Behavioral Risk Factor Surveillance Survey
BRFSS 2014

Thursday, September 12, 2013
150 Room - 540A
(10:30 A.M. – 12:00 P.M.)

Presented by:
Judy Bass
Arizona BRFSS Coordinator
Announcements:

- Bureau of Public Health staff update
- The annual AZ BRFSS report is undergoing some evolutionary changes
- A new question will be asked from 2014 forward
Introductions:

**AZ DHS, Bureau of Public Health Statistics**

Khaleel Hussaini, PhD - Bureau Chief,
Public Health Statistics, Division of Public Health Preparedness

Nicholas Bishop, PhD - Arizona Vital Statistician

Judy Bass – AZ BRFSS Coordinator

James Blackwell - Public Health Statistics Epidemiologist
2013 marks the 30th Anniversary of CDC BRFSS

and it remains

the Gold Standard for behavioral surveillance for the State of Arizona and Nationally.
What can we do with BRFSS data???

- Recommendations and Guidelines
- Identify Disparities / Anomalies
- Track Emerging State and National trends
- Progress toward Healthy People 2020 goals
- Improve Program Evaluation
- Refine Program Planning
- Assessing/Monitoring Chronic Disease Risks
**Decreased Sample Size**

<table>
<thead>
<tr>
<th>BRFSS 2013</th>
<th>Original sample size</th>
<th>New targeted sample size</th>
</tr>
</thead>
<tbody>
<tr>
<td>Landlines</td>
<td>4236</td>
<td>2350</td>
</tr>
<tr>
<td>Cell Phones</td>
<td>1416</td>
<td>835</td>
</tr>
</tbody>
</table>
Strata 1 = 500
Strata 2 = 450
Strata 3 = 450
Strata 4 = 450
Strata 5 = 500
Behavioral Risk Factor Surveillance Survey
BRFSS 2014

➢ Core Questions

➢ Optional Modules

➢ State – Added Questions

➢ JUSTIFICATIONS
Number of Questions Asked

Core Questions

<table>
<thead>
<tr>
<th>YEARS</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
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<tbody>
<tr>
<td></td>
<td>83</td>
<td>113</td>
<td>108</td>
<td>98</td>
<td>87</td>
<td>101</td>
<td>92</td>
</tr>
</tbody>
</table>
State-Added Questions

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of Questions Asked</th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td>23</td>
</tr>
<tr>
<td>2009</td>
<td>23</td>
</tr>
<tr>
<td>2010</td>
<td>45</td>
</tr>
<tr>
<td>2011</td>
<td>40</td>
</tr>
<tr>
<td>2012</td>
<td>50</td>
</tr>
<tr>
<td>2013</td>
<td>17</td>
</tr>
<tr>
<td>2014</td>
<td>59</td>
</tr>
</tbody>
</table>
Distribution of Questions

Legend:
- Core
- Optional
- State-Added


Graph showing the distribution of questions across Core, Optional, and State-Added categories for each year from 2008 to 2014.
JUSTIFICATIONS FOR STATE-ADDED AND OPTIONAL MODULE QUESTIONS

- The BRFSS questionnaire goes through rigorous validation and testing before its use. Federal agencies submit proposals to the Division of Behavioral Surveillance (DBS) of CDC with a clear rationale for including questions in the core or optional modules.
From this point forward, the Arizona BRFSS will ask for the Respondents’ nearest major cross-streets.

This data will be securely housed by the Bureau of Public Health Statistics.

The information gathered from this question will not be publicly available.

- E.g., this question and the “STATEQUE” variable will be redacted from the data made available to the public on the AZ BRFSS Website.
By adding this question, the AZ BRFSS data will be geocoded
  ◦ Data can then be assigned to the appropriate CHAA, PCA, or other small area

The current data is not designed to assign an observation to its appropriate sub-county

Stakeholders are increasingly asking for sub-county information
The CDC has been exploring Small Area Estimation (SAE) techniques.

A request was sent to the State Coordinators seeking input on SAE methodology and techniques.

SAE techniques were applied to the AZ BRFSS data:

- The data structure did not allow for appropriate aggregation to CHAA level.
- The smallest level is Zip-Code, which is too restrictive.
The AZ BRFSS will continue to provide County-level information. However, to better serve our stakeholders and the State of Arizona, new methodologies will be explored and assessed for validity. Some of the techniques explored thus far: [Methods-SAE.docx](#)

<table>
<thead>
<tr>
<th>Direct Estimation</th>
<th>Synthetic Estimation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spatial Smoothing</td>
<td>Multilevel Regression</td>
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</table>
State-Added and Optional Module Question / Answer Session
State-added and Optional Module costs will be $5,100 per question for 2015.

CDC is planning to increase the ratio of cell phone interviews from 30% to nearly 50% over the next 5 years.

Therefore, the cost per question will likely increase to $7,000+ in 2016.
Applicants received copies of the applications from each of the stakeholders and programs.

Only applicants who are present are allowed to vote.

Everyone who is not a qualified applicant will be asked to leave at the end of the meeting.

Q/A session

Vote on all modules recommended by CDC first.

Next, the State-Added—asking that you vote on the lesser number of questions first.

Then the State-Added you will vote on the greatest number of questions to be asked.
Contact Information

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- Website:  http://azdhs.gov/phs/phstats/brfs/index.htm
Thank you!