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Michigan Behavioral Risk Factor Surveillance System (MiBRFSS)

Chronic Disease Epidemiology Section

Division Sharing Day

October 23, 2008





Behavioral Risk Factor Surveillance System (BRFSS)

- Coordinated by the CDC
- Composed of annual, <u>state-level</u> telephone surveys of adults
 - ❖ Behavioral Risk Factor Surveys (BRFS)
- All 50 states, 3 territories, and the District of Columbia participated in the 2007 BRFSS

Mibres

- Only source of state-specific, population-based estimates among Michigan adults
- Prevalence of various...
 - Health behaviors
 - Medical conditions
 - Preventive health care practices
- Source for the Asthma Call-Back Survey

- Data collected on quarterly basis
 - IPPSR at Michigan State University
- Telephone number sample
 - Random-digit-dialed methodology
 - Disproportionate stratification
- Calling attempts
 - Up to 15 to reach each household
 - Up to 15 to complete each interview
 - Made across different days and times

- Once a household is reached, one adult is randomly selected to complete the interview
- MiBRFS split questionnaire
 - Core questionnaire from CDC
 - ~ 80 questions
 - State-added questions
 - Divided across questionnaire splits
 - CDC optional modules
 - State developed questions

- Dual focus questionnaire
 - Surveillance component
 - Questions asked regularly over time
 - o Core questions
 - o Optional modules
 - Non-surveillance component
 - Questions asked periodically
 - o CDC questions on emerging issues
 - State-added questions



Michigan BRFS Protocol (2007 Surveillance Component)

Health Status

- General health status
- Quality of life
- Disability
- Weight status
- Health care access

Health Risk Behaviors

- Smoking
- Alcohol
- Inadequate physical activity
- Inadequate fruit & vegetable consumption



Michigan BRFS Protocol (2007 Surveillance Component)

Clinical Preventive Practices

- Routine checkup in past year
- Hypertension awareness
- Cholesterol awareness
- Adult immunizations
- HIV testing

Chronic Conditions

- Asthma
- Arthritis
- Diabetes
- Cardiovascular Disease

Michigan BRFS Protocol (2007 State-Added Questions)

CDC optional modules

- Diabetes
- Arthritis Management
- Mental Illness & Stigma

Other state-added questions

- Oral cancer screening
- Tobacco (ATS)
- Family history of sudden cardiac death
- Osteoporosis
- Workers' compensation

- 2007 MiBRFS
 - Average interview length
 - ~ 21-22 minutes
 - ❖ 7,505 total interviews
 - 7,196 complete interviews
 - 309 partial interviews
 - CASRO response rate
 - Michigan: 52.6%
 - Median for all participating states: 50.6%

- MiBRFS data analysis
 - Weighted analysis
 - Create our own weights
 - Adjust for the probability of selection
 - Poststratification weighting factor to adjust for age, gender, and race of the Michigan population
 - SAS-Callable SUDAAN
 - Prevalence estimates
 - Asymmetric 95% confidence intervals
 - Other statistical comparisons

Dissemination of MiBRFS Results

- Michigan BRFS Website
 - www.michigan.gov/brfs
- Annual Tables
 - Overall annual tables by demographics
 - Annual tables by race/ethnicity
 - Region and LHD-specific tables
- Health Risk Behaviors in the State of Michigan: The Michigan BRFS Annual Report

Dissemination of MiBRFS Results

- MiBRFSS Surveillance Briefs
 - Prevalence of Fast Food Consumption and Related Behaviors
 - Highlights of the 2007 MiBRFS and Trends in Physical Activity
 - ❖Public Opinion Regarding Tobacco Policies in Michigan
- Conference Presentations
- Journal Publications

MiBRFS Internal Data Usage

- Findings used by...
 - **❖** Arthritis
 - **❖** Asthma
 - Cancer
 - **CVD**
 - ❖ Diabetes
 - **❖** Disability
 - **⇔** Genomics
 - ❖ Tobacco
 - Other programs

- Findings used in...
 - **❖ Program planning**
 - Evaluating programs
 - Establishing program priorities
 - Developing policies
 - Assessing trends
 - Shaping legislation
 - Addressing emerging public health issues



- Findings used by...
 - Local public health departments
 - Academic Institutions
 - Non-profit organizations
 - and many others

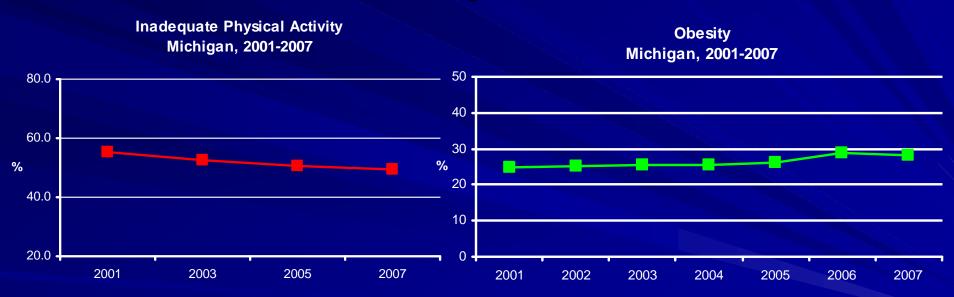
- Findings used in...
 - Securing funding for local public health program development
 - Establishment of local public health policies
 - Accessing countylevel trends in health behaviors

MiBRFS Data Sharing

- No state-level public-use datasets
- MiBRFS Data Use Agreement (DUA)
- Current DUAs
 - Diabetes program
 - Analysis of Diabetes state-added questions
 - Tobacco program
 - Analysis of Adult Tobacco Survey state-added questions

Public Health Implications

Michigan adults are becoming more active, but obesity is still on the rise

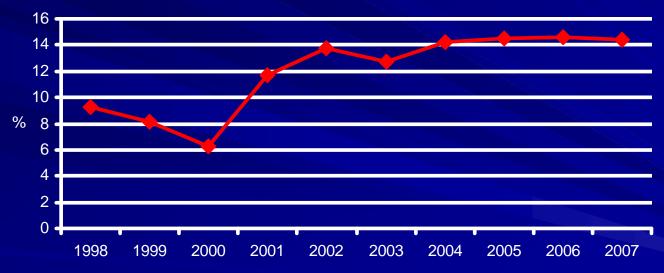


MDCH has a number of programs to increase physical activity and promote healthy eating

Public Health Implications

Access to health care is an increasing problem
No Health Care Coverage

Among Adults Aged 18-64 Years Michigan BRFS, 1998-2007



MDCH programs such as the Smokers Quit Kit and Quit Line, Breast and Cervical Cancer Programs, and Influenza Vaccine Exchange Program

Public Health Implications

- Disparities remain in risk behaviors, preventive care measures, and disease prevalence
 - **❖** Most often found in...
 - Older adults
 - Females
 - African Americans
 - Adults with less than college education
 - Adults living in lower income households
 - Need for integration of public health across disease areas
 - Michigan Primary Care Initiative

Limitations of the MiBRFSS

- Non-coverage
 - Increase in the use of cell phones and other communication modalities
 - cell phone survey & multi-mode pilot project
 - Non-coverage bias more of a problem with health insurance, smoking, and binge drinking questions
- Non-response
 - **❖BRFSS** responses rates are normally around 50%
- Self-reported data
 - Underestimates of obesity, smoking, etc.

Future of the MiBRFSS

- Simultaneous modes of data collection
 - RDD landline sample
 - Cell phone sample
 - Mail follow-up to RDD soft refusals
- New weighting methods
 - ❖ Statistical "Raking"
 - Calculate our own weights?



Contact Information

Michigan BRFS Coordinator

Ann Rafferty

(517) 335-8403

Raffertya@michigan.gov

Michigan BRFS Epidemiologist

Chris Fussman

(517) 335-8144

Fussmanc@michigan.gov

?Questions?