

Change Request

2019 Behavioral Risk Factor Surveillance System (BRFSS)

(OMB No. 0920-1061 Exp. Date 3/31/2021)

August 23, 2018

Summary

We request the following: OMB approval of revisions to the 2019 BRFSS Questionnaire, Data Collectors' Protocol and list of approved modules for use in the 2019 BRFSS. Specifically, we request the following:

1. Approval of changes in the 2019 Core Questionnaire (notably changes in the core section on arthritis, and the move of the respondents' sex question to the introduction).
2. Approval of five new modules: Food Stamps, Chronic Fatigue Syndrome / ME, Adverse Childhood Experience (ACE), Hepatitis Treatment and Home/Self Monitored Blood Pressure.
3. Addition of emerging core section and modules on opioid use and misuse.
4. Changes to the Data Collectors' Protocol, to include higher standards on data storage, instructions on advance letters to be sent to cell phone respondents, a crisis plan for use during the Adverse Childhood Experience (ACE) Module and other minor changes.

Attachments

Attachment 4b-2019 Approved Questions by Optional Module

Attachment 5a-2019 BRFSS Questionnaire

Attachment 10a-2019 Calling Protocol and Dispositions

Attachment 14-2018 Cognitive Testing Findings

Background and Justification

The Behavioral Risk Factor Surveillance System (BRFSS) consists of landline and cell phone interviews in each of the 50 states, Washington DC, and several US territories (“states” or “BRFSS partners”). In addition, personal interviews are conducted in one territory where phone lines are unavailable. The currently approved survey instrument is based on modular design principles, consisting of a standardized core questionnaire administered by all states, and topic-specific optional modules that may be appended to the standardized core, at each state’s discretion. The modular design allows each state to customize the BRFSS questionnaire to address state-specific needs. To ensure that BRFSS content is relevant to the current needs of BRFSS partners, CDC updates selected items in the core questionnaire and/or the optional modules on an annual basis. Information collection needs and priorities for 2019 were discussed by CDC and the states at the annual BRFSS partners meeting held in April 2018. At that time states voted on the items to be adopted in 2019. A field test of proposed changes was conducted under OMB review in June 2018, resulting in the finalization of questions for new modules and minor changes to the core questionnaire for 2019, previously approved. The 2019 questionnaire includes 14 core sections, one emerging core section, and 33 modules. All changes made to the core questionnaire are highlighted in red text in Attachment 5a-2019 BRFSS Questionnaire. Highlighted changes show changes from the previously approved odd-year core questionnaire. Changes made to Optional Modules are also highlighted in red text in Attachment 5a-2019 BRFSS Questionnaire. Table 1 below lists all sections of the 2019 BRFSS core sections and optional modules to illustrate where in the questionnaire changes have been made. It should be noted that the Emerging Core Section and Optional Modules on Opioid Use/Misuse have not at the time of this submission been funded and may be deleted from the final questionnaire. They are provided here to allow for their inclusion, should funding be obtained prior to the January 1, 2019 implementation date. Consistent with the terms of clearance on OMB # 0920-1061, clearance for the new modules and question topics noted below is being sought through a revision. However, the new modules and question topics are described in this change request in the interest of presenting a cohesive, transparent picture of the 2019 collection plans. Therefore, we will submit a revision request for approval to OMB for modules on any topics that have not previously been approved by OMB for BRFSS, i.e., opioids and optional modules 3, 4, 22, and 27.

Table 1 2019 BRFSS Core Sections and Optional Modules		
Core Questionnaire Changes (as compared to previously approved Odd-numbered Year Core Questionnaire)		
Location in Questionnaire	Changes made	Comments
Landline Introduction	Respondent sex question moved from demographics and inserted after adult verification question	The question on respondent sex has been moved earlier in the questionnaire to allow for skip patterns in questions based on sex which are asked prior to the demographics section.
Cell phone Introduction	Respondent sex question moved from demographics and inserted after adult verification question	
Core Section 1: Health Status	Continue with no changes	
Core Section 2: Healthy Days	Continue with no changes	
Core Section 3: Healthcare Access	Continue with no changes	
Core Section 4: Hypertension Awareness	Continue with no changes	
Core Section 5: Cholesterol Awareness	Continue with no changes	
Core Section 6: Chronic Health Conditions	Continue with no changes	
Core Section 7: Arthritis Burden	Move two questions from formerly approved Arthritis Management Optional Module to Rotating Core. Eliminate one question from rotating core.	The Arthritis Management Module has been eliminated and two questions from the former module will be moved to the rotating core. One core question was cut to allow for the inclusion, resulting in an increase of one question in this section. The change will allow for more complete data on

		arthritis burden and treatment within a two year cycle, rather than data provided annually for a subset of respondents. Question order will be affected but this will not result in new questions.
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Core Section 8: Demographics	Removal of respondent sex question	The question on respondent sex has been moved earlier in the questionnaire to allow for skip patterns in questions based on sex which are asked prior to the demographics section.
Core Section 9: Tobacco Use	Continue with no changes	
Core Section 10: Alcohol Consumption	Minor change to include interviewer note on definition of a drink to appear on screen for question 1 in the section.	Interviewers will not have to switch screens between questions 1 and 2 to have access to definition.
Core Section 11: Exercise (Physical Activity)	Continue with no changes	
Core Section 12: Fruits and Vegetables	Continue with no changes	
Core Section 13: Immunization	Changes in question wording on flu vaccination.	Flu spray and vaccination into the arm are reversed in the order of presentation to ensure that respondents hear shot injected into the arm last. This is to eliminate confusion on the much less frequent spray.
	Tetanus and pneumonia shots rotated from module to core.	These questions rotate into the core every three years.
Core Section 14: H.I.V./AIDS	Continue with no changes	
Emerging Code: Opioid Use	Three questions on opioid use/misuse are proposed.	These questions have been used by many states as state added questions. This section may be deleted if funding for

		the emerging core is not obtained by January 1.
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Optional Module Changes (as compared to current list of approved optional modules)		
Module 1: Prediabetes	Continue with no changes	
Module 2: Diabetes	Continue with no changes	
Module 3: Myalgic Encephalomyelitis/ Chronic Fatigue Syndrome (ME/CFS)	Previously included in field test, now included as module	This module was cognitively tested, voted on by the states and approved by OMB for the 2018 field test. It was included in the recent field test. This topic has not been included in previous iterations of BRFSS. Cognitive and field test results are included in Attachment 14.
Module 4: Hepatitis Treatment	Previously included in field test, now included as module	This module was cognitively tested, voted on by the states and approved by OMB for the 2018 field test. It was included in the recent field test. Questions on hepatitis were last asked on the BRFSS in 2006 and 2007. Cognitive and field test results are included in Attachment 14.
Module 5: HPV Vaccination	Make definition of HPV optional for interviewers to read. Require interviewer to say “human Papilloma virus” rather than just HPV, so that respondents are able to differentiate from “HIV”	The majority of respondents do not need to be informed about how HPV is defined. The move shortens the question length.

Module 6: Place of Flu Vaccination	Rotated from core to optional module	This question rotates into the core every three years
Module 7: Shingles Vaccination	Rotated from core to optional module	This question rotates into the core every three years
Module 8: Lung Cancer Screening	Continue with no changes	
Module 9: Breast and Cervical Cancer Screening	Continue with no changes	
Module 10: Prostate Cancer Screening	Continue with no changes	
Module 11: Prostate Cancer Decision Making	Continue with no changes	
Module 12: Colorectal Cancer Screening	Continue with no changes	
Module 13: Cancer Survivorship	Continue with no changes	
Module 14: Healthcare Access	Reduce the number of questions	The module will move to a two-year cycle, using the wording of previous administrations. During odd-numbered years, the module will include only one question, on the type of insurance coverage.
Module 15: Aspirin for CVD Prevention	Existing question instated as a module.	The module consists of a single question, taken from the previously approved module on CV Health. This module does not propose any new questions. The creation of the shorter module allows states to adopt the single question on aspirin without the adoption of other questions

		previously in the module.
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Module 16: Home/ Self-measured Blood Pressure	Previously included in field test, now included as module	The module consists of three questions on whether respondent monitor and report their blood pressure to health providers. This module was cognitively tested, voted on by the states, approved by OMB for the BRFSS 2018 field test, and included in the recent field test. Previously, questions on this topic were asked in the Actions to Control High Blood Pressure Module. Cognitive and field test results are provided in Attachment 14.
Module 17: Sodium or Salt-Related Behavior	Continue with no changes	
Module 18: Indoor Tanning	Continue with no changes	
Module 19: Excess Sun Exposure	Continue with no changes	
Module 20: Cognitive Decline	Continue with no changes	
Module 21: Caregiver	Elimination of respite question and addition of question specific to caring for persons with cognitive decline	The question on caregiver respite was not providing useful information. Specific information on caregiving for persons with cognitive decline is needed for program purposes and planning.
Module 22: Adverse Childhood Experiences	Re-use of a module included in BRFSS prior to OMB review.	The last administration of this module was in 2012,

		with four states adopting the questions. Because of the nature of the module, a crisis plan was added to the protocols. Cognitive and field test results are provided in Attachment 14.
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Module 23: Family Planning	Changes in wording of some questions which referred to sexual partners to limit responses to sex with men.	This module, asked only of females aged 18-49, focuses on sexual activity which could result in pregnancy. Other sexual activity information is not needed, therefore questions have been modified to reference sex between respondents and men.
Module 24: Alcohol Screening and Brief Intervention	Continue with no changes	
Module 25: Marijuana Use	Continue with no changes	
Module 26: Industry and Occupation	Continue with no changes	
Module 27: Food Stamps	Previously included in field test, now included as module	This module was cognitively tested, voted on by the states, approved by OMB for the 2018 field test, and included in the recent field test. Previous questions on food security were asked in the Social Determinants of Health Module. Cognitive and field test results are provided in Attachment 14.
Module 28: Sexual Orientation and Gender Identity (SOGI)	Continue with no changes	
Module 29: Prescribed Opioids	New module	These new modules are comprised of questions used as state-added questions in previous years.
Module 30: Use of Opioids Note Prescribed	New module	

Module 31: Opioid Dependency	New module	They are currently unfunded and may be deleted prior to administration of the questionnaire. They are provided here for OMB review should funding be approved prior to January 1, 2019.
Module 32: Random Child Selection	Continue with no changes	
Module 33: Childhood Asthma Prevalence	Continue with no changes	

The proposed new modules are designed to provide more detailed information about specific health topics (e.g., hepatitis treatment, chronic fatigue syndrome), or to address state-level public health priorities (e.g., self-management of high blood pressure). The new modules have been added to the list of approved modules (Attachment 4b-2019 Approved Questions by Optional Module).

Effect of Proposed Changes on the Burden Estimate

No changes are anticipated in burden estimate, as provided in the 2018 OMB review, and presented below in Table 2.

Type of Respondents	Form Name	No. of Respondents	No. of Responses per Respondent	Avg. Burden per Response (in hr)	Total Burden (in hr)
U.S. General Population	Landline Screener	375,000	1	1/60	6,250
	Cell Phone Screener	292,682	1	1/60	4,879
	Field Test Screener	900	1	1/60	15
Annual Survey	BRFSS Core	480,000	1	15/60	120,000

Respondents (Adults >18 Years)	Survey				
	BRFSS Optional Modules	440,000	1	15/60	110,000
Field Test Respondents (Adults >18 Years)	Field Test Survey	500	1	45/60	375
Total					09

Effect of Proposed Changes on Currently Approved Instruments and Attachments

Table 3 below describes those attachments which have been updated as a result of changes in the questions or screener language of the BRFSS. All updates are provided in red text in each attachment.

Table 3. Revised Attachment Titles

Previous Attachment Title	Change Request Attachment Title
4b-2018 Approved Questions by Optional Module	4b-2019 Approved Questions by Optional Module
5a- BRFSS Questionnaire	5a 2019 BRFSS Questionnaire
10a-2018 Calling Protocol and Dispositions	10a- 2019 Calling Protocol and Dispositions