

Testimony
Senate Bill No. 2105
Senate Education Committee
Senator Beard, Chairman
January 21, 2025

Chairman Beard, and members of the Senate Education Committee, I am Dr. Tracy Miller, State Epidemiologist and Health Statistics and Performance Section Director with the Department of Health and Human Services (Department). I appear before you in opposition of Senate Bill No. 2105, which relates to the administration of surveys to students in kindergarten through grade twelve schools.

The Senate Bill would create a new section to chapter 15.1-06 of North Dakota Century Code that would not allow students to be surveyed by anyone other than schools or the Department of Public Instruction. Currently, two long standing surveys have been implemented in schools, the Youth Risk Behavioral Survey (YRBS), conducted in odd years since 1995 and Youth Tobacco Survey (YTS), conducted in odd years since 2003. Recently, in 2023, the Department took over the management, coordination, and distribution of the YRBS from the Department of Public Instruction. With the requested addition of this new section to the century code, the department would no longer be able to collect this data.

Currently, these two data sources are the only two of their kind, and offer insight into dietary behaviors, sleep, mental health issues, tobacco/vaping use, seatbelt use, safety concerns, texting while driving, physical activity, etc. Questions for the YRBS survey are selected through a committee of stakeholders which includes HHS Public Health, HHS Behavioral Health Division, DPI, DOT, Community Organizations & Regional Education

Associations (REAs). The YTS survey utilizes subject matter experts and Local Tobacco Prevention Coordinators in local public health to determine new question selection.

Our data users include: Child nutrition programs, substance use programs, family health and wellness, Behavioral Health, DOT, DPI, school districts, community leaders, universities, and members of the general public. They use this data to obtain federal and private grants, program planning for priorities, quality improvement, evaluation of public health interventions, inform decisions about school policy, plan prevention and treatment-related activities, measure progress, etc.

There are also concerns with requirement number 3, regarding the requirement to gather parental consent for participation. This could be a laborious process for schools depending on size of the school. Both the YRBS and YTS provide schools with informational sheets regarding the surveys. Information is sent home with students/parent newsletters/ mailings, etc. Included in the information is a form for parents to sign and return to the school if they choose to not have their student participate in the survey. Additionally, school administrators are allowed to redact questions from the surveys and as always, students are allowed to skip any questions they do not want to answer. Student names are not collected on either survey and school specific data is not publicly available.

While my testimony has initially focused on these two specific surveys, I want to point out this bill would also hinder the department's ability to follow up on infectious diseases. In situations such as enteric outbreaks within the school, it is imperative that information about foods and

activities are collected to identify the source so that prevention efforts can be put into place.

SB 2105, if enacted, would result in the loss of data used by a variety of agencies which could result in the loss of resources, not to mention ongoing transmission of infectious disease.

This concludes my testimony. I would be happy to try to answer any questions the committee may have. Thank you.