

## Return to Learn Survey – Secondary Student

October 1-23, 2020

### Return to Learn Survey - Secondary Student

#### Directions

*This survey is for public and charter middle and high school students in the State of Hawaii. To better support you, please answer these questions honestly based on your experience during the first quarter transition back to school. There are no right or wrong answers! Your voice is important, so thank you for sharing your thoughts and experiences.*

	Question	Response Options
1	How would you describe the level of COVID-related safety measures on your school campus to keep you healthy and safe?	Not enough safety measures   Too many safety measures   About the right amount of safety measures   I am only learning at home
2	How difficult or easy has it been for you to follow the COVID-related safety measures on your school campus?	Very difficult   Somewhat difficult   Slightly difficult     Slightly easy   Somewhat easy   Very easy   I am only learning at home
3	Did you feel safe with the size of your class on your school campus?	Yes   No   I did not have class on campus
4	Did you feel you had enough social distancing with your classmates while at school on campus?	Yes   No   I did not have class on campus
5	Did you feel comfortable with the cleanliness of your classroom on your school campus?	Yes   No   I did not have a class on campus
6	Overall, how satisfied are you with the first quarter transition back to school?	Very satisfied   Satisfied  Somewhat satisfied   Not Satisfied
7	What school learning model did you mostly participate in?	Full Distance Learning   Full In-Person   Combination of Distance Learning and In-Person (Blended)   Don't know

8	What aspects of your school learning model worked well for you during the first quarter? Select all that apply.	My class schedule   Health and safety practices   Technology   Communication from my teacher   Attending to my personal needs   Other   Nothing worked well
9	If you responded "other" to the previous question, please specify.	Free response
10	What challenges related to your school model did you experience during the first quarter? Select all that apply.	My class schedule   Health and safety practices   Technology   Communication from my teacher   Attending to my personal needs   Other   Nothing was challenging
11	If you responded "other" to the previous question, please specify.	Free response
12	Are there enough devices within the household for each family member to use at the same time?	Yes   No
13	Do you have a school-issued laptop or tablet for distance learning?	Yes   No
14	Do you have a home computer to use for distance learning?	Yes   No
15	Do you have reliable internet access in your home?	Yes   No
16	In what ways did your teacher(s) use technology during the first quarter to provide you with instruction or support? Select all that apply.	Stay connected to students   One-to-one instruction   Large group instruction   Stay connected with my family   Support service(s)   Teacher did not use technology
17	How helpful has your teacher(s) been in supporting your learning during the first quarter?	Not at all helpful   Slightly helpful   Somewhat helpful   Quite helpful   Extremely helpful   Not aware
18	How would you like to be learning based on your first quarter experience?	I wish I spent more time learning at home and less time learning at school   I wish I spent more time learning at school

		and less time learning at home   I like how much time I spend learning at home or at school
19	How difficult or easy is it to use the distance learning technology (computer, tablet, video calls, learning applications, etc.)?	Very difficult   Somewhat difficult   Slightly difficult   Neither difficult nor easy   Slightly easy   Somewhat easy   Very easy   I am not participating in distance learning
20	Are you getting all the help you need with your schoolwork right now?	No, I need a little extra help   No, I need a lot of extra help   Yes
21	How much effort did you put into your classes during the first quarter?	Almost no effort   A little bit of effort   Some effort   Quite a bit of effort   A great deal of effort
22	How engaged were you in your learning activities during the first quarter?	Not engaged   Slightly engaged   Somewhat engaged   Mostly engaged   Fully engaged
23	How did you engage in your learning? Select all that apply.	<input type="checkbox"/> In-person lessons on campus <input type="checkbox"/> Completed paper packets <input type="checkbox"/> Collaborative online group projects <input type="checkbox"/> Online academic competitions <input type="checkbox"/> Design Thinking <input type="checkbox"/> Virtual field trips <input type="checkbox"/> Socratic Seminars <input type="checkbox"/> Online classroom instruction <input type="checkbox"/> Flipped Classroom <input type="checkbox"/> Gaming strategies for academics <input type="checkbox"/> One-on-one video conference instruction <input type="checkbox"/> Received regular calls from teacher(s) <input type="checkbox"/> Check-Ins with whole class <input type="checkbox"/> Projects <input type="checkbox"/> Presentations <input type="checkbox"/> Office Hours or Tutorial Sessions

		<input type="checkbox"/> Posted assignments to an online platform <input type="checkbox"/> Provided peer feedback <input type="checkbox"/> Self-assessments and reflections <input type="checkbox"/> Used Internet based programs or lessons (e.g., Achieve 3000, Khan Academy, etc.)
24	How concerned are you about your social and emotional well being?	Not at all concerned   Slightly concerned   Somewhat concerned   Quite concerned   Extremely concerned
25	Do you have a teacher or other adult from school whom you can count on to help if needed?	Yes   No
26	How connected do you feel to other students at your school right now?	Not at all connected   Slightly connected   Somewhat connected   Quite connected   Extremely connected
27	How helpful are your teachers or counselors in supporting your social and emotional needs right now?	Not at all helpful   Slightly helpful   Somewhat helpful   Quite helpful   Extremely helpful   Not aware
Background Questions		
28	What race or ethnicity do you primarily identify with?	Asian (excluding Filipino)   Black   Filipino   Hispanic   Native Hawaiian   Pacific Islander   White   Other
29	Select all the race and ethnicity groups you identify with.	Asian (excluding Filipino)   Black   Filipino   Hispanic   Native Hawaiian   Pacific Islander   White   Other
30	If you selected "other" for the previous question on all races and ethnicity groups that you identify with, please specify.	Free response
31	Please indicate the primary language you speak at home.	Cebuano   Chinese - Cantonese   Chinese - Mandarin   Chuukese   English   Hawaiian   Ilocano   Japanese   Korean   Marshallese   Samoan   Spanish   Tagalog   Tongan   Vietnamese   Other/multiple languages

32	What is your gender?	Female   Male   Prefer to self-describe
33	If you answered “Prefer to self-describe” in the previous question, please specify.	Free response
34	What grade are you in?	6th   7th   8th   9th   10th   11th   12th

***Do you need help?***

Hope you are doing well during this time of school building closures. If you are sad, need help, feel disconnected, feel sick, or not sure if you should go to the hospital, call (844) 436-3888 (Monday through Friday, 9am - 4pm) to speak with a nurse for the ***Telehealth for Hawaii DOE Students*** service at no cost to families. <https://bit.ly/HawaiiKeikiHIDOE>

Additional information can be found on the ***Hawaii Department of Health*** website <https://covidhawaii.info/> and ***Aloha United Way 211***, dial 2-1-1.