

Attachment 13d: Source/history of questions included on the 2016 BRFSS Field Test Questionnaire

Module/ Section Name	Question(s)	Comments on inclusion and prior use
Section 1: Health Status	Would you say that in general your health is—	General introductory question. No change from previous. Included for the flow of communication with respondent.
Section 2: Health Days	<p>Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?</p> <p>Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?</p> <p>During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?</p>	General introductory question section. No change from previous approval. Included for the flow of communication with respondent.
Section 3: Demographics	General demographics and disability	No change in questions
Section 4: E-cigarettes	No change in questions. Interviewer instruction has minor change to ensure that the response is in reference only to tobacco, not marijuana use.	These questions first appeared in 2015. States with legal marijuana use requested change in interviewer instruction after concern that some respondents were using e-cig and other devices listed for marijuana rather than tobacco use and including that in their responses.

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Section 5: Fruits and Vegetables	<p>During the past month, how often did you eat fruit? Do not include juices. You can tell me times per day, per week or per month?</p> <p>How often did you eat a green leafy or lettuce salad, with or without other vegetables?</p> <p>How often did you eat any kind of fried potatoes, including french fries, home fries, or hash browns?</p> <p>How often did you eat any other kind of potatoes, such as baked, boiled, mashed potatoes, or potato salad</p>	<p>The fruit and vegetable consumption questions have been changed to reduce the specific recall of respondents on food intake. The previous questions were:</p> <p>During the past month, how many times per day, week or month did you drink 100% PURE fruit juices? Do not include fruit-flavored drinks with added sugar or fruit juice you made at home and added sugar to. Only include 100% juice.</p> <p>During the past month, not counting juice, how many times per day, week, or month did you eat fruit? Count fresh, frozen, or canned fruit.</p> <p>During the past month, how many times per day, week, or month did you eat cooked or canned beans, such as refried, baked, black, garbanzo beans, beans in soup, soybeans, edamame, tofu or lentils. Do NOT include long green beans.</p> <p>During the past month, how many times per day, week, or month did you eat dark green vegetables for example broccoli or dark leafy greens including romaine, chard, collard greens or spinach?</p> <p>During the past month, how many times per day, week, or month did you eat orange-colored vegetables such as sweet potatoes, pumpkin, winter squash, or carrots?</p> <p>Not counting what you just told me about, during the past month, about how many times per day, week, or month did you eat OTHER vegetables? Examples of other vegetables include tomatoes, tomato juice or V-8 juice, corn, eggplant, peas, lettuce, cabbage, and white potatoes that are not fried such as baked or mashed potatoes?</p>

Not including lettuce salads and

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Section 6: Cholesterol Screening	<p>Blood cholesterol is a fatty substance found in the blood. About how long has it been since you last had your blood cholesterol checked? Read:</p> <p>Have you EVER been told by a doctor, nurse or other health professional that your blood cholesterol is high?</p> <p>Are you currently taking medicine prescribed by a doctor or other health professional for your blood cholesterol?</p>	<p>Questions have been modified. The first two questions are combined in the new format by including a “never” response. The new questions also provide information on current medication. The old questions are presented below:</p> <p>Have you EVER had your blood cholesterol checked?</p> <p>About how long has it been since you last had your blood cholesterol checked?</p> <p>Have you EVER been told by a doctor, nurse or other health professional that your blood cholesterol is high?</p>
Section 7: Tobacco Use	<p>Have you smoked at least 100 cigarettes in your entire life?</p> <p>Do you now smoke cigarettes every day, some days, or not at all?</p> <p>During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?</p> <p>How long has it been since you last smoked a cigarette, even one or two puffs?</p> <p>Do you currently use chewing tobacco, snuff, or snus every day, some days, or not at all?</p>	<p>No changes. Included in order to screen for eligible respondents to Lung Cancer Module</p>

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Module 1: Social Determinants of Health	1. During the last 12 months, was there a time when you were not able to pay your mortgage, rent or utility bills?	Questions 1 (Housing Insecurity) from National Survey of American Families (NASF), 1999. A similar question “How often in the past 12 months would you say you were worried or stressed about having enough money to pay your rent/mortgage?” was part of the BRFSS as a modules from 2010-2014 (Social Context Module).
	2. In the last 12 months, how many times have you moved from one home to another? Number of moves in past 12 months _____	Question 2 (Housing Instability) “Health Begins Upstream Risks Screening Tool & Guide.”
	3. How safe from crime do you consider your neighborhood to be?	Question 3 (Perceived Neighborhood Safety) from Centers for Disease Control and Prevention: Neighborhood safety and the prevalence of physical inactivity – selected states 1996. MMWR Weekly 1999, 48: 143-146 and validated in Echeverria, S., A. Diez Roux, and B. Link, Reliability of self-reported neighborhood characteristics. Journal of Urban Health, 2004. 81(4): p. 682-701.
	4. “The food that I bought just didn’t last, and I didn’t have money to get More” Was that often, sometimes, or never true for you in the last 12 months?	Questions 4-5 (Food Insecurity) from the U.S. Household Food Security Survey Module: Six-Item Short Form validated in Blumberg, S. J., et al. (1999). "The effectiveness of a short form of the Household Food Security Scale." American Journal of Public Health 89(8): 1231-1234. A similar question “how often in the past 12 months would you say you were worried or stressed about having enough money to buy nutritious meals?” was part of the BRFSS as a modules from 2010-2014 (Social Context
	5. I couldn’t afford to eat balanced meals.” Was that often, sometimes, or never true for you in the last 12 months?	

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	6. During the past year, did your family: Save money / Just get by / Spent some savings / Spent savings and borrowed money .	Module).  Question 6 (Financial Insecurity) from the World Values Survey validated in Ward, P.R., L. Mamerow, and S.B. Meyer, Identifying Vulnerable Populations Using a Social Determinants of Health Framework: Analysis of National Survey Data across Six Asia-Pacific Countries. PLoS ONE, 2013. 8(12): p. e83000.
	7. Stress means a situation in which a person feels tense, restless, nervous, or anxious, or is unable to sleep at night because his/her mind is troubled all the time. Do you feel this kind of stress these days?	
Module 2: Sodium and Salt Intake	Are you currently watching or reducing your sodium or salt intake?	Question 7 (Stress) from Salminen, S. et al. No new questions. This module is included because a question has been eliminated from previous version of the module. The question that was eliminated is:  How many day, weeks, months or years have you been watching or reducing your sodium or salt intake?
	Has a doctor or other health professional ever advised you to reduce sodium or salt intake?	
Module 3: Respiratory Health (COPD Symptoms)	Do you usually cough on most days for 3 consecutive months or more during the year?	NHANES 2007-2010
	Do you bring up phlegm or mucus on most days for 3 consecutive months or more during the year?	NHANES 2007-2010
	Have you had shortness of breath either when hurrying on the level or walking up a slight hill?	NHANES 2007-2010
	Have you ever been given a breathing	Breathing Test - BRFSS COPD Module 2011 in 21

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	test to diagnose breathing problems?	states, DC, and PR
	Over your lifetime, how many years have you smoked tobacco products	Years Smoking - South Carolina State-Added BRFSS in 2012
Module 4: Lung Cancer Screening	How old were you when you first started to smoke cigarettes regularly?	“First started to smoke regularly” is NHIS question exactly.
	How old were you when you last smoked cigarettes regularly?	NHIS has “How long has it been since you quit smoking cigarettes?”
	On average, when you {smoke/smoked} regularly, about how many cigarettes {do/did} you usually smoke each day?	NHIS has “On the average, how many cigarettes do you now smoke a day?” which does not account for persons who used to smoke but have quit.
	In the last 12 months, did you have a CT or CAT scan of your chest area to check or screen for lung cancer?	CAT/ CT question is new.
Module 5: Marijuana Use	During the past 30 days, on how many days did you use marijuana or hashish?	These questions have been on the BRFSS questionnaire in the past. They are included in the field test due to a slight change in question 2. Past administrations allowed multiple responses on use. The currently question asks for the “primary mode” of use. Otherwise the questions are the same.
	During the past 30 days, what was the primary mode you used marijuana?	
	When you used marijuana or hashish during the past 30 days, was it for medical reasons to treat or decrease symptoms of a health condition, or was it for non-medical reasons to get pleasure or satisfaction (such as: excitement, to “fit in” with a group, increased awareness, to forget worries, for fun at a social gathering).	
Module 6: SOGI	Do you consider yourself to be:  Lesbian or gay Straight, that is not lesbian or gay Bisexual	These questions have not changed, and were previously approved in the BRFSS package. They are included in order to continue to assess the questions.
	Do you consider yourself to be	

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	<p>transgender?</p> <p>Yes, Transgender, male-to-female  Yes, Transgender, female to male  Yes, Transgender, nonconforming  No  Don't know/not sure  Refused</p>	
Module 7: Family Planning	<p>Did you or your partner do anything <u>the last time you had sex</u> to keep you from getting pregnant?</p>	<p>These questions have been in use on the BRFSS in previous years (last year 2011). Slight modifications have been made. The term "husband" was eliminated from question 1; Coding for using a method of contraception was change to allow for more than one (up to 4) responses.</p>
	<p>What did you or your partner do the last time you had sex to keep you from getting pregnant?</p>	<p>Coding for using a method of contraception was change to allow for more than one (up to 4) responses.</p>
	<p>What was your main reason for not doing anything the last time you had sex to keep you from getting pregnant?</p>	<p>On the 2011 BRFSS, "You just didn't think about it/don't care if you get pregnant" was a single response option. This response is being split into separate response options, since they reflect very different reasons.</p>