

# 2019 BRFSS Field Test Questionnaire



Table of Contents	
Core Section 1: Health Status.....	3
Core Section 2: Healthy Days.....	4
Core Section 3: Healthcare Access.....	5
Core Section 4: Chronic Health Conditions.....	6
Core Section 5: Demographics.....	9
Module Section 6: Colorectal Cancer Screening.....	15
Core Section 7: Tobacco Use.....	21
Core Section 8: Alcohol Consumption.....	23
Section 9: ACE Module.....	25
Closing Statement.....	29

## Core Section 1: Health Status

Question Number	Question text	Variable names	Responses (DO NOT READ UNLESS OTHERWISE NOTED)	SKIP INFO/ CATI Note	Interviewer Note (s)	Column(s)
C01.01	Would you say that in general your health is—	GENHLTH	Read: 1 Excellent 2 Very Good 3 Good 4 Fair 5 Poor Do not read: 7 Don't know/Not sure 9 Refused			90

## Core Section 2: Healthy Days

Question Number	Question text	Variable names	Responses (DO NOT READ UNLESS OTHERWISE NOTED)	SKIP INFO/ CATI Note	Interviewer Note (s)	Column(s)
<b>C02.01</b>	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?	PHYSHLTH	__ Number of days (01-30) 88 None 77 Don't know/not sure 99 Refused			91-92
<b>C02.02</b>	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?	MENTHLTH	__ Number of days (01-30) 88 None 77 Don't know/not sure 99 Refused			93-94
<b>C02.03</b>	During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities,	POORHLTH	__ Number of days (01-30) 88 None 77 Don't know/not sure 99 Refused	Skip if C02.01, PHYSHLTH, is 88 and C02.02, MENTHLTH, is 88		95-96

	such as self-care, work, or recreation?					
--	---	--	--	--	--	--

## Core Section 3: Healthcare Access

Question Number	Question text	Variable names	Responses (DO NOT READ UNLESS OTHERWISE NOTED)	SKIP INFO/ CATI Note	Interviewer Note (s)	Column(s)
HC.01	What is the primary source of your health care coverage? Is it...	HLTHCVR1	1 A plan purchased through an employer or union Notes: includes plans purchased through another person's employer 2 A plan that you or another family member buys on your own 3 Medicare 4 Medicaid or other state program 5 TRICARE (formerly CHAMPUS), VA, or Military 6 Alaska Native, Indian Health Service, Tribal Health Services 7 Some other			

			source 8 None (no coverage) 77 Don't know/Not Sure 99 Refused			
--	--	--	--	--	--	--

## Core Section 4: Chronic Health Conditions

Question Number	Question text	Variable names	Responses (DO NOT READ UNLESS OTHERWISE NOTED)	SKIP INFO/ CATI Note	Interviewer Note (s)	Column(s)
<b>C06.01</b>	Has a doctor, nurse, or other health professional ever told you that you had any of the following? For each, tell me Yes, No, Or You're Not Sure. Ever told) you that you had a heart attack also called a myocardial infarction?	CVDINFR4	1 Yes 2 No 7 Don't know / Not sure 9 Refused			
<b>C06.02</b>	(Ever told) you had angina or coronary heart disease?	CVDCRHD4	1 Yes 2 No 7 Don't know / Not sure 9 Refused			
<b>C06.03</b>	(Ever told) you had a stroke?	CVDSTRK3	1 Yes 2 No 7 Don't know / Not sure 9 Refused			
<b>C06.04</b>	(Ever told) you	ASTHMA3	1 Yes			

	had asthma?		2 No 7 Don't know / Not sure 9 Refused	Go to C06.06		
<b>C06.05</b>	Do you still have asthma?	ASTHNOW	1 Yes 2 No 7 Don't know / Not sure 9 Refused			
<b>C06.06</b>	(Ever told) you had skin cancer?	CHCSCNCR	1 Yes 2 No 7 Don't know / Not sure 9 Refused			
<b>C06.07</b>	(Ever told) you had any other types of cancer?	CHCOCNCR	1 Yes 2 No 7 Don't know / Not sure 9 Refused			
<b>C06.08</b>	(Ever told) you have chronic obstructive pulmonary disease, C.O.P.D., emphysema or chronic bronchitis?	CHCCOPD1	1 Yes 2 No 7 Don't know / Not sure 9 Refused			
<b>C06.10</b>	(Ever told) you have a depressive disorder (including depression, major depression, dysthymia, or minor depression)?	ADDEPEV2	1 Yes 2 No 7 Don't know / Not sure 9 Refused			
<b>C06.11</b>	Not including kidney stones, bladder infection	CHCKDNY1	1 Yes 2 No 7 Don't		Read if necessary: Incontinence is not being able to	

	or incontinence, were you ever told you have kidney disease?		know / Not sure 9 Refused		control urine flow.	
<b>C06.12</b>	(Ever told) you have diabetes?	DIABETE3	1 Yes		If yes and respondent is female, ask: was this only when you were pregnant? If respondent says pre-diabetes or borderline diabetes, use response code 4.	
			2 Yes, but female told only during pregnancy 3 No 4 No, pre-diabetes or borderline diabetes 7 Don't know / Not sure 9 Refused	Go to Pre-Diabetes Optional Module (if used). Otherwise, go to next section.		
<b>C06.13</b>	How old were you when you were told you have diabetes?	DIABAGE2	_ _ Code age in years [97 = 97 and older] 98 Don't know / Not sure 99 Refused	Go to Diabetes Module if used, otherwise go to next section.		



## Core Section 5: Demographics

Question Number	Question text	Variable names	Responses (DO NOT READ UNLESS OTHERWISE NOTED)	SKIP INFO/ CATI Note	Interviewer Note (s)	Column(s)
C08.01	What is your sex? Are you....	SEX1	1 Male 2 Female Do not read: 7 Don't know / Not sure 9 Refused	States may adopt one of the two formats of the question. If second format is used, read options.		
C08.02	In what year were you born?	AGE	__ Code age in years 07 Don't know / Not sure 09 Refused			
C08.03	Are you Hispanic, Latino/a, or Spanish origin?	HISPANC3	If yes, read: Are you... 1 Mexican, Mexican American, Chicano/a 2 Puerto Rican 3 Cuban 4 Another Hispanic, Latino/a, or Spanish origin Do not read: 5 No 7 Don't know / Not sure 9 Refused		One or more categories may be selected.	
C08.04	Which one or more of the following would you say is your race?	MRACE1	Please read: 10 White 20 Black or African American 30 American Indian or Alaska Native 40 Asian 41 Asian Indian 42 Chinese 43 Filipino 44 Japanese 45 Korean	If more than one response to C08.04; continue. Otherwise, go to C08.06.	If 40 (Asian) or 50 (Pacific Islander) is selected read and code subcategories underneath major heading. One or more categories may be	

			46 Vietnamese 47 Other Asian 50 Pacific Islander 51 Native Hawaiian 52 Guamanian or Chamorro 53 Samoan 54 Other Pacific Islander  Do not read: 60 Other 88 No additional choices 77 Don't know / Not sure 99 Refused		selected.	
<b>C08.05</b>	Which one of these groups would you say best represents your race?	ORACE3	Please read: 10 White 20 Black or African American 30 American Indian or Alaska Native 40 Asian 41 Asian Indian 42 Chinese 43 Filipino 44 Japanese 45 Korean 46 Vietnamese 47 Other Asian 50 Pacific Islander 51 Native Hawaiian 52 Guamanian or Chamorro 53 Samoan 54 Other Pacific Islander  Do not read: 60 Other  77 Don't know / Not sure 99 Refused		If 40 (Asian) or 50 (Pacific Islander) is selected read and code subcategories underneath major heading.  If respondent has selected multiple races in previous and refuses to select a single race, code refused	
<b>C08.06</b>	Are you...	MARITAL	Please read: 1 Married 2 Divorced 3 Widowed 4 Separated 5 Never married			

			<p>Or          6 A member of an unmarried couple          Do not read:          9 Refused</p>			
<b>C08.07</b>	What is the highest grade or year of school you completed?	EDUCA	<p>Read if necessary:          1 Never attended school or only attended kindergarten          2 Grades 1 through 8 (Elementary)          3 Grades 9 through 11 (Some high school)          4 Grade 12 or GED (High school graduate)          5 College 1 year to 3 years (Some college or technical school)          6 College 4 years or more (College graduate)          Do not read:          9 Refused</p>			
<b>C08.08</b>	Do you own or rent your home?	RENTHOM1	<p>1 Own          2 Rent          3 Other arrangement          7 Don't know / Not sure          9 Refused</p>		<p>Other arrangement may include group home, staying with friends or family without paying rent. Home is defined as the place where you live most of the time/the majority of the year. Read if necessary: We ask this question in order to compare health indicators</p>	

					among people with different housing situations.	
<b>C08.14</b>	Have you ever served on active duty in the United States Armed Forces, either in the regular military or in a National Guard or military reserve unit?	VETERAN3	1 Yes 2 No 7 Don't know / Not sure 9 Refused		Read if necessary: Active duty does not include training for the Reserves or National Guard, but DOES include activation, for example, for the Persian Gulf War.	
<b>C08.15</b>	Are you currently...?	EMPLOY1	Read: 1 Employed for wages 2 Self-employed 3 Out of work for 1 year or more 4 Out of work for less than 1 year 5 A Homemaker 6 A Student 7 Retired Or 8 Unable to work Do not read: 9 Refused		If more than one, say "select the category which best describes you".	
<b>C08.16</b>	How many children less than 18 years of age live in your household?	CHILDREN	__ Number of children 88 None 99 Refused			
<b>C08.17</b>	Is your annual household income	INCOME2	Read if necessary: 04 Less than \$25,000 If no, ask 05; if yes, ask 03 (\$20,000 to less than		If respondent refuses at ANY income level, code	

	from all sources—		<p>\$25,000)</p> <p>03 Less than \$20,000 If no, code 04; if yes, ask 02 (\$15,000 to less than \$20,000)</p> <p>02 Less than \$15,000 If no, code 03; if yes, ask 01 (\$10,000 to less than \$15,000)</p> <p>01 Less than \$10,000 If no, code 02</p> <p>05 Less than \$35,000 If no, ask</p> <p>06 (\$25,000 to less than \$35,000)</p> <p>06 Less than \$50,000 If no, ask</p> <p>07 (\$35,000 to less than \$50,000)</p> <p>07 Less than \$75,000 If no, code 08 (\$50,000 to less than \$75,000)</p> <p>08 \$75,000 or more</p> <p>Do not read:        77 Don't know / Not sure        99 Refused</p>		'99' (Refused)	
<b>C08.18</b>	About how much do you weigh without shoes?	WEIGHT2	<p>_ _ _ _ Weight (pounds/kilograms)</p> <p>7777 Don't know / Not sure</p> <p>9999 Refused</p>		If respondent answers in metrics, put 9 in first column. Round fractions up	
<b>C08.19</b>	About how tall are you without shoes?	HEIGHT3	<p>_ _ / _ _ Height (ft / inches/meters/centimeters)</p> <p>77/ 77 Don't know / Not sure</p> <p>99/ 99 Refused</p>		If respondent answers in metrics, put 9 in first column. Round fractions down	
<b>C08.20</b>	To your knowledge, are you now	PREGNANT	<p>1 Yes</p> <p>2 No</p> <p>7 Don't know / Not sure</p> <p>9 Refused</p>	Skip if C08.01, SEX, is coded 1;		

	pregnant?			or C08.02, AGE, is greater than 49		
--	-----------	--	--	---	--	--

## Module Section 6: Colorectal Cancer Screening

Question Number	Question text	Variable names	Responses (DO NOT READ UNLESS OTHERWISE NOTED)	SKIP INFO/ CATI Note	Interviewer Note (s)	Column(s)
				CATI note: If respondent is < 49 years of age, go to next section.		
<b>Prologue</b>	The next questions are about colorectal cancer screening. There are different stool tests to determine whether the stool contains blood.					
<b>CRC.01</b>	One stool test uses a special kit to obtain a small amount of stool at home to determine whether the stool contains blood and returns the kit to the doctor or the lab. Have you ever had this test using a home kit?		1 Yes 2 No 7 Don't know / Not sure 9 Refused	Go to CRC.03	Interviewer note: This is also called a fecal immunochemical test (FIT) or a guaiac-based fecal occult blood test (gFOBT). The FIT test uses antibodies to detect blood in the stool. The gFOBT uses a chemical (guaiac) to detect blood in the stool.	
<b>CRC.02</b>	How long has it been since you last had this test?		Read if necessary: 1 Within the past year (anytime less			

			than 12 months ago) 2 Within the past 2 years (1 year but less than 2 years ago) 3 Within the past 3 years (2 years but less than 3 years ago) 4 Within the past 5 years (3 years but less than 5 years ago) 5 5 or more years ago Do not read: 7 Don't know / Not sure 9 Refused			
<b>CRC.03</b>	Another stool test uses a special kit to obtain an entire bowel movement at home and returns the kit to a lab. Have you ever had this test?		1 Yes  2 No 7 Don't know / Not sure 9 Refused	Go to CRC.05	Interviewer note: This is also called a FIT-DNA test or a stool DNA test. This test combined the FIT with a test that detects altered DNA in the stool.	
<b>CRC.04</b>	How long has it been since you last had this test?		Read if necessary: 1 Within the past year (anytime less than 12 months ago) 2 Within the past 2 years			



			(1 year but less than 2 years ago) 3 Within the past 3 years (2 years but less than 3 years ago) 4 Within the past 5 years (3 years but less than 5 years ago) 5 5 or more years ago Do not read: 7 Don't know / Not sure 9 Refused			
<b>CRC.05</b>	A sigmoidoscopy is a flexible tube that is inserted in the rectum to view the colon for signs of cancer or other health problems. Have you ever had a sigmoidoscopy?		1 Yes	Go to CRC.07		
			2 No 7 Don't know / Not sure 9 Refused			
<b>CRC.06</b>	How long has it been since you last had this test?		Read if necessary: 1 Within the past year (anytime less than 12 months ago) 2 Within the past 2 years (1 year but less than 2 years ago) 3 Within the past 3 years			

			(2 years but less than 3 years ago) 4 Within the past 5 years (3 years but less than 5 years ago) 5 5 or more years ago Do not read: 7 Don't know / Not sure 9 Refused			
<b>CRC.07</b>	A colonoscopy is uses a longer tube than a sigmoidoscopy. You are usually given medication through a needle in your arm to make you sleepy and told to have someone else drive you home after the test. Have you ever had a colonoscopy?		1 Yes			
			2 No 7 Don't know / Not sure 9 Refused	Go to CRC.09		
<b>CRC.08</b>	How long has it been since you last had this test?		Read if necessary: 1 Within the past year (anytime less than 12 months ago) 2 Within the past 2 years (1 year but less than 2 years ago) 3 Within the past 3 years			

			(2 years but less than 3 years ago) 4 Within the past 5 years (3 years but less than 5 years ago) 5 5 or more years ago Do not read: 7 Don't know / Not sure 9 Refused			
<b>CRC.09</b>	A virtual colonoscopy uses a series of X-rays to take pictures of inside the colon. Have you ever had a virtual colonoscopy?		1 Yes	Go to next section		
			2 No 7 Don't know / Not sure 9 Refused			
<b>CRC.10</b>	How long has it been since you last had this test?		Read if necessary: 1 Within the past year (anytime less than 12 months ago) 2 Within the past 2 years (1 year but less than 2 years ago) 3 Within the past 3 years (2 years but less than 3 years ago) 4 Within the past 5 years (3 years but less than 5 years ago) 5 5 or more			

			years ago Do not read: 7 Don't know / Not sure 9 Refused			
--	--	--	---	--	--	--

## Core Section 7: Tobacco Use

Question Number	Question text	Variable names	Responses (DO NOT READ UNLESS OTHERWISE NOTED)	SKIP INFO/ CATI Note	Interviewer Note (s)	Column(s)
C09.01	Have you smoked at least 100 cigarettes in your entire life?	SMOKE100	1 Yes		Do not include: electronic cigarettes (e-cigarettes, njoy, bluetip), herbal cigarettes, cigars, cigarillos, little cigars, pipes, bidis, kreteks, water pipes (hookahs) or marijuana. 5 packs = 100 cigarettes	
			2 No 7 Don't know/Not Sure 9 Refused	Go to C09.05		
C09.02	Do you now smoke cigarettes every day, some days, or not at all?	SMOKDAY2	1 Every day 2 Some days			
			3 Not at all	Go to C09.04		
			7 Don't know / Not sure 9 Refused	Go to C09.05		
C09.03	During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?	STOPSMK2	1 Yes 2 No 7 Don't know / Not sure 9 Refused	Go to C09.05		

<b>C09.04</b>	How long has it been since you last smoked a cigarette, even one or two puffs?	LASTSMK2	Read if necessary: 01 Within the past month (less than 1 month ago) 02 Within the past 3 months (1 month but less than 3 months ago) 03 Within the past 6 months (3 months but less than 6 months ago) 04 Within the past year (6 months but less than 1 year ago) 05 Within the past 5 years (1 year but less than 5 years ago) 06 Within the past 10 years (5 years but less than 10 years ago) 07 10 years or more 08 Never smoked regularly 77 Don't know / Not sure 99 Refused			
<b>C09.05</b>	Do you currently use chewing tobacco, snuff, or snus every day, some days, or not at all?	USENOW3	1 Every day 2 Some days 3 Not at all 7 Don't know / Not sure 9 Refused		Read if necessary: Snus (Swedish for snuff) is a moist smokeless tobacco, usually sold in small pouches that are placed under the lip	

					against the gum.	
--	--	--	--	--	------------------	--

## Core Section 8: Alcohol Consumption

Question Number	Question text	Variable names	Responses (DO NOT READ UNLESS OTHERWISE NOTED)	SKIP INFO/ CATI Note	Interviewer Note (s)	Column(s)
C10.01	During the past 30 days, how many days per week or per month did you have at least one drink of any alcoholic beverage such as beer, wine, a malt beverage or liquor?	ALCDAY5	1 __ Days per week 2 __ Days in past 30 days			
			888 No drinks in past 30 days 777 Don't know / Not sure 999 Refused	Go to next section		
C10.02	One drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or a drink with one shot of liquor. During the past 30 days, on the days when you drank, about how many drinks did you drink on the average?	AVEDRNK2	__ Number of drinks 88 None 77 Don't know / Not sure 99 Refused		Read if necessary: A 40 ounce beer would count as 3 drinks, or a cocktail drink with 2 shots would count as 2 drinks.	
C10.03	Considering all types of alcoholic beverages, how many times during the past 30 days did you	DRNK3GE5	__ Number of times 77 Don't know / Not sure 99 Refused	CATI X = 5 for men, X = 4 for women		

	have X [CATI X = 5 for men, X = 4 for women] or more drinks on an occasion?					
<b>C10.04</b>	During the past 30 days, what is the largest number of drinks you had on any occasion?	MAXDRNKS	__ Number of drinks 77 Don't know / Not sure 99 Refused			



## Section 9: ACE Module

Question Number	Question text	Variable names	Responses (DO NOT READ UNLESS OTHERWISE NOTED)	SKIP INFO/CATI Note	Interviewer Note (s)	Column(s)
<b>Prologue</b>	I'd like to ask you some questions about events that happened during your childhood. This information will allow us to better understand problems that may occur early in life, and may help others in the future. This is a sensitive topic and some people may feel uncomfortable with these questions. At the end of this section, I will give you a phone number for an organization that can provide information and referral for these issues. Please keep in mind that you can ask me to skip any question you do not want to answer. All questions refer to the time period before you were 18 years of age.				Be aware of the level of stress introduced by questions in this section and be familiar with the crisis plan.	
<b>M22.01</b>	Now, looking back before you were 18 years of age--- 1) Did you live with anyone who was depressed, mentally ill, or suicidal?	ACEDEPRS	1 Yes 2 No 7 Don't Know/Not Sure 9 Refused			394
<b>M22.02</b>	Did you live with anyone who was a problem drinker or alcoholic?	ACEDRINK	1 Yes 2 No 7 Don't Know/Not Sure 9 Refused			395

<b>M22.03</b>	Did you live with anyone who used illegal street drugs or who abused prescription medications?	ACEDRUGS	1 Yes 2 No 7 Don't Know/Not Sure 9 Refused			396
<b>M22.04</b>	Did you live with anyone who served time or was sentenced to serve time in a prison, jail, or other correctional facility?	ACEPRISN	1 Yes 2 No 7 Don't Know/Not Sure 9 Refused			397
<b>ACE.05</b>	Before you were 18 years of age, during your childhood were your parents....?	ACEDIVRE2	Read: 1 Living together 2 Living separately 3 Living together for part of your childhood, or 4 Other arrangements 7 Don't Know 9 Refused			398
<b>ACE.06</b>	How often did your parents or adults in your home ever slap, hit, kick, punch or beat each other up? Was it...	ACEPUNCH	Read: 1 Never 2 Once 3 More than once Don't Read: 7 Don't know/Not Sure 9 Refused			399
<b>ACE.07</b>	Not including spanking, (before age 18), how often did a parent or adult in your home ever hit, beat, kick, or physically hurt you in any way? Was it—	ACEHURT1	Read: 1 Never 2 Once 3 More than once Don't Read: 7 Don't know/Not Sure 9 Refused			400
<b>ACE.08</b>	How often did a parent or adult in your home ever	ACESWEAR	Read: 1 Never			401

	swear at you, insult you, or put you down? Was it...		2 Once 3 More than once Don't Read: 7 Don't know/Not Sure 9 Refused			
<b>ACE.09</b>	How often did anyone at least 5 years older than you or an adult, ever touch you sexually? Was it...	ACETOUCH	Read: 1 Never 2 Once 3 More than once Don't Read: 7 Don't know/Not Sure 9 Refused			402
<b>ACE.10</b>	How often did anyone at least 5 years older than you or an adult, try to make you touch them sexually? Was it...	ACETTHEM	Read: 1 Never 2 Once 3 More than once Don't Read: 7 Don't know/Not Sure 9 Refused			403
<b>ACE.11</b>	How often did anyone at least 5 years older than you or an adult, force you to have sex? Was it...	ACEHVSEX	Read: 1 Never 2 Once 3 More than once Don't Read: 7 Don't know/Not Sure 9 Refused			404
<b>ACE.12</b>	For how much of your childhood was there an adult in your household who made you feel safe and protected? Would you say never, a little of the time, some of the time, most of the time, or all of		Do not read 1 Never 2 A little of the time 3 Some of the time 4 Most of the time			

	the time?		5 All of the time 7 Don't Know 9 Refused			
<b>ACE.13</b>	For how much of your childhood was there an adult in your household who tried hard to make sure your basic needs were met? Would you say never, a little of the time, some of the time, most of the time, or all of the time?		1 Never 2 A little of the time 3 Some of the time 4 Most of the time 5 All of the time 7 Don't Know 9 Refused			
<b>ACE.14</b>	In the last 12 months how many times have you attempted suicide?		1 0 times/ never 2 1 or 2 times 3 3 to 9 times 4 10 to 19 times 5 20 to 39 times 6 40 or more times 7 Do not know 9 Refused			
<b>ACE.15</b>	In the last 12 months how many times have you taken prescription pain reliever differently than how a doctor told you to use it?		1 0 times/ never 2 1 or 2 times 3 3 to 9 times 4 10 to 19 times 5 20 to 39 times 6 40 or more times 7 Do not know 9 Refused			
<b>ACE.16</b>	In the last 12 months, how many times have you used heroin?		1 0 times/ never 2 1 or 2 times 3 3 to 9 times 4 10 to 19 times 5 20 to 39			

			times 6 40 or more times 7 Do not know 9 Refused			
	Would you like for me to provide a toll-free number for an organization that can provide information and referral for the issues in the last few questions.				If yes provide number [STATE TO INSERT NUMBER HERE]	

## Closing Statement

Read	
	That was my last question. Everyone's answers will be combined to help us provide information about the health practices of people in this state. Thank you very much for your time and cooperation.