

# 2025 Healthy Youth Survey Interpretive Guide

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## **Making the Most of Survey Data:**

**A Guide for Exploring and Interpreting the Results of the  
Washington State Healthy Youth Survey (2025)**

## **Sponsoring Washington State Agencies:**

Department of Health

Health Care Authority

Liquor and Cannabis Board

Office of Superintendent of Public Instruction

Updated by:

Looking Glass Analytics, Inc.

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## **Introduction**

The Healthy Youth Survey (HYS), a biennial survey of youth in Washington state, invites students to share about their wellbeing, behaviors, attitudes, community and school experiences, and more. The HYS focuses on a broad range of topics, including mental health, substance use, physical movement, social engagement and support, families, and school experience. The survey also includes questions about risk and protective factors, which are attitudes and opinions that research has shown are linked to health outcomes.

The 2025 survey was the 19th statewide survey of Washington students to better understand the nature and extent of adolescent health behaviors in Washington (beginning in 1988). The current statewide survey, known as the Healthy Youth Survey, began in 2002. The 2025 Healthy Youth Survey was sponsored by the Department of Health (DOH); the Office of Superintendent of Public Instruction (OSPI); the Health Care Authority - Division of Behavioral Health and Recovery (DBHR); and the Liquor and Cannabis Board (LCB). Representatives from each of these agencies worked together to develop, plan, and implement the survey. The survey was administered under contract with Looking Glass Analytics, Inc. This biennial survey is administered to 6th-12th grade students across the state. Participation has been steadily increasing over time, with a drop in 2021 due to the COVID pandemic. In 2025, over 213,000 students from all 39 counties participated in the survey.

The results of the 2025 Healthy Youth Survey meet a wide variety of state and local needs for:

- Empirical needs assessment data necessary for planning prevention and early intervention programs.
- Information on trends in student substance use and misuse as well as associated risk and protective factors.

- Information on the progress of drug education programs funded under the federal Safe and Drug-Free Schools and Communities Act and the state Uniform Alcohol and Controlled Substances Act.
- Information on the progress of the state's attainment of the national public health objectives contained in Healthy People 2030 and the progress of state-funded programs.
- Data on risk and protective factors that can be used by state agency staff, local schools, and community members as they plan or refine school- and community-based prevention and intervention programs.

## **How Can the Data be Used?**

Schools and Community Partners can use the data from the 2025 Healthy Youth Survey to:

- Learn the prevalence of health-related behaviors among students.
- Understand the school climate.
- Contribute to the School Improvement Planning process.
- Assist with creating Principles of Effectiveness plans.
- Help inform other needs assessments and strategic plans.
- Help justify new school programs or projects.
- Assist with evaluating or improving existing school programs or projects.
- Provide information for grant applications.

There is mounting evidence supporting the concept that reducing students' health-risk behaviors can have a positive impact on their academic performance. The 2025 Healthy Youth Survey measures a number of health-related issues such as substance use, food access, housing stability, physical activity, asthma, depression, violence, and safety. Any of these issues can distract students from school. Survey results may help identify areas where students need help so that they can be successful at school. However, the usefulness of the data depends on several factors described below.

## **Participation in the Survey**

Public schools in Washington State with students in Grades 6, 8, 10, or 12 were invited to participate in the survey. Individual student participation was voluntary, and measures are taken to ensure student privacy. Participating schools provided alternative activities for students who chose not to participate or whose parents opted them out of participating. The statewide results presented in the frequency reports are based on a sample chosen to be representative of students statewide. A detailed description of the sampling plan and other sampling issues will be included in the Healthy Youth Survey 2025 Analytic Report (available July 2026 at <https://www.askhys.net/SurveyResults/OtherStateReports>).

## **About the Interpretive Guide**

Each school, district, county, and Educational Service District (ESD) with sufficient student participation in the Healthy Youth Survey 2025 received survey results. These results, which are highly specific to the local area, can be of enormous value in planning, implementing, and evaluating programs to address adolescent behavior. To assist data users, this Interpretive Guide has been made to aid in reading frequency reports and interpreting results. This guide provides information that will help those involved in local program planning make the most of local survey results. Readers are encouraged to use the interpretive guide and survey results jointly, often thinking about how the results can help inform decisions regarding local program planning, implementation, and evaluation.

## **Statistical Issues**

### **Validity and Reliability**

A survey question is *valid* if it accurately measures the concept it is intended to measure. A survey question is *reliable* if it consistently produces the same results under the same circumstances. We attempted to maximize the validity and reliability of the 2025 Healthy Youth Survey by using questions from established surveys, ensuring standardized administration procedures, and conducting quality control processes to identify and remove unlikely or impossible results.

Many of the questions included on the Healthy Youth Survey originated from 4 established surveys that have been used throughout the United States, some for more than 25 years:

- Monitoring the Future survey sponsored by National Institute on Drug Abuse (2025)
- The University of Washington Social Development Research Group's Risk and Protective Factor Assessment instrument (Arthur, Hawkins, Catalano, & Pollard, 1998)
- The U.S. Centers for Disease Control and Prevention's Youth Risk Behavior Survey (2025)
- The U.S. Centers for Disease Control and Prevention's Youth Tobacco Survey (2023)

Each of these surveys has been subjected to scientific research regarding reliability and validity and has been field tested extensively. Most of the questions on the 2025 edition appeared on previous versions of the statewide survey, although some were added or modified for the current survey administration. When possible, new survey questions were tested with youth focus groups.

The validity of self-report student surveys often comes under question, especially when reported rates of behavior seem higher or lower than might be expected. According to the Centers for Disease Control and Prevention, "Research indicates that data of this nature may be gathered as credibly from adolescents as from adults. Internal reliability checks help identify the small

percentage of students who falsify their answers. To obtain truthful answers, students must perceive the survey as important and know procedures have been developed to protect their privacy and allow for anonymous participation” (Centers for Disease Control and Prevention, 2025). The HYS includes language at the start to help students understand that their voices matter and how the survey will be used.

## **Are My School, District, ESD, or County Data Valid and Representative?**

Research shows that surveys like the Healthy Youth Survey can give valid results if youth can take the survey in a safe environment.

The following set of instructions were given to schools administering the 2025 Healthy Youth Survey to ensure validity of the student answers, such as:

- The survey was administered during structured classroom time and in a ‘test-like’ environment to ensure the quality of the data and to help protect student privacy.
- Students were informed of the importance of the survey by adults administering the survey through verbal instructions.
- Students were informed that “screen recording, keystroke tracking, and video capture software has been turned off/disabled on school-issued devices used to take the survey” and they can skip any questions they don’t want to answer. Nowhere on the survey were students asked for their name, nor were there any codes to connect an individual student to their responses.
- Alternative and online educational schools were allowed to administer the survey remotely to accommodate remote learning students if they could give the survey in a proctored classroom-like environment.
- Two questions were used to screen students from participating if they were not in an environment where they could answer privately and honestly.

Consider whether these instructions were followed and whether students were provided with a space that allowed them to respond privately and honestly to questions on a computer. These same considerations apply for district, ESD, and county reports though this information may not be available without discussing with schools. During data processing and analysis, responses were carefully screened for evidence that students may have been dishonest or not taken the survey according to the administration guidelines. Surveys with a certain combination of concerning features were removed from the datasets. Among these are:

- Having three or more inconsistent answers (e.g., if a student reported never drinking alcohol in their life and reported drinking alcohol in the past 30 days and/or provided other responses that were similarly inconsistent with each other).
- Indicating that they took a high level of a substance (e.g., reporting the use of all substances every day).
- Dishonesty (if a student said they were not honest with their responses).
- Submitting the survey outside of school hours/the administration window.
- Incomplete/duplicate responses.

Results for individual questions were also removed if they had improbable response patterns (e.g., selecting contradictory responses on multiple “check all that apply” questions).

Survey results are representative when the answers given by the students who participated in the survey in a particular population (e.g., a single school district) who took the survey reflect the answers that all students in that same population. If administration procedures were not followed, if groups of students were missing, or if there was low participation (below 70%), then survey results might not represent the students in the school, district, ESD, or county and results should be interpreted with caution.

If administration procedures were followed, groups of students were not missing, and participation rate was higher than 70%, then one should feel confident that results are representative.

## **What are Confidence Intervals?**

In frequency reports, responses to the 2025 Healthy Youth Survey are displayed as a *point estimate* of the percentage of the students who gave an answer and a *margin of error* for the percentage (e.g., 83% plus or minus 5%), which can be used to form a *confidence interval (CI)*. A point estimate is our “best guess” of the true value based on the information collected in the survey. A CI gives the estimated range of values that is likely to include the true population value based on survey results.

***Confidence intervals give an estimate of how precise the results are.*** The CIs presented in frequency reports are symmetrical; you can calculate the upper and lower values of the 95% CI by adding or subtracting the value to the right of the point estimate. For a result of 83% plus or minus 5%, 95 percent of the time the true percentage falls somewhere between 78% and 88%.

The size of the confidence intervals in the HYS will be smaller when:

- There are more students taking the survey.
- There is less variability in how students answered a question.

The CI does not account for bias in the estimate. Bias refers to systematic errors that result in estimates that deviate from the “truth.” For example, a low participation rate in a given school, district, or county can create bias which will not be reflected in the CI, since those who participate may answer differently than those who did not participate.

The 95% CIs presented in this report are calculated using SAS (SAS Institute Inc.) and the default options for the PROC SURVEYFREQ command. This relies on Taylor Series linearization to generate a symmetrical CI that accounts for the survey sampling design and clustering. Note that in this report, CIs are not bounded by zero and lower limits might be negative. Please use caution when interpreting lower confidence limits that cross zero. SAS Institute Inc. provides more information on the calculations used in this report here:

[https://support.sas.com/documentation/cdl/en/statug/63033/HTML/default/viewer.htm#statug\\_surveyfreq\\_sect004.htm](https://support.sas.com/documentation/cdl/en/statug/63033/HTML/default/viewer.htm#statug_surveyfreq_sect004.htm)

## **How Can Confidence Intervals Be Used to Help Guide the Interpretation of Your Results?**

A statistical test can tell whether the difference between groups is greater than would be expected by chance. If a difference as large as the one we see occurs less than 5% of the time by chance, we say that the difference is statistically significant (at a 0.05 significance level) . As the number of students taking the survey gets smaller, a larger difference is needed to rule out chance. In some cases, we can use confidence intervals to determine whether the difference between a local prevalence (percent) and the state sample is *statistically significant* —that is, whether school, district, or county truly has a different frequency of a particular behavior from the state or the apparent difference was likely to have resulted by chance.

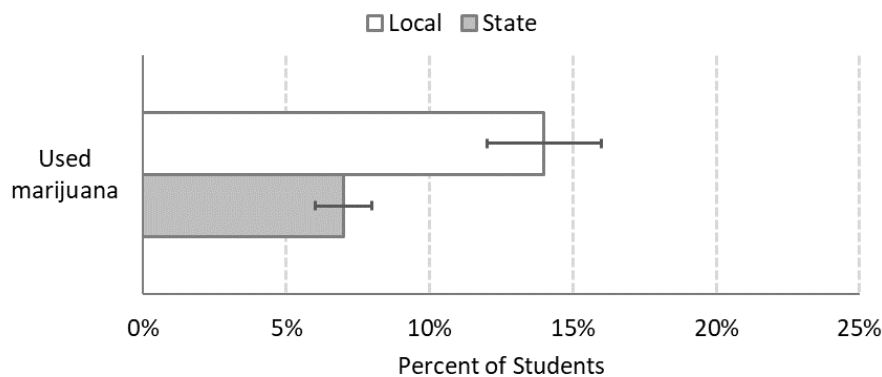
Comparing the CIs for point estimates between groups does not replicate a formal statistical test, but it can be an easy and quick tool to assess statistically significant differences in estimates between local and statewide results.

If CIs DO NOT overlap, there is a statistically significant difference in the estimate between the local and statewide results (see example in Chart 1). If CIs DO overlap, it suggests there is no statistically significant difference between the groups (see example in Chart 2). However, there could still be a statistically significant difference between the true values of the groups that CIs

may not be able to detect, especially when estimates are based on a small number of responses or if the two confidence intervals overlap each other, but do not overlap the other point estimate. If possible, consider a formal statistical test to determine whether the two groups are different (see the example in Chart 3). If CIs overlap so much that the point estimate of at least one group falls within the CI of the other group, then it is unlikely there is a significant difference in the true values of these groups.

Examples: Suppose the percentage of 10<sup>th</sup> Grade students at a Washington high school who used marijuana in the past 30 days is 14% ± 2 (between 12% and 16%) and the percentage of 10<sup>th</sup> Grade students in the statewide sample who used marijuana is 7% ± 1 (between 6% and 8%, see Chart 1). Because statewide marijuana use is unlikely to be more than 8% and school marijuana is unlikely to be less than 12%, we can be reasonably certain that marijuana use at the school is greater than use statewide. Note that in Chart 1 the error bars (representing the confidence interval) at the end of each bar of the graph *do not* overlap, and the difference is considered statistically significant.

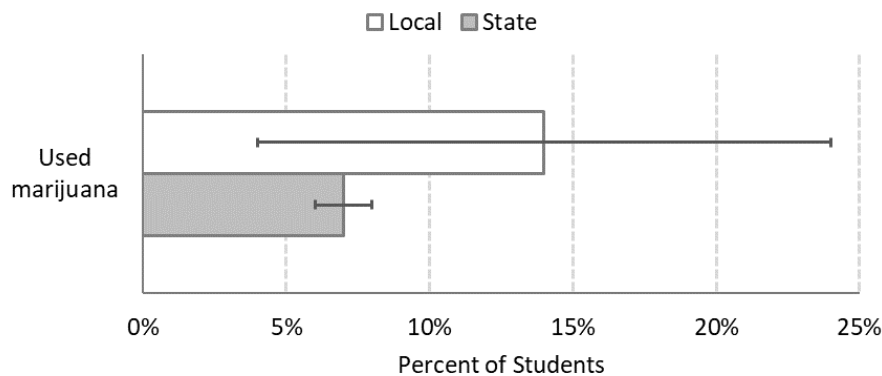
**Chart 1: Example of a significant difference**



If the margin of error for the Washington high school in Chart 1 was 10% rather than 2%, then the true marijuana use rate could fall anywhere between 4% and 24% (see Chart 2). Thus, the school rate could be less than the statewide rate (e.g., 4% compared to a statewide rate of 6%), more than the statewide rate (e.g., 24% compared to a statewide rate of 8%), or the same as the

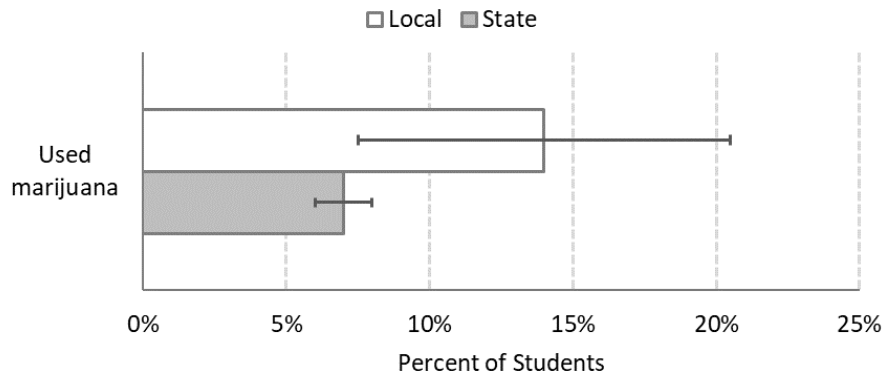
statewide rate (e.g., both 7%). Note that in Chart 2 the error bar at the end of the bar for the local sample *does* overlap the point estimate for the state sample, and the difference is not considered statistically significant. As noted earlier, if the confidence intervals overlap each other but not the point estimates, a formal statistical test could determine whether the difference is statistically significant.

**Chart 2: Example of a non-significant difference**



If the margin of error for the Washington high school in Chart 1 was 6.5%, then the true marijuana use rate could fall anywhere between 7.5% and 20.5% (see Chart 2). Thus, the school rate could be slightly less than the statewide rate (e.g., 7.5% compared to a statewide rate of 8%). Note that in Chart 3 the error bars slightly overlap but the error bar for the school does not cross the point estimate for the state so we can't determine if the difference is significantly significant or not. We'd need to do a statistical test to find out.

**Chart 3: Example of a difference that needs further testing**



In frequency reports, a single asterisk (\*) between two columns of results in this report indicates that the 95% CI for the local and statewide estimates DO NOT overlap. For example, in a district report, if the percentage of students absent from school for 3 or more days for any reason was 20% (±5) for the district and 35% (±2) statewide, there would be an asterisk between the two columns to highlight that the 95% confidence intervals (CI) do not overlap, and the difference between groups is statistically significantly different.

25. During the past 30 days, on how many days have you been absent from school for any reason? Include any day that you missed at least half of the school day.	Local Students % (±CI) (n=200)	Statewide % (±CI) (n=7,000)
0 days	35.0% (±5.0)	30.0% (±2.0)
1 or 2 days	40.0% (±5.0)	38.0% (±2.0)
3 or more days	25.0% (±5.0)	* 32.0% (±2.0)

### Statistical vs. Practical Significance

Differences in results between groups may be considered from either a statistical or a practical point of view. *Statistical significance* is influenced by several factors including the number of students who participated in the survey and the amount of variability in responses (whether or not most students answered a question the same way).

*Practical significance* is a judgment of whether differences are programmatically meaningful. For instance, the difference between school marijuana use of 11% and statewide use of 9% could,

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depending on the margins of error, be statistically significant. From a practical point of view, this difference is probably not large enough to justify programmatic changes at the school.

When interpreting your results, consider **both** the practical and statistical significance of results.

For more information on confidence intervals, see the Understanding Results - Confidence Interval section of the frequency report or visit:

<https://doh.wa.gov/sites/default/files/legacy/Documents/1500/ConfIntGuide.pdf>.

An Excel tool for determining statistical significance is posted on the AskHYS Data Resources page at <https://www.askhys.net/Resources/Data>.

## Frequency Report Overview

The following topics are covered in the frequency reports, as detailed in its Table of Contents:

- Demographics and general information
- Alcohol, tobacco, and other drug use
- Other health concerns
- School climate
- Risk and protective factors

Additional information about each topic area will be made available in the Healthy Youth Survey 2025 Analytic Report of the statewide survey results (available in July 2026 at: <https://www.askhys.net/SurveyResults/OtherStateReports>). For general information about these topics, readers are encouraged to contact the sponsoring agencies or to visit the web sites of relevant federal and state agencies.

## Types of Frequency Reports

The main type of frequency report includes two columns of individual grade results, one column for local results and another column for statewide results. Results for a school, district, county, or ESD are referred to as *local* results. Results from the statewide sample are referred to as *statewide* results. The other type of frequency report is a multiple-grade-level report without a statewide comparison. Multi-grade reports include four columns – one for 6<sup>th</sup> grade results, one for 8<sup>th</sup> grade results, one for 10<sup>th</sup> grade results, and another for 12<sup>th</sup> grade results. A statewide multiple-grade report was also generated and can be used for comparison with local results.

Starting in 2014, “small” school districts were allowed to survey additional grade levels – grades 7, 9 and 11. Districts are considered to be “small” if they have 150 students or fewer in the surveyed grade levels. Districts that survey these additional grades and meet minimum reporting requirements also receive additional individual grade-level reports for the additional grades,

combined grade reports for “middle school” that present grades 6, 7 and 8 combined together, and combined grade reports for “high school” that presented grades 9, 10, 11 and 12 combined together. They could also receive multiple-grade reports that included four columns for grades 6, 7, 8 and middle school combined and five columns for grades 9, 10, 11 and 12 and high school combined.

There is also one other set of frequency reports for non-geographic subpopulations. These frequency reports focus on a group of youth with some shared identity (e.g., Black/African American) or experience (e.g., alcohol use). One column in these reports is for students with that shared identity or experience and the other is for other youth in the statewide comparison.

## **Survey Versions**

The 2025 HYS was administered as an electronic survey, in-person, at school. Alternative Learning Environments (ALEs) or virtual schools unable to administer the survey in-person, during school could request a remote administration of the HYS, provided they could ensure all of the following:

- A synchronous environment where students log in during a live class period with an instructor to take the survey
- “Test-like” conditions to ensure data quality and student privacy
- The survey is taken during normal school hours during a 45-minute period
- Students are not permitted to complete the survey as homework
- The survey is not emailed out to students ahead of time, posted online, or shared on social media

There are two versions of the 2025 HYS. The elementary survey was given to students in grade 6 (and grade 7 in small school districts) and the secondary survey was given to students in grades 8, 10, and 12 (and grades 9 and 11 in small school districts). The elementary survey is shorter and has a single set of simplified questions.

The secondary survey follows a “core-bank” model, which allows more questions to be asked while also managing the length of the survey. Below are key elements of the survey

- **Core questions:** a standard set of questions that were asked of all students taking the secondary survey (grade 8 and older). A list of core questions is available on the last page of all 2025 frequency reports.
- **Bank questions:** questions that were randomized so that approximately half of the students taking the secondary survey received the question (grades 8 and older).
- **Blocks:** Survey questions were organized, by topic, into blocks. On the secondary survey, a block contained either only core questions or only bank questions.
- **Randomization:** The same set of questions is asked to all students taking the elementary survey, but after the demographics block, the order of the blocks is randomized. Not all questions were asked of all students taking the secondary survey. Core questions were administered to every student taking the secondary survey. Bank questions were randomized to approximately half of students taking the secondary survey.
- **Skip logic:** allowed for students to be sent to a future point or end of the survey based on how they answered a question. For example, if a student responded they did not drink alcohol in the past 30 days, then they are not asked if they binge drank alcohol in the past two weeks.

The Secondary survey included seven questions on sexual behavior and sexual violence. Schools that did not want to administer questions on either topic were required to seek an exemption from the Planning Committee. The Elementary survey included an optional gender question that schools could opt to include during the registration process. More information about this process is available here: <https://www.askhys.net/Hys/Exemptions>).

**Table 1: Summary of 2025 Healthy Youth Survey Elements**

Survey Element	Elementary Survey	Secondary Survey
Grade Levels	Grade 6 (and grade 7 in small school districts)	Grades 8, 10, and 12 (and grades 9 and 11 in small districts)
Question Number and Type	106 questions	63 core and 181 bank questions
Skip Logic	Yes	Yes
Randomization	All questions are asked. Blocks of questions are in a random order.	Yes, students receive about ½ of the bank questions. Blocks of questions are asked in a random order
Exempt Questions	No	Yes, exemptions for 5 sexual behavior questions and/or 2 sexual violence questions
Optional Questions	Yes, one optional question on gender	No

## Number of Respondents

The “Number of students surveyed” on in the Introduction and Overview section of the frequency reports refers to the total number of survey responses that were received electronically and passed some initial quality control checks (e.g., submitted within administration dates/times). The “Number of valid surveys” refers to those surveys that were retained after the data were run through a variety of validity checks. Surveys found to be invalid were removed. Only the results of the valid surveys are presented in the frequency reports. The estimated participation rate is also reported. This rate compares the number of valid surveys to the number of students enrolled, based on the most recent enrollment figures. This means that for the 2025 survey, the participation rates in the reports are based on October 2025 enrollment figures.

- The number of respondents is also listed for each survey question. The number of respondents to a specific question is usually fewer than the number of valid surveys and differs between questions for several reasons:
- In Grades 8, 10, and 12, only core questions were asked of all students; bank questions were asked of about half of the students.
  - Skip logic applied to both some core and some bank questions.
- Schools could request an exemption for some questions. These questions are marked with a symbol (†) throughout the frequency reports.
- Any student may have chosen to skip any question.
- The survey was lengthy, and students may not have had time to answer all of the questions.

### **Caution about Participation Rates, Bias and Small Numbers**

Readers should exercise caution by reviewing results and comparing them to other results.

There may be limitations to results if participation in the survey was low. The following guidelines are recommended:

- 70% or greater participation—Results are likely representative of students in this grade
- 40–69% participation—Results may be representative of students in this grade
- Less than 40% participation—Results are likely not representative of students in this grade but do reflect students who completed the survey

There may be limitations to local results even if there is a high participation rate. For instance, a particular group of students (say, the school orchestra) may have been away from school on the day of the survey, and that could bias the results. It is important to acknowledge the potential limitations when using the results in this report. For reports summarizing results at the county or school district levels, consideration of whether the schools that participated represent all students in that area.

Results based on small numbers of students answering a question are unstable---that is, they could easily change with the absence from school of only a couple of students. This is especially the case when only a few students choose a particular answer option. Also, in this situation, the reported 95% confidence interval might be wide. Thus, use caution if fewer than 30 students answered a question and fewer than 5 students selected a given response option. For example, if 20 students answered a question and of those 20 only 3 students answered "Yes", the estimate is unreliable.

## **Highlights of the Frequency Results**

The Highlights section provides a summary for quick reference. The sponsoring agencies chose to highlight eight questions they felt would be of interest to the majority of readers. The same questions are highlighted in all frequency reports and were not specifically chosen for local school, district, county, or ESD.

## **Selected Results by Sex Assigned at Birth**

Selected questions are presented by sex assigned at birth to highlight any differences between females and males. The  $p$ -values reported after each question can be used to examine whether differences in the local data between females and males are statistically significant (see the Healthy Youth Survey [2025] Analytic Report for more details – Coming in July 2026). To ensure student anonymity, frequency results are suppressed in cases where any cell (e.g., females who reported smoking) represents fewer than 10 students.

## **Frequency Results**

Table 2 demonstrates how each question and the corresponding answer choices in shown the report and how it appeared on the electronic survey.

**Table 2: Sample Frequency Report Question**

25. During the past 30 days, on how many days have you been absent from school for any reason? Include any day that you missed at least half of the school day?

	Local Students (n = 511)		Statewide (n = 3,712)	
0 days	40.0%	(± 8.0)	32.5%	(± 1.5)
1 or 2 days	42.0%	(± 3.0)	41.4%	(± 1.6)
3 or more days	18.0%	(± 2.0)	* 26.1%	(± 1.4)

To the right of each question there are 4 columns showing local and statewide results. (Results for a school, district, county, or ESD are referred to as *local* results. This term is used to differentiate these results from the *statewide* results.) The first column displays the percentage of local students who selected each answer choice. The second column displays the margin of error for the percentage. For example, in Table 2, 40.0% plus or minus 8.0% of the local students were absent 0 days. The third and fourth columns contain comparative statewide results and margins of error based only on the results of those students from the schools drawn for the statewide sample. Note that 511 local students and 3,712 students in the state sample responded to this question. An asterisk (\*) between the two sets of results, there is statistically significant difference between the responses. E.g., in this example, local students were significantly less likely to report missing 3 or more days of school compared to students statewide (95% confidence intervals do not overlap).

Multi-grade reports include four or five columns showing statewide or local results only. Each column displays the percentage of students who selected the answer choice and the 95% confidence interval. There is a column for each grade-level or combination of grade levels:

- Grades 6, 8, 10, and 12
- Grades 6, 7, 8, and 6/7/8 combined middle school
- Grades 9, 10, 11, 12, and 9/10/11/12 combined high school

Question results may be presented with asterisks (\*) replacing the numbers for 3 reasons:

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- A single asterisk between two columns of results in this report indicates that there is a statistically significant difference between the responses for students in the two groups. For example, in a district report, if the percentage of students absent from school for 3 or more days for any reason was 18% ( $\pm 2$ ) for the district and 26% ( $\pm 2$ ) statewide, there would be an asterisk between the two columns to highlight that the 95% confidence intervals (CI) do not overlap, and the results are statistically significantly different.
- Select results by sex assigned at birth are marked with triple asterisks (^^^ ) if they are suppressed to protect student privacy.
- In multi-grade reports, double asterisks (\*\* ) are used to indicate that a question was not asked of a grade level.

Question results may be presented with dashes (- -) replacing the numbers for 2 reasons:

- No students responded to the question. The question may have been an exempt or optional question, or the question was simply skipped by all of the students. Exempt questions are marked with this symbol †.
- Question 79 (BMI Status). This question poses a potential challenge to student privacy because weight is a visibly identifiable trait. Consequently, local results were suppressed at the building level. These results are provided at the district, county, and ESD levels.

*Readers are advised that question wording may have changed over time and results may not be comparable across survey administrations.* For example, the definition of screen time has expanded. Additionally, for the 2025 HYS, some questions and response options were modernized in consultation with the University of Washington Social Development Research Group. "YES!, yes, no NO!" answer options were replaced with answer options such as "strongly agree, agree, disagree, strongly disagree."

For a detailed description of survey questions since 2002, see the Healthy Youth Survey Data Dictionary and Crosswalk at: <https://www.askhys.net/Resources/Data>.

## **Risk and Protective Factors**

The risk and protective factor model of prevention, pioneered by Drs. Hawkins and Catalano (Hawkins, Catalano, & Miller, 1992), has been applied to the prevention of alcohol, tobacco, and other drug use and other problem behaviors. A risk factor is something that may contribute to a problem, whereas a protective factor is something that helps to prevent a problem. Several risk and protective factors have been identified and grouped into four domains: community, school, family, and peer-individual. Assessing youth risk and protective factors can help inform prevention programming and interventions, which aim to reduce risk factors and strengthen protective factors. Comprehensive prevention efforts aim to ensure that protective factors outweigh risk factors at the individual, peer, family, school, and community levels.

Historically, the HYS has included items used to calculate the percentage of students at risk or protected on a subset of established risk and protective factors. These items originated from standardized assessment tools developed by the University of Washington's Social Development Research Group (UW SDRG) and published in their Communities That Care (CTC) survey. These item sets use cutpoints for risk or protection determined by prior analyses of HYS data. More information on the history, cutpoints used from 2008 to present, and interpretation of the Risk and Protective factor questions is available on the [2010 History of Risk and Protective Factors](#) resource.

More information about the risk and protective factors is available on the Risk and Protective Factors Fact Sheet at <https://www.askhys.net/SurveyResults/FactSheets>.

## **Other Scales on the HYS**

The HYS contains several sets of questions derived from scales and instruments developed by external entities and academic partners. For more information on the origin and use of these question sets, please see the resources below. These resources are also available on the Data Resources page at <https://www.askhys.net/Resources/Data>.

*Interpretive Guide: Washington State Healthy Youth Survey 2025*

<b>Scale Name</b>	<b>More Information</b>
Children's HOPE Scale	<a href="#"><u>Explanation of the Children's Hope Scale</u></a>
Adverse Childhood Experiences Scale (ACES)	<a href="#"><u>ACES (Adverse Childhood Experiences Scale)</u></a>
Problematic and Risky Internet Use Screen Scale (PRUISS)	<a href="#"><u>Development and Testing of a 3-Item Screening Tool for Problematic Internet Use</u></a>

## **Using the Data**

Readers are encouraged to consider the following approach to reviewing local reports prior to delving into the details of individual survey questions.

### **Implement a Review Team**

Using a team approach to reviewing reports can help make the greatest use of local results. Ideally, the team will include representatives of many segments of the community such as district staff, school staff, community service agencies, parents, and students themselves. There are many advantages to using a team approach, one of which is that each member of the team can contribute their own perspective on problems and their solutions. In addition, a broad-based team conveys the message that the entire community is responsible for promoting adolescent health rather than being the sole responsibility of a single institution (e.g., schools or school districts). Some common steps in the team approach include the following:

- **Create a core leadership group.** This group is made up of key people who are knowledgeable about or interested in student health risk behaviors and will respond to the challenge of addressing the identified health risk behaviors.
- **Assess needs and resources.** The core leadership group will need to determine which student indicators are of concern because of the severity and frequency of those behaviors. In addition, the group will want to identify the services that are available to help youth with mental health needs or to help them live free of alcohol, tobacco, and other drugs.
- **Develop a plan.** After determining needs and resources, the core leadership group will want to develop a plan that addresses issues or behaviors of concern. This plan should address stated goals and measurable objectives related to the behaviors identified as highest priority.

- **Implement the plan.** The first step in implementation is to gain key leaders and community support for the plan. The plan can be implemented once support has been obtained.
- **Evaluate the plan.** The core leadership team should conduct ongoing evaluation of the programs implemented to fulfill the plan. Key elements of the evaluation include (a) identifying those with an interest in the program (i.e., the stakeholders/partners) and involving them in the evaluation, (b) posing evaluation questions related to the program's goals and objectives, (c) deciding what data to collect and how to collect those data, (d) analyzing the data that have been collected, and (e) preparing and disseminating findings.

## **Look at the Survey Results as a Whole**

Because the survey covers a variety of topics, it is recommended to become familiar with the report prior to diving into the report details. First, look at the cover and the top of the first page of the report to determine which students the report represents – a specific geography (school, district, county, ESD, state) or a specific demographic group of students. Next, look at the Table of Contents to see the major groupings of questions. Then review the *Understanding Your Report* section which includes the survey participation and information about how to interpret and understand the results.

## **Become Familiar with the Survey Questions**

Once major survey topics have been identified, one can become better acquainted with the individual survey questions. Notice that the questions are grouped within topic areas. This organization helps make the large number of questions more manageable. Because many questions address more than one topic, *Questions by Topic Index*, on the second to the last page of the report should be reviewed to locate additional questions related to the topic of interest.

## **Find Questions of Interest**

Decisions about which questions are of greatest interest can be made once familiarity with the content of the survey has been established and have a sense about where in the report each content area is covered. Any program will be able to address only a limited number of concerns. In addition, when speaking before a group or preparing a written report, it is encouraged to limit the presentation to those few results of the most immediate interest. Questions may be selected for further presentation and discussion because of program-related interests, special concerns or interests, or noticeable differences in comparison to other data.

## References

- Centers for Disease Control and Prevention. (2023). National Youth Tobacco Survey (NYTS). Retrieved 12/8/25 from <https://www.cdc.gov/tobacco/about-data/surveys/national-youth-tobacco-survey.html>.
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- Hawkins, J.D., Catalano, R.F., and Miller, J.Y. (1992). Risk and protective factors for alcohol and other drug problems in adolescence and early adulthood: Implications for substance abuse prevention. *Psychological Bulletin*, 112(1), 64–105.  
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