



DSU and TCP BRFSS 2024 Proposal Process

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Agenda

- Introductions
- BRFSS in Vermont
- Overview of proposal process
- Ask for this year and in the future

What is the Behavioral Risk Factor Surveillance System (BRFSS)?



- Telephone survey conducted annually
- Adults 18 and older



- Vermont Department of Health (VDH) in collaboration with the Centers for Disease Control and Prevention (CDC)

Objectives of BRFSS

The Behavioral Risk Factor Surveillance System (BRFSS) of adult Vermonters tracks health-related risk behaviors, chronic health conditions, and the use of preventive services.

- Monitor health-related risk behaviors: tobacco use, physical inactivity, poor nutrition, excessive alcohol consumption
- Assess chronic conditions: BRFSS helps in understanding the prevalence of chronic conditions like obesity, diabetes, heart disease, and hypertension.
- Evaluate preventive health measures: BRFSS assesses the use of preventive services like cholesterol screenings, vaccinations, and access to healthcare

BRFSS Methodology in Vermont

Demographic Characteristics, 2021		Percent
Sex	Male	49%
	Female	51%
Age	18-24	13%
	25-44	29%
	45-64	32%
	65+	26%
Education Level	High School or Less	36%
	Some College	28%
	College or More	35%
Household Income Level	Low (<\$25K)	13%
	Middle (\$25K-<\$50K)	25%
	High (\$50K-<\$75K)	19%
	Highest (≥\$75K)	42%
Disability	No Disability	75%
	Any Disability	25%

- +6,000 adults are randomly and anonymously selected and interviewed
- Trained interviewers with a uniform set of questions
- Standardized core set of questions developed by the CDC, plus questions added by the state
- Results are weighted to represent Vermont adult population

Significance of BRFSS in Vermont

- Inform public health policies: BRFSS data provides critical information to develop and implement public health policies and interventions.
- Track health disparities: BRFSS helps identify disparities in health behaviors and chronic conditions among different populations in Vermont.
- Guide health promotion efforts: BRFSS data guides the development of targeted health promotion campaigns and initiatives.

BRFSS Impact in Vermont



- Examples of BRFSS impact: BRFSS data has influenced policies for programs, guidelines, and initiatives in Vermont.



- Improved health outcomes: By monitoring risk factors and targeting interventions, BRFSS contributes to improved health outcomes and a healthier population.



- **Collaboration and partnerships:** BRFSS fosters collaboration between public health agencies, researchers, and communities to address health challenges.

Survey overview

- The survey is split up into two major sections
 - Standardized core survey
 - State added questions (optional modules, state created questions)
- This is a timed survey---it is a very competitive process to add state added questions to the survey because there is a **limited amount of time available** and there are lot of proposed questions.
- There is a long-term plan
- [Summary of questions](#)

Core sections of the survey

These questions are mandated to be in the survey by the CDC.

There are 15 core sections.

Standardized core survey is MOST of the survey (similar to the YRBS).

Table of Contents

OMB Header and Introductory Text

Landline Introduction

Cell Phone Introduction

Core Section 1: Health Status

Core Section 2: Healthy Days

Core Section 3: Health Care Access

Core Section 4: Exercise

Core Section 5: Oral Health

Core Section 6: Chronic Health Conditions

Core Section 7: Demographics

Core Section 8: Disability

Core Section 9: Breast and Cervical Cancer Screening

Core Section 10: Colorectal Cancer Screening

Core Section 11: Tobacco Use

Core Section 12: Lung Cancer Screening

Core Section 13: Alcohol Consumption

Core Section 14: Immunization

Core Section 15: H.I.V./AIDS

Closing Statement/ Transition to Modules

State added questions

State added questions can be:

1. **Optional modules from the CDC**
2. Past-year optional modules from the CDC
3. Questions from other states' BRFSS survey
4. Newly created questions

Optional Modules

Module 1: Prediabetes

Module 2: Diabetes

Module 3: Arthritis

Module 4: Shingles Vaccination

Module 5: HPV - Vaccination

Module 6: Tetanus Vaccination

Module 7: Heart Attack and Stroke

Module 8: Cancer Survivorship:
Type of Cancer

Module 9: Cancer Survivorship:
Course of Treatment

Module 10: Cancer Survivorship:
Pain Management

Module 11: Prostate Cancer
Screening

Module 12: Cognitive Decline

Module 13: Caregiver

Module 14: Adverse Childhood
Experiences

Module 15: Social Determinants and
Health Equity

Module 16: Reactions to Race

Module 17: Marijuana Use

Module 18: Tobacco Cessation

Module 19: Other Tobacco Use

Module 20: Sugar-Sweetened Beverage

Module 21: Firearm Safety

Module 22: Industry and Occupation

Module 23: Random Child Selection

Module 24: Childhood Asthma Prevalence

Module 25: Sex at Birth

Module 26: Sexual Orientation and
Gender Identity (SOGI)

Module 27: Family Planning

Adding new questions?

- Adding questions is a **highly competitive** process. Additional questions are mostly likely to be added to the survey in the following order:
 1. Optional modules from the CDC
 2. Past-year optional modules from the CDC
 3. Questions from other states' BRFSS survey
 4. Newly created questions (rare)

Overview of the proposal process

Early July

August 18th



Requests for proposals are sent out



CDC draft of survey is shared



Discussion and collaboration with stakeholders



Complete the proposal form



BRFSS coordinator collects forms and sends to review committee



Presentations to review committee



Scoring by review committee



Discussion and determination of which questions can be added

Questions DSU is proposing to add this year: cannabis use questions that we have asked in the past.

Interviewer note: The following questions are about marijuana or cannabis. Do not include hemp-based or CBD-only products in your responses.

- 1. During the past 30 days, on how many days did you use marijuana or cannabis?
- 2. During the past 30 days, did you smoke it (for example, in a joint, bong, pipe, or blunt)?
- 3. ...eat it or drink it (for example, in brownies, cakes, cookies, or candy, or in tea, cola, or alcohol)?
- 4. ...vaporize it (for example, in an e-cigarette-like vaporizer or another vaporizing device)
- 5. ...dab it (for example, using a dabbing rig, knife, or dab pen)?
- 6. ...use it in some other way?
- 7. During the past 30 days, which one of the following ways did you use marijuana the most often? Did you usually...
 - 8. When you used marijuana or cannabis during the past 30 days, was it usually:
 - For medical reasons (like to treat or decrease symptoms of a health condition);
 - For non-medical reasons (like to have fun or fit in), or
 - For both medical and non-medical reasons.
 - Don't know/not sure
 - Refused
- 9. During the past 30 days, how many times did you drive a car or other vehicle within 3 hours of using marijuana or cannabis?

Current
CDC
optional
module

Past year
CDC
optional
module

State
added

Questions the Tobacco Control Program is looking to propose:

Tobacco Cessation:

- How long has it been since you last smoked a cigarette, even one or two puffs?
- During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?

Other Tobacco Use (Menthol):

- Currently, when you smoke cigarettes, do you usually smoke menthol cigarettes?
- Currently, when you use e-cigarettes, do you usually use menthol e-cigarettes?

What are we asking for this year? And in the future?



This year: providing letter of support



In the future:

- Collaboration to choose questions
- Justification (filling out the entire proposal form) will need to occur before creating a new question
- We can talk more about this process after the 2024 proposal process has been completed



Thank you!

Let's stay in touch.

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