



A partnership of the RI Departments of Education and Health  
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## ***thrive report***

Vol. 3, Number 1, December 2009

**December 2009  
Issue: Health Risk  
Disparities Among  
High School Youth**

Core Issue: Health Risks

Fresh from the Field

**thrive by the  
numbers**

**YRBS 2007**

**LGBU Health Risks**

**10** Per cent of Rhode Island High School students who identify as lesbian, gay, bisexual or unsure.

**11** Number of states and the District of Columbia that protect students from bullying and harassment based on sexual orientation

**40** Number of RI schools with a gay/straight

### ***December 2009 Focus: Health Risk Disparities Among High School Youth***

Welcome to the December 2009 edition of the *thrive report* that focuses on disparities among youth and unhealthy risk behaviors. The Rhode Island Department of Health and Education administers the Youth Risk Behavior Survey (YRBS) every other year. The YRBS is an anonymous and voluntary survey among random samples of high school students. The survey helps to monitor risks among high school students and is part of a larger national sample to monitor youth risks.

Promoting academic achievement is one of the four fundamental outcomes of modern school health programs. Scientific reviews have documented that school health programs can have positive impacts on educational outcomes, as well as health-risk behaviors and health outcomes. There are 20-28 health-risk behaviors such as substance use, violence, and physical inactivity that are consistently linked to academic failure and often affect students' school attendance, grades, test scores, and ability to pay attention in class.

There is a negative association between health-risk behaviors and academic achievement among high school students after controlling for sex, race/ethnicity, and grade level. This means that students with higher grades are less likely to engage in health-risk behaviors than their classmates with lower grades, and students who do not engage in health-risk behaviors receive higher grades than their classmates who do engage in health-risk behaviors. These associations do not prove causation. Further research is needed to determine whether low grades lead to health-risk behaviors, health-risk behaviors lead to low grades, or some other factors lead to both of these problems.

alliance.

**54** Percent of new HIV infections among young men who have sex with men between 2003- 2006

Sources: [RI Department of Health, Gay, Lesbian, Straight Education Network, Youth Pride, Inc., Centers for Disease Control](#)

### **LGBTQ and Education Links**

[Youth Pride, Inc.](#)

[Parents and Friends of Lesbians and Gays \(PFLAG\), Providence South Central RI](#)

[Centers for Disease Control](#)

[Gay, Lesbian, Straight Education Network](#)

[National GSA Network](#)

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Donald L. Carcieri Governor

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### References

#### ***The Core Issue: Health Risks Among Rhode Island High School Youth who are Lesbian, Gay, Bisexual or Unsure (LGBU).***

Last year, two questions related to sexual orientation and same sex sexual contact were added to the Rhode Island YRBS questionnaire. Adding these questions has allowed the analysis of impact of sexual orientation status on youth behaviors and outcomes. The results indicate that some 10% of high school students identified themselves as LGBU. Overall, LGBU students had a greater risk for 27 of 30 behaviors as compared to heterosexual students, emphasizing the need for interventions to address behavioral and mental health care needs of all youth. The data reveal stunning disparities. Students who identify as LGBU are:

- Four times more likely to have attempted suicide in the previous year.
- Almost three times more likely to be threatened or injured with a weapon at school;
- More than twice as likely to be hit, slapped, or hurt by a girlfriend or boyfriend;
- Three times more likely to have had forced sexual intercourse and
- Four times more likely to have not attended school due to unsafe feelings

These data are troubling and have implications for academic achievement, drop out rates and school safety. It provides us with an opportunity to better understand and address what we can do to create positive change regarding these disparities. To address these disparities schools can:

- Programs and policies that support self esteem and diversity
- Connections to adults who are knowledgeable and supportive of issues related to lesbian, gay, bisexual, and questioning youth.
- Interventions that address LGBQ behavioral health care needs, including mental health
- Increased emphasis on creating and maintaining safe schools for LGBQ youth, such as creating and maintaining gay/straight (GSA) alliances in schools.
- Academic intervention that ensures the integration of LGBQ related issues

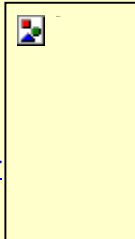
***Fresh from the Field: thrive program***

Annie Marie Silvia, Editor

The *thrive report* can be found at  
[www.thriveri.org/report.html](http://www.thriveri.org/report.html)

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## **receives 2009 RI Governor's Award for Wellness Innovation**



Governor Donald L. Carcieri honored **thrive**, Rhode Island's coordinated school health program, as one of eight organizations receiving the [Governor's Awards for Wellness Innovation](#) at an awards ceremony in the State Room to recognize creative and effective wellness programs and policies.

**thrive** is a unique collaboration of the RI Departments of Education (RIDE) and Health (HEALTH) to improve the health and wellness of all Rhode Island youth and develop a new generation of healthier adults. The RIDE and HEALTH coordinated school health partnership has been recognized nationally as a distinctive, innovative and effective program.

The **thrive** program has been successful in effecting legislative and regulatory changes; developing and implementing policy, standards-based curriculum, instruction, and assessment; and designing and providing professional development opportunities for school administrators, policy-makers, teachers, parents, students, and community organizations. The **thrive** coordinated school health program, website, and e-Academy have gained international attention and have been identified by the Centers for Disease Control and Prevention as national models.

*To share your first-person success stories in "Fresh from the Field," please email [Annemarie.Silvia@ride.ri.gov](mailto:Annemarie.Silvia@ride.ri.gov).*

As always, we welcome and encourage your feedback about **thrive**, Rhode Island's Coordinated School Health model. Please email us at [midge.sabatini@ride.ri.gov](mailto:midge.sabatini@ride.ri.gov) or [rosemary.reilly-chammat@health.ri.gov](mailto:rosemary.reilly-chammat@health.ri.gov).

Sincerely,

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