	11%
Ever had sexual intercourse	8%	12%	17%
Ever been forced to do anything sexual	9%	10%	12%
Lived in 4 or more residences	38%	39%	38%
Sleep 8 or more hours per night	49%	41%	33%
Spend 3 or more hours per day on phone, Xbox, or other device (excluding use for school work)	57%	64%	68%
Use phone, Xbox or other device after midnight on a school night (not for homework)	62%	67%	70%
Experienced hunger due to lack of food at home (past 30 days)	40%	39%	37%
Most of the time or always feel safe in their neighborhood	61%	63%	63%
List adult as most likely source of emotional support	48%	39%	35%
Most of the time or always get emotional support when needed	33%	30%	30%
Have at least one supportive adult besides parent(s)	76%	73%	71%
Agree or strongly agree that family provides help and support	84%	81%	78%
Have used synthetic marijuana	6%	7%	9%
Have given or received oral sex	6%	8%	14%

<sup>1</sup> – means numbers too small to report at this level.

<sup>2</sup> If grade not surveyed, all values for that grade are 0 or NA.

**Tables by Largest Race/Ethnic Groups**

<b>Weighted YRBS Results By Largest Race/Ethnic Groups</b>			
Behavior	Hispanic	White Non-Hisp	Other Non-Hisp
Most of the time or always wear a seatbelt	68%	86%	57%
Most of the time or always wear bike helmet (if ride a bike)	9%	35%	10%
Ate breakfast every day (past 7 days)	31%	40%	38%
Exercise most days (past 7 days)	44%	54%	48%
Participate in school activities, teams, or clubs	44%	60%	56%
Have at least one teacher or other adult at school to talk to	62%	67%	65%
Agree or strongly agree that they belong at school	55%	64%	50%
Agree or strongly agree that teachers care about them	55%	63%	56%
Most of the time or always feel safe at school	58%	71%	50%
Agree or strongly Agree that bullying is a problem at school	48%	38%	60%
Bullied on school property (past 12 months)	25%	32%	28%
Electronically bullied (past 12 months)	14%	16%	17%
Composite measure: answered affirmatively to being bullied online and/or at school	31%	38%	35%
Had a weapon at school (past 12 months)	6%	5%	9%
In a physical fight on school property (past 12 months)	29%	22%	49%
Problems with anxiety (past 12 months)	55%	55%	51%
So sad or hopeless that stopped usual activities (past 12 months)	37%	30%	35%
Seriously considered suicide (past 12 months)	24%	20%	25%
Made a suicide plan (past 12 months)	16%	13%	17%
Attempted suicide (past 12 months)	12%	7%	13%
Self-harm (past 12 months)	25%	21%	25%
Composite measure: answered affirmatively to any of the previous six mental health questions	66%	63%	67%
Was offered, sold, or given illegal drugs on school property (past 12 months)	7%	4%	7%
Used any illegal drug besides marijuana (past 12 months)	5%	2%	7%

<sup>1</sup> – means numbers too small to report at this level.

<sup>2</sup> Composite measures combine responses across two or more questions.



<b>Weighted YRBS Results By Largest Race/Ethnic Groups</b>			
Behavior	Hispanic	White Non-Hisp	Other Non-Hisp
Smoke cigarettes (past 30 days)	3%	2%	4%
Vaping/juul/e-cigarettes (past 30 days)	11%	7%	8%
Use chew, dip, or other smokeless tobacco (past 30 days)	2%	1%	3%
Use cigars/cigarillos (past 30 days)	3%	2%	5%
Use marijuana (past 30 days)	9%	4%	11%
Drank alcohol (past 30 days)	14%	12%	10%
Missed school due to safety concerns at school or en route (past 30 days)	19%	13%	19%
Sent, received, or shared sexual photos or images (past 30 days)	10%	5%	11%
Ever misused over-the-counter drug	5%	4%	6%
Ever misused prescription pain medicine	9%	6%	11%
Ever had sexual intercourse	10%	5%	15%
Ever been forced to do anything sexual	9%	6%	12%
Lived in 4 or more residences	36%	25%	41%
Sleep 8 or more hours per night	42%	49%	39%
Spend 3 or more hours per day on phone, Xbox, or other device (excluding use for school work)	65%	60%	62%
Use phone, Xbox or other device after midnight on a school night (not for homework)	63%	46%	71%
Experienced hunger due to lack of food at home (past 30 days)	42%	41%	37%
Most of the time or always feel safe in their neighborhood	65%	78%	59%
Most of the time or always get emotional support when needed	31%	38%	30%
List adult as most likely source of emotional support	33%	43%	44%
Have at least one supportive adult besides parent(s)	73%	78%	73%
Agree or strongly agree that family provides help and support	80%	82%	81%
Have used synthetic marijuana	6%	3%	8%
Have given or received oral sex	7%	5%	11%

<sup>1</sup> – means numbers too small to report at this level.

<sup>2</sup> Composite measures combine responses across two or more questions.

## Tables by Average Grades (Self-Reported)

Weighted YRBS Results By Average Grades (Self-Reported)				
Behavior	A's	B's	C's	D's or F's
Most of the time or always wear a seatbelt	71%	66%	56%	44%
Most of the time or always wear bike helmet (if # ride a bike)	19%	12%	8%	7%
Ate breakfast every day (past 7 days)	40%	36%	32%	33%
Exercise most days (past 7 days)	53%	50%	45%	41%
Participate in school activities, teams, or clubs	59%	56%	50%	40%
Have at least one teacher or other adult at school to talk to	69%	65%	64%	56%
Agree or strongly agree that they belong at school	59%	56%	48%	41%
Agree or strongly agree that teachers care about them	63%	57%	53%	44%
Most of the time or always feel safe at school	59%	57%	50%	41%
Agree or strongly Agree that bullying is a problem at school	52%	54%	57%	55%
Bullied on school property (past 12 months)	28%	25%	30%	36%
Electronically bullied (past 12 months)	16%	15%	18%	24%
Composite measure: answered affirmatively to being bullied online and/or at school	34%	32%	37%	44%
Had a weapon at school (past 12 months)	8%	7%	10%	16%
In a physical fight on school property (past 12 months)	33%	40%	49%	52%
Problems with anxiety (past 12 months)	52%	51%	53%	58%
So sad or hopeless that stopped usual activities (past 12 months)	33%	34%	36%	46%
Seriously considered suicide (past 12 months)	22%	22%	24%	37%
Made a suicide plan (past 12 months)	15%	16%	16%	27%
Attempted suicide (past 12 months)	10%	11%	13%	22%
Self-harm (past 12 months)	21%	24%	25%	37%
Composite measure: answered affirmatively to any of the previous six mental health questions	64%	65%	67%	78%
Was offered, sold, or given illegal drugs on school property (past 12 months)	7%	7%	8%	13%
Used any illegal drug besides marijuana (past 12 months)	5%	6%	7%	14%
Smoke cigarettes (past 30 days)	3%	3%	3%	10%
Vaping/juul/e-cigarettes (past 30 days)	7%	8%	10%	20%

<sup>1</sup> – means numbers too small to report at this level.

<sup>2</sup> Composite measures combine responses across two or more questions.

<b>Weighted YRBS Results By Average Grades (Self-Reported)</b>				
Behavior	A's	B's	C's	D's or F's
Use chew, dip, or other smokeless tobacco (past 30 days)	2%	2%	3%	6%
Use cigars/cigarillos (past 30 days)	4%	4%	5%	10%
Use marijuana (past 30 days)	7%	9%	13%	21%
Drank alcohol (past 30 days)	10%	11%	14%	21%
Missed school due to safety concerns at school or en route (past 30 days)	17%	16%	21%	29%
Sent, received, or shared sexual photos or images (past 30 days)	9%	10%	13%	19%
Ever misused over-the-counter drug	4%	5%	8%	14%
Ever misused prescription pain medicine	8%	9%	12%	17%
Ever had sexual intercourse	11%	12%	17%	21%
Ever been forced to do anything sexual	11%	10%	11%	16%
Lived in 4 or more residences	34%	38%	42%	46%
Sleep 8 or more hours per night	47%	42%	36%	29%
Spend 3 or more hours per day on phone, Xbox, or other device (excluding use for school work)	58%	64%	66%	69%
Use phone, Xbox or other device after midnight on a school night (not for homework)	57%	66%	74%	77%
Experienced hunger due to lack of food at home (past 30 days)	34%	38%	43%	46%
Most of the time or always feel safe in their neighborhood	64%	66%	58%	55%
Most of the time or always get emotional support when needed	35%	32%	27%	26%
List adult as most likely source of emotional support	45%	44%	39%	35%
Have at least one supportive adult besides parent(s)	73%	76%	76%	70%
Agree or strongly agree that family provides help and support	86%	83%	77%	69%
Have used synthetic marijuana	5%	7%	9%	17%
Have given or received oral sex	8%	9%	12%	17%

<sup>1</sup> – means numbers too small to report at this level.

## Tables by Food Insecurity (Self-Reported)

Weighted YRBS Results By Food Insecurity Status		
Behavior	Food Insecure	Not Food Insecure
Most of the time or always wear a seatbelt	63%	64%
Most of the time or always wear bike helmet (if ride a bike)	10%	14%
Ate breakfast every day (past 7 days)	27%	42%
Exercise most days (past 7 days)	44%	50%
Participate in school activities, teams, or clubs	51%	54%
Have at least one teacher or other adult at school to talk to	61%	67%
Agree or strongly agree that they belong at school	47%	56%
Agree or strongly agree that teachers care about them	53%	58%
Most of the time or always feel safe at school	51%	58%
Agree or strongly agree that bullying is a problem at school	57%	52%
Bullied on school property (past 12 months)	34%	24%
Electronically bullied (past 12 months)	20%	14%
Composite measure: answered affirmatively to being bullied online and/or at school	41%	30%
Had a weapon at school (past 12 months)	9%	7%
In a physical fight on school property (past 12 months)	39%	41%
Problems with anxiety (past 12 months)	63%	46%
So sad or hopeless that stopped usual activities (past 12 months)	44%	29%
Seriously considered suicide (past 12 months)	32%	19%
Made a suicide plan (past 12 months)	23%	13%
Attempted suicide (past 12 months)	16%	9%
Self-harm (past 12 months)	33%	20%
Composite measure: answered affirmatively to any of the previous six mental health questions	77%	60%
Was offered, sold, or given illegal drugs on school property (past 12 months)	8%	6%
Used any illegal drug besides marijuana (past 12 months)	7%	5%
Smoke cigarettes (past 30 days)	4%	3%
Vaping/juul/e-cigarettes (past 30 days)	11%	7%
Use chew, dip, or other smokeless tobacco (past 30 days)	3%	2%
Use cigars/cigarillos (past 30 days)	5%	3%

<sup>1</sup> – means numbers too small to report at this level.

<sup>2</sup> Composite measures combine responses across two or more questions.

<b>Weighted YRBS Results By Food Insecurity Status</b>		
Behavior	Food Insecure	Not Food Insecure
Use marijuana (past 30 days)	11%	9%
Drank alcohol (past 30 days)	15%	9%
Missed school due to safety concerns at school or en route (past 30 days)	25%	14%
Sent, received, or shared sexual photos or images (past 30 days)	13%	9%
Ever misused over-the-counter drug	7%	4%
Ever misused prescription pain medicine	13%	7%
Ever had sexual intercourse	12%	12%
Ever been forced to do anything sexual	13%	9%
Lived in 4 or more residences	39%	38%
Sleep 8 or more hours per night	35%	45%
Spend 3 or more hours per day on phone, Xbox, or other device (excluding use for school work)	67%	60%
Use phone, Xbox or other device after midnight on a school night (not for homework)	70%	64%
Experienced hunger due to lack of food at home (past 30 days)	100%	0%
Most of the time or always feel safe in their neighborhood	56%	66%
Most of the time or always get emotional support when needed	24%	37%
List adult as most likely source of emotional support	35%	46%
Have at least one supportive adult besides parent(s)	73%	74%
Agree or strongly agree that family provides help and support	72%	87%
Have used synthetic marijuana	9%	6%
Have given or received oral sex	9%	9%

<sup>1</sup> – means numbers too small to report at this level.

## APPENDIX B: Question-Specific Tables for High Risk Groups Optional Module Questions

## DATA NOT AVAILABLE: Module not selected district-wide

Tables by LGBT Status

## Tables by Physical Disability (Self-Reported)

## DATA NOT AVAILABLE: Module not selected district-wide

## Tables by Special Education Services (Self-Reported)

## DATA NOT AVAILABLE: Module not selected district-wide



## APPENDIX C: OPTIONAL MODULE RESULTS

### Optional Module 1: Drug-Free Communities

## DATA NOT AVAILABLE: Module not selected district-wide

## **Optional Module 2: Youth Tobacco**

## DATA NOT AVAILABLE: Module not selected district-wide

### **Optional Module 3: Adversity and Protective Factors**

## DATA NOT AVAILABLE: Module not selected district-wide

## **Optional Module 4: School Climate**

## DATA NOT AVAILABLE: Module not selected district-wide

## TECHNICAL NOTES

### SAMPLING:

As noted previously, schools were encouraged to use a census (school-wide) approach to their local data collection. For official State of Wisconsin statistics, a two-stage cluster approach is utilized to generate a representative sample of public high school students in Wisconsin. For more information, see CDC's most recent YRBS Data User's Guide.

### DATA QUALITY EDITS

This report replicates CDC's data edits for all questions that appear on Wisconsin's YRBS. Those data edits can be found in CDC's 2017 YRBS Data User's Guide, which is available at: [https://www.cdc.gov/healthyouth/data/yrbs/pdf/2017/2017\\_YRBS\\_Data\\_Users\\_Guide.pdf](https://www.cdc.gov/healthyouth/data/yrbs/pdf/2017/2017_YRBS_Data_Users_Guide.pdf).

For cases in which Wisconsin's survey included questions not included in the CDC data user's guide, the logic of the CDC guide was extended to include the Wisconsin-specific questions.

### WEIGHTING

Post-stratification weights or raking was used to account for any differences between the school (or district) composition and the composition of survey respondents. Raking was employed to reflect the surveyed population. If the surveyed population differed from the district population (e.g., if the school only surveyed certain grades), then the results reflect the population surveyed rather than the district as a whole.

Raking categories were grade by sex (e.g., 6th grade females) and three race/ethnic categories: Hispanic, Non-Hispanic White, Non-Hispanic Other. Those three categories were chosen to best fit the most number of schools. Population figures for each school and district were drawn from the student enrollment data provided by schools to the Department of Public Instruction. A minimum weighted count of 15 was used as the threshold for applying raked weights. For instance, if there were fewer than 15 Hispanic students in the district, then that district's results were not weighted by the race/ethnicity variable; the same applies to grade by sex.

**SIGNIFICANCE LEVELS** Significant levels are not displayed in this report, and results are presented regardless of whether or not they meet the threshold for statistical significance. This is in line with how DPI has previously made data available to schools. It is also helpful for small and medium sized schools, which are less likely to have results that attain statistical significance due to their size. Results in the State of Wisconsin YRBS do include information on significance levels. Schools can refer to the information on DPI's YRBS webpage and CDC's Youth Online data query tool to learn which associations are significant at the state and national level.

**REDACTION** Data redaction for YRBS 2019 school and district-level reports relies on primary suppression for a numerator cell size between one and five. This aligns with DPI data suppression policy for sensitive topics and reports. This means that if the number of students (overall or in a reported subgroup) who reported the behavior is between one and five, the results will not be displayed. If the number of students reporting the risk behavior (or other reported behavior) is zero, the percent will be displayed.

Where the data are broken down across comparison groups (e.g., males vs. females or across grades 6, 7 and 8), complementary suppression is employed. This means that if one subgroup (e.g., grade

6) has too few respondents to report, then the next lowest response group (e.g., grade 7) is also redacted. This helps protect student privacy by preventing readers from using other information in the report to guess the redacted number. Complementary suppression is part of DPI's suppression rules policy because it helps to protect student privacy. Upholding student privacy is particularly important in maintaining the integrity of the YRBS and ensuring that students' responses are truly anonymous and confidential.

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