



BRFSS

Behavioral Risk Factor Surveillance System

Criteria and Procedures for Addition of Survey Questions

Behavioral Risk Factor Surveillance System
Questionnaire



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Overview



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The Montana Department of Public Health and Human Services (MT DPHHS) receives funds in a cooperative agreement with the Centers for Disease Control and Prevention (CDC) to operate a state-based Behavioral Risk Factor Surveillance System (BRFSS) that is conducted on a calendar year basis.

As part of this cooperative agreement, CDC allows each state the opportunity to add questions to the BRFSS survey to provide data to meet state-specific needs. In order to add state questions, certain procedures must be followed. CDC financially supports a limited number of core questions and does not provide a full analysis of the data.

Timeframe and Submission Process

Proposals can be submitted in an outline format following the “General Required Information” and “Criteria for Selection” sections. Answer all of the questions in each section as thoroughly as possible. Proposals must be submitted electronically to the state BRFSS coordinator by **August 31st** prior to the upcoming survey year.

Requests for inclusion of additional data items are reviewed and acted on by the State BRFSS Working Group and the BRFSS Coordinator. Consultation may also occur with the contracted telephone surveyor and the Behavioral Sciences Branch of CDC.

Under normal circumstances, modules and state-added questions will be appended at the end of the questionnaire to avoid biasing any responses to core or optional module questions.

CDC approval is required to place any module or state-added question into the core. Core questions take precedence. No questions will be added which may adversely affect the response or refusal rates of the survey.

Selection Process and Scoring

Based on the length of the core questionnaire, there will be a pre-determined number of questions that can be selected. Proposals will be sent to the BRFSS Working Group and members will be asked to choose which questions they would like to see added to the survey based on their needs. Questions/modules that receive the most votes will receive a higher score. Proposals will also be scored based on the answers to the questions in the “Criteria for Selection” section. Questions/modules with the highest scores will be selected for addition to the questionnaire. Proposals that directly relate to the Strategic Plan or the State Health Improvement Plan will be given greater priority.



General Required Information



1. Proposed Optional Module/State-Added Questions

Please provide a copy of the module or if the request is not for a CDC-approved module, a draft of the proposed questions must be included. This draft should also include instructions and identification of any interviewer skip patterns

2. Need for Survey Frequency

How frequently would the questions need to be asked (every year, every other year, every 5 years, etc.)? Provide a written justification for this frequency based primarily on expectations for change in the prevalence and consistent with a long-range surveillance plan. This does not guarantee questions will be added in future survey years.

3. Time and Resources Required

How much length, in terms of number of questions and time to ask them, will the questions add to the survey? Consider the number of minutes needed to ask respondents the questions on the telephone and their response time to answer. Will the questions require a lengthy introduction or instructions? This will also contribute to total length of time.

For state-added questions only:

4. Prior Use of the Questions

What is the history of the questions? Have they been used in other states or surveys? Have they been field-tested or is the expected validity known? Are they suitable for telephone interviews?



Criteria for Selection



1. Purpose and Goals of Asking the Questions

Include a statement of the questions' relationship to your HealthStat Metrics, the Public Health and Safety Division Strategic Plan, the Montana State Health Improvement Plan, or Healthy People 2020 Objectives.

2. Relevance to Risk Behaviors or a Particular Program

What are the primary groups at risk? Are the questions necessary to provide baseline data or to track progress toward achievement of strategic program goals? Are the questions necessary for development of a new program or assessment of a health behavior? Are there any other programs that will be able to use the data?

3. Other Sources

What other sources have been considered for obtaining the data? What are the reasons for choosing BRFSS as the means for data collection?

4. Relevance to Other BRFSS Questions

What other topic areas on the questionnaire are relevant to your issue?

5. Relevant Population

What proportion of respondents will be asked the questions, i.e., numerator/denominator definitions? What is the relevant population, i.e., 45 years and older, child-bearing age, etc.? What is the feasibility of collecting an adequate sample size? Will the BRFSS sample size provide an adequate representation for data analysis? CDC protocol dictates that data cannot be released if the denominator is less than 50 respondents. The anticipated sample size for 2016 is 6000.

6. Type of Additional Analysis

What type of analysis will the requesting program conduct and what type of data are needed for that analysis? Who will analyze the data? Are the data part of your program's data plan?

7. Use of Data

How will the data be used by the programs or agency and who will benefit? How will you change your program as a result of the new information gathered and analyzed? Will the data be used effectively? If your program has added the questions previously, list specific examples of how they data were used.



Emergency, Critical Health, or Special Point-in-Time Issues



If a critical health issue or a statewide emergency develops for which the MT DPPHS needs behavioral or attitudinal data, questions can be added to the BRFSS any time during the survey year. Such requests for emergency or critical health issue questions must be reviewed by the BRFSS Working Group and approved by the BRFSS Coordinator. Additional costs will be incurred for these questions.

Special point-in-time surveys may also be considered if the request is for a larger number of questions or a specific target audience and if funds are available. Requests or proposals for emergency or special point-in-time surveys must follow a format similar to the optional modules or state-added questions in order to be considered.



Providing Proof of Use



Adding questions is costly and creates a longer survey, requiring respondents to dedicate more time to complete all questions. In order to ensure that added modules and questions are being used as intended, programs that have added questions in prior years and are re-submitting questions for consideration, must provide the BRFSS Coordinator with proof of analysis and/or that they used the data within one year of receipt of data. Without this documentation, we cannot accept program-added questions. Programs submitting questions for the first time will be required to document use of the data within one year or future submissions will not be considered.



Additional Information



Question Appraisal System (QAS)

Each new question, at the minimum, must be tested using the Question Appraisal System. If the new questions are accepted, the BRFSS Coordinator will work with the requestor, CDC, and the contracted telephone surveyor on the finalization of question wording, placement, and order, as well as cognitive and field testing.

Cost of Added Questions

The cost of the questions added to the survey will be determined in part by CDC funding and in part by negotiations with the contracted telephone surveyor. As an estimate, programs developing proposals may consider a minimum of \$2,500 per question for optional modules or state-added questions.

Reminder of Submission Process

All requests must be submitted electronically to the State BRFSS Coordinator by August 31st prior to the upcoming survey year to be considered for inclusion in the BRFSS survey. All proposals can be directed to:

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