David V. McQueen

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BRFSS Surveillance General
Atlanta - Rome 2006

Behavioral Risk Factor Surveillance System (BRFSS)

Behavioral Surveillance Branch,
National Center for Chronic Disease Prevention and Health Promotion,

Overview

- Background
- Current system
- Questionnaire
- Process
- Contributions and uses
- Recent developments
- Future plans

BRFSS History

- State-based system in collaboration with CDC
- Established in 1984 with 15 states
- Began with six individual-level risk factors associated with leading causes of premature mortality among adults
  - Cigarette smoking; Alcohol use; Physical inactivity; Diet; Hypertension; Safety belt use

Current BRFSS

- Conducted by all 50 states, DC, Puerto Rico, U.S. Virgin Islands, and Guam
- Largest continuously conducted telephone health survey in the world
- 264,684 interviews in 2003
- Nearly 3 million interviews overall
- Primary focus on adult behaviors linked with leading causes of death

Questionnaire Design

- Core
- Rotating Core
- Emerging Core
- Optional Modules
- State-Added Questions
- BRFSS Conference – Proposals & Voting

Core – Demographics

- Age
- Gender
- Race & racial makeup
- Marital status
- Education level
- Employment status
- Income
- County of residence
- Zip code
- Number of children in household
- Height & weight
- Pregnancy status

Core

- Health Status
- Health Care Access
- Healthy Days (Health-related quality of life)
- Emotional Support and Life Satisfaction
- Disability
- Tobacco Use
- Alcohol consumption
- Exercise
- Immunization
- HIV/AIDS
- Diabetes
- Asthma
- Cardiovascular Disease

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Rotating Core

- Fruits & vegetables
- Hypertension awareness
- Cholesterol awareness
- Arthritis burden
- Physical activity
- Women's health
- Prostate screening
- Colorectal cancer screening
- Oral health
- Injury

Optional Modules

- Diabetes
- Oral health
- Visual impairment
- Healthy days: symptoms
- Cardiovascular health
- Controlling high blood pressure
- Heart attack & stroke
- Influenza
- Adult asthma history
- Random child selection
- Childhood asthma prevalence
- Child immunization
- Women's health
- Osteoporosis
- Arthritis Management
- Weight Control
- Indoor Air Quality
- Home Environment
- Smoking Cessation
- Secondhand Smoke Policy
- Veteran's Status
- Reactions to Race
- Sexual Violence
- Intimate Partner Violence

Versatility: State-Added Questions

- Earthquake emergency preparedness
- West Nile Virus
- Bioterrorism
- Environmental health
- Suicide
- Osteoporosis
- Food handling

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Responding to September 11th

- Connecticut, New Jersey, and New York added questions on effects of terrorist attacks on World Trade Center
- Findings demonstrated need for public health programs to address both physical and psychological aftermath

Standardized

- All states use core questionnaire
- Standardized methodology for collection and analysis
- Allows for state-to-state comparisons
- Now allows for local-to-local comparisons (SMART BRFSS)

Process

- States receive monthly telephone sample from CDC
- Household sample design
- Random digit dialing
- Random selection of adult 18+ years
- Conduct interviews, data entered into CATI system
- States edit data

Process: New Features

- Submit data on upload/download Internet site
- Instant data quality reports
- CDC can track data submission
- Data processed in 24 hours and back to the state
- States can track any changes

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Rapid Turnaround

- States receive mid-year data reports, now quarterly
- Receive preliminary reports within a week of final year data
- In 2004, 43 states had final reports by end of January, all by March
- Data available to public on Web site by six months after end of data collection

Who Uses BRFSS Data?

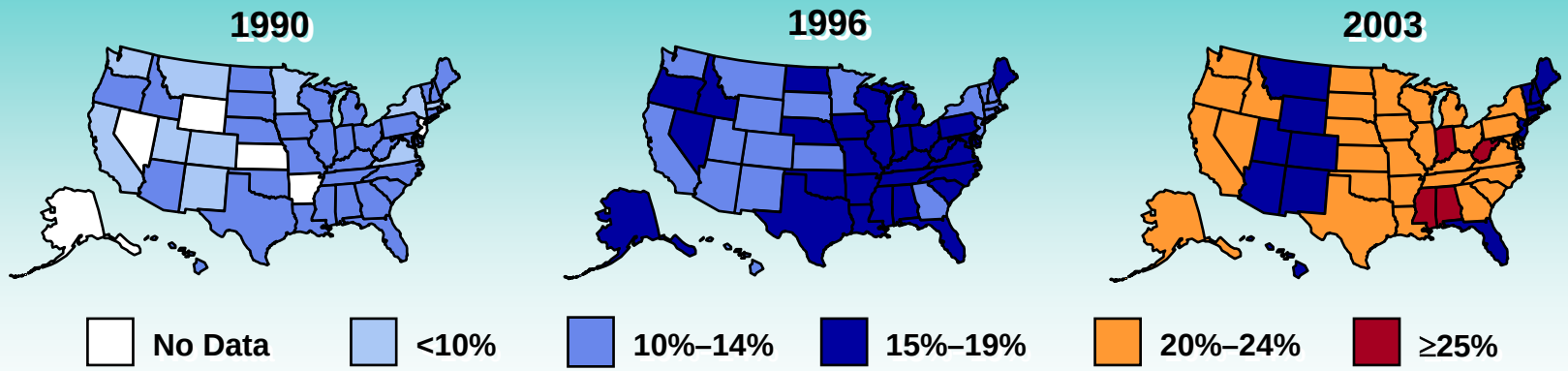
- State and local government
- CDC programs
- Government agencies
- Universities – faculty & students
- Research organizations
- Health professionals in nonprofits
- Insurance companies
- Managed care organizations
- Businesses
- Public
- Even elementary and middle school students!

Contributions to Public Health

- **Key component in major public health issues for the last two decades**
  - **National**
  - **CDC programs**
  - **State**
  - **Local**

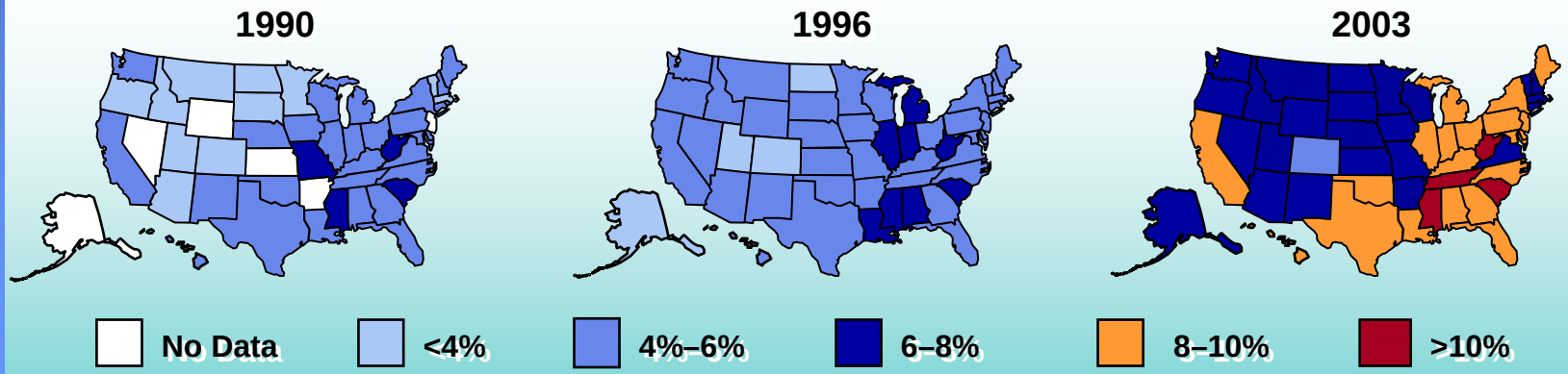
Prevalence of Obesity* Among U.S. Adults

(*BMI ≥30, or about 30 lbs overweight for 5'4" person)



Prevalence of Diabetes* Among U.S. Adults

(*Includes gestational diabetes)



Source: Behavioral Risk Factor Surveillance System, CDC.

Flu Vaccine Response

- Vaccine shortage announced October 5
- Worked with state coordinators and National Immunization Program
- In November, all states incorporated new questions
- Data submitted weekly
- By November 6, 56% of adults aged 65+ who received vaccine last year had been vaccinated this season

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Folic Acid Campaign

- U.S. Public Health Service recommendation
  - All women of childbearing age take 400 mcg folic acid
- To plan public health campaign, questions added to BRFSS in 1997
- Result

Amount Per Serving	% Daily Value
Niacin 20 mg	100%
Vitamin B6 2 mg	100%
Folic Acid 400 mcg	100%
Vitamin B12 6 mcg	100%
Pantothenic Acid 10 mg	100%

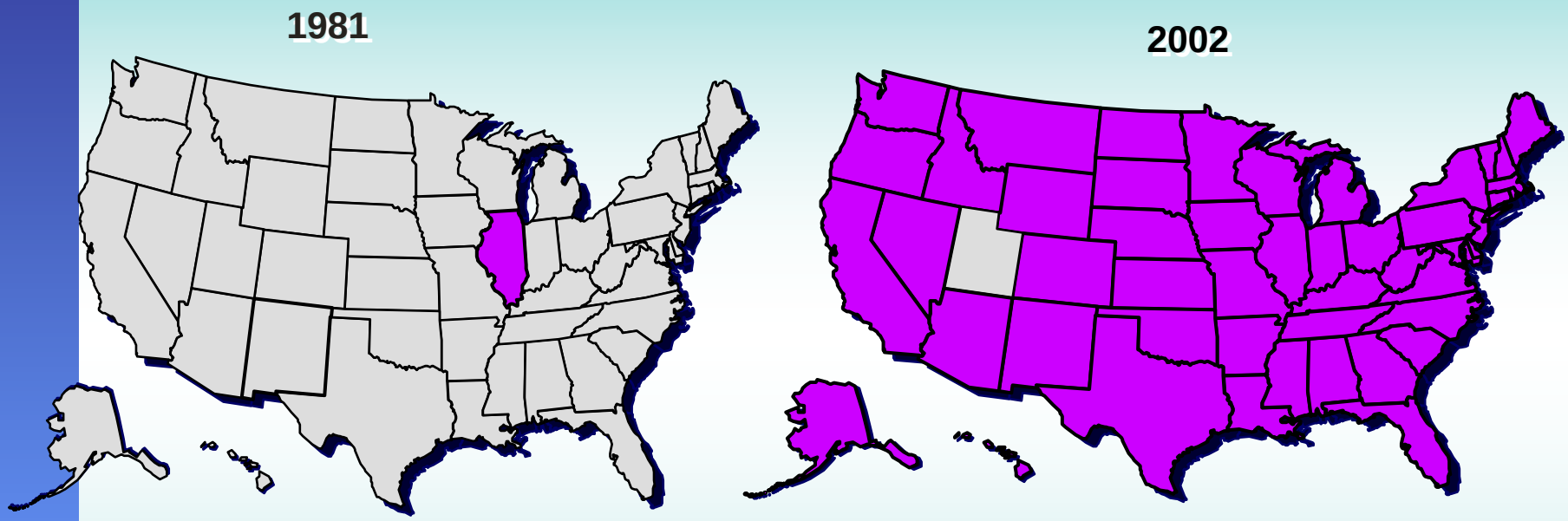
- Most women didn't know folic acid prevented neural tube birth defects
- Two groups emerged: Contemplators & Non-contemplators

- Campaign continues with two-pronged approach
- Steady increase in knowledge shown

State Action

- Identify emerging health problems
- Program development
- Policy development
- Tracking health risk trends
- Program evaluation

Mandatory Insurance Coverage for Screening Mammography



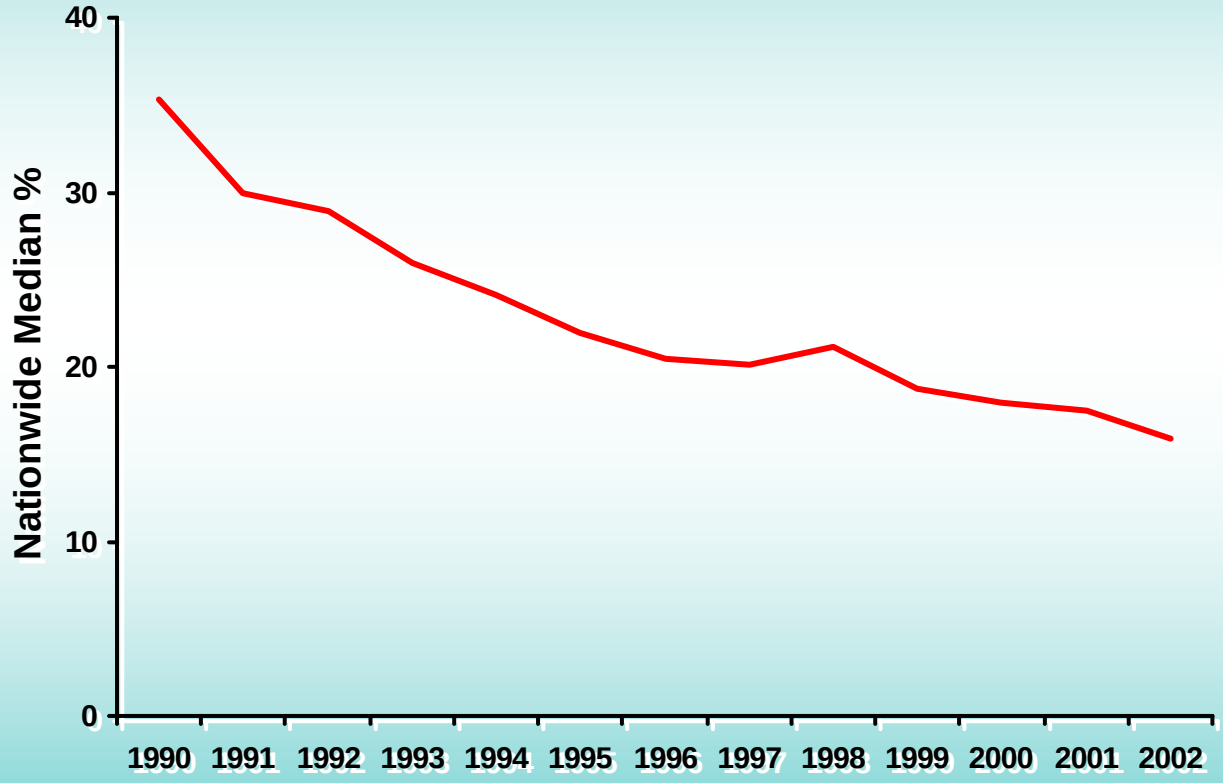
No mandatory insurance coverage for screening mammography.

Mandatory insurance coverage for screening mammography.

Source: National Cancer Institute – State Cancer Legislative Database Program, Bethesda, MD, 2004.

Prevalence of Women Who Never Had a Mammogram, Ages 40 and Older

BRFSS 1990–2002



Source: Behavioral Risk Factor Surveillance System, CDC.

Local BRFSS Data Impact

- Williamson County, Texas — 56% no physical activity, 34% overweight, and 21% obese
- Local public health officials took notice — and ACTION
- Created bicycle maps with routes, roadway ratings, safety tips
- Developed Web-based application for customized maps: wcbikemap.org

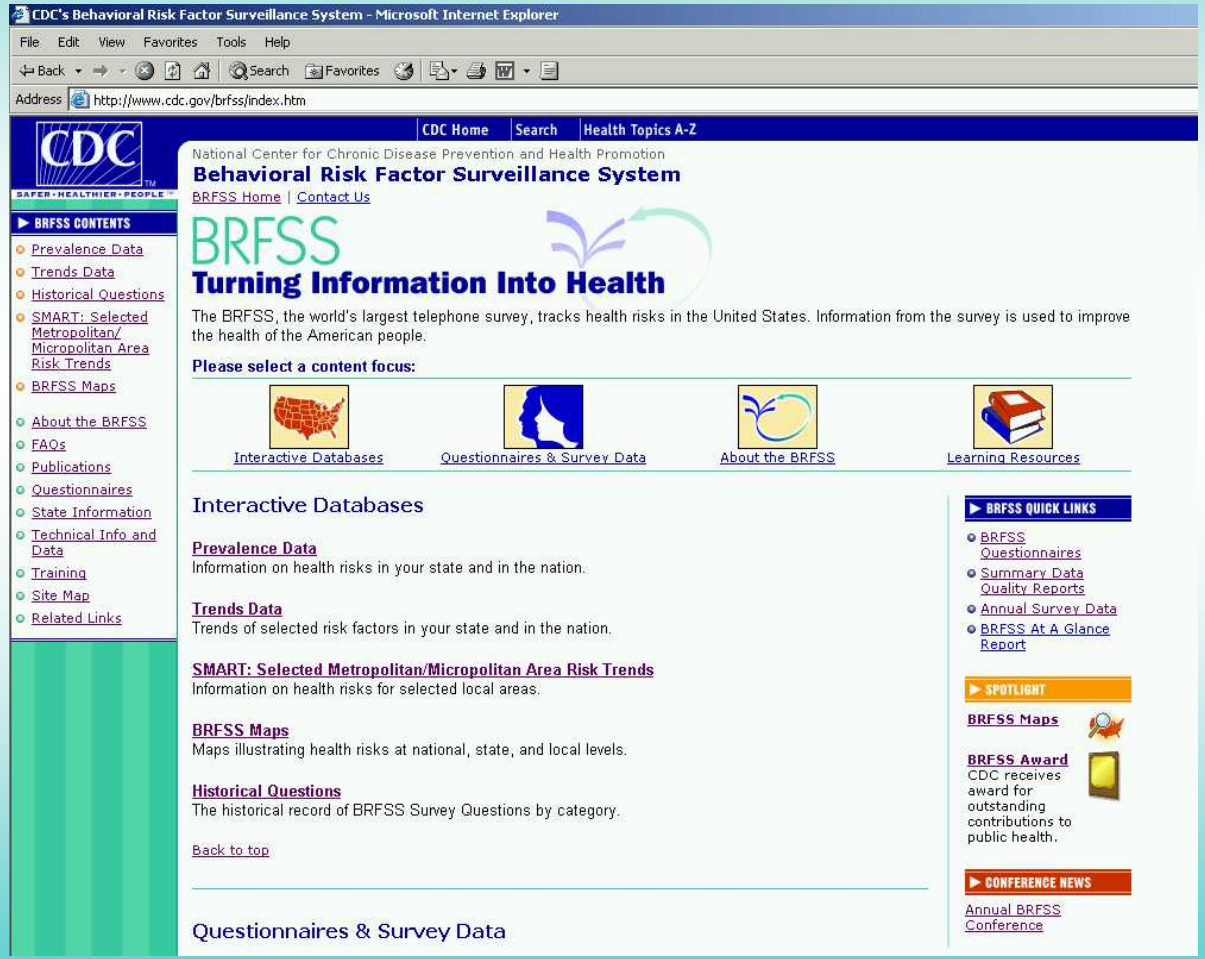
SMART BRFSS

- "Selected Metropolitan/Micropolitan Area Risk Trends from the BRFSS"
- How? ➔Increased sample size and county of residence
  - Metropolitan/Micropolitan Statistical Areas (MMSAs)
  - Counties

SMART BRFSS

- Standardized weighting methodology
- MMSA – 500 or more interviews
- Counties – able to be weighted
- 98 MMSAs & 146 counties for 2002

BRFSS Web Site



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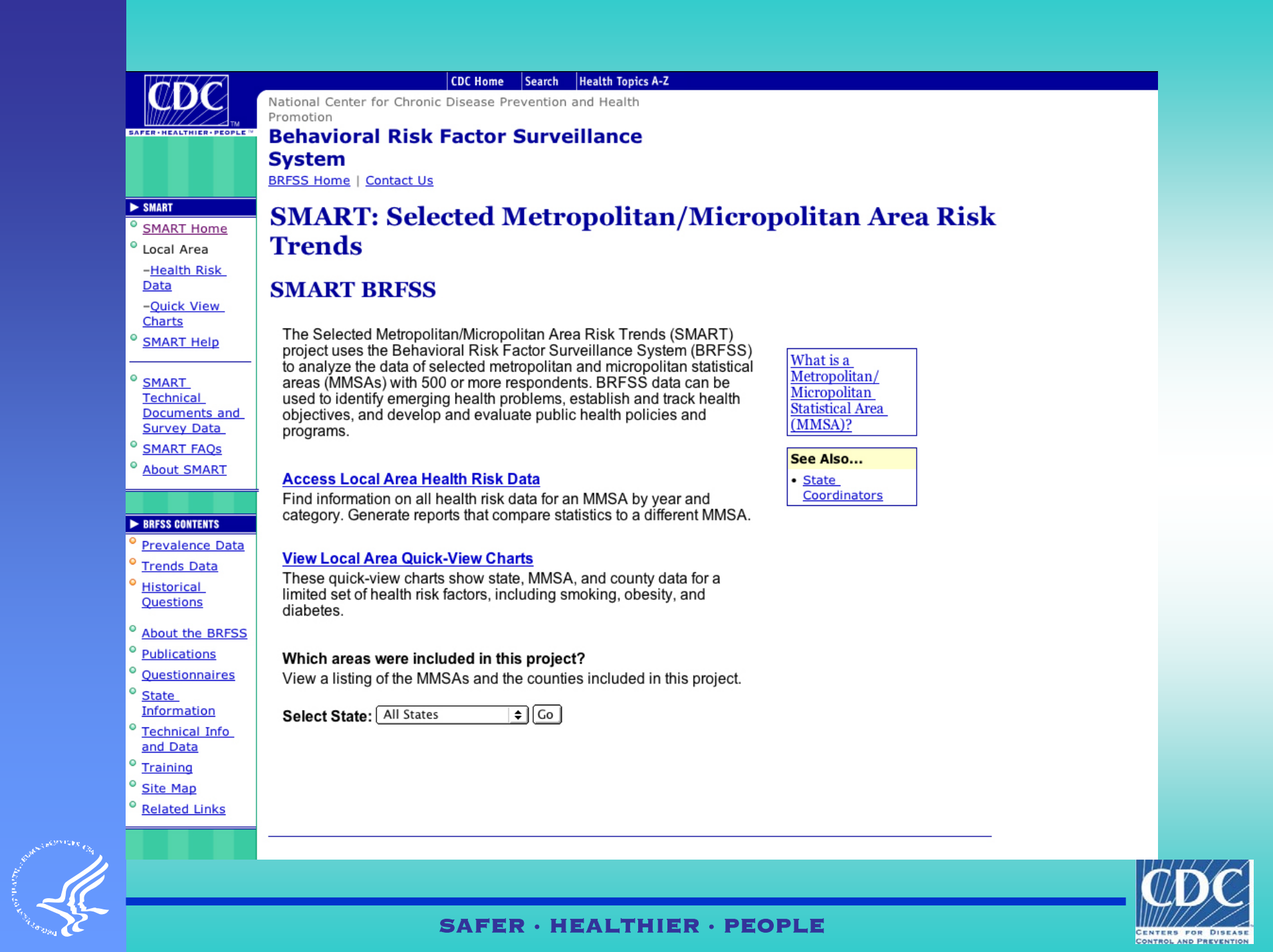
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SMART: Selected Metropolitan/Micropolitan Area Risk Trends
SMART BRFSS
The Selected Metropolitan/Micropolitan Area Risk Trends (SMART) project uses the Behavioral Risk Factor Surveillance System (BRFSS) to analyze the data of selected metropolitan and micropolitan statistical areas (MMSAs) with 500 or more respondents. BRFSS data can be used to identify emerging health problems, establish and track health objectives, and develop and evaluate public health policies and programs.
What is a Metropolitan/ Micropolitan Statistical Area (MMSA)?
See Also...
State Coordinators
Access Local Area Health Risk Data
Find information on all health risk data for an MMSA by year and category. Generate reports that compare statistics to a different MMSA.
View Local Area Quick-View Charts
These quick-view charts show state, MMSA, and county data for a limited set of health risk factors, including smoking, obesity, and diabetes.
Which areas were included in this project?
View a listing of the MMSAs and the counties included in this project.
Select State: All States Go
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Behavioral Risk Factor Surveillance System

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SMART: Selected Metropolitan/Micropolitan Area Risk Trends

SMART Technical Documents and Survey Data

Would you like to use our data?

2002 SURVEY DATA

Survey Data Info	Data Files	SAS Resources

A word about file formats: The SMART BRFSS Survey Data are available in several different file formats. Each type available from this page is described below.

.rtf	**Rich Text Format File (RTF)**. This format contains plain text and allows for basic formatting. Use a word processor to view and edit these files.
.zip	**Zip Archive File (ZIP)**. This format contains one or more files within it and is compressed to minimize the file's size. Use any zip utility to unzip these archives.
.exe	**Self-Extracting Archive File (EXE)**. The executable files available on this page automatically unzip an archive file without needing to invoke a Zip file utility.
.sas	**SAS Instruction File (SAS).** This format contains plain text that can be edited with a text editor. The instructions are intended for statistical analysis software developed by SAS Institute, Inc.

Survey Data Information

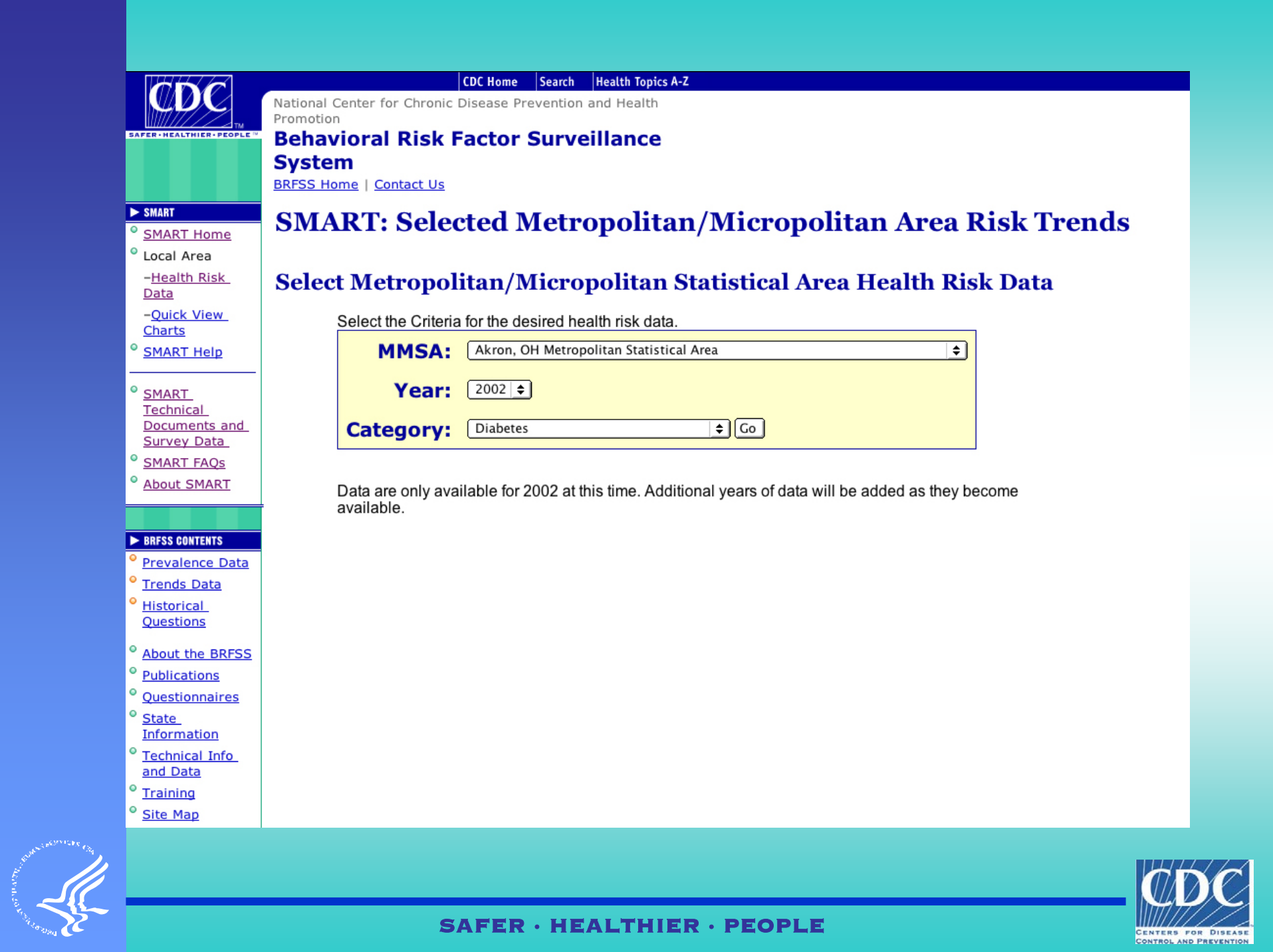
2002 SMART BRFSS MMSA Weighting Methodology

Provides information on the background, design, data collection and processing, statistical, and analytical issues. .rtf 165K

2002 SMART BRFSS County Weighting Methodology

Provides information on the background, design, data collection and processing, statistical, and analytical issues. .rtf 222K

Calculated Variables in Data Files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SMART: Selected Metropolitan/Micropolitan Area Risk Trends
Select Metropolitan/Micropolitan Statistical Area Health Risk Data
Select the Criteria for the desired health risk data.
MMSA:
Akron, OH Metropolitan Statistical Area
Year:
2002
Category:
Diabetes
Go
Data are only available for 2002 at this time. Additional years of data will be added as they become available.
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SMART: Selected Metropolitan/Micropolitan Area Risk Trends

Select Health Risk Data

Choose a topic below to view the health risk data for your selected local area.
Note: An asterisk (*) denotes that county-specific data are available for this area. If there is only one county listed, the MMSA and county have identical data sets.

The Quick View Chart on this Web page is available in Portable Document Format (PDF). You will need Acrobat Reader to view and print this document.

Akron, OH Metropolitan Statistical Area 2002
Included in this area: Summit County, OH*; Portage County, OH

Select a Category Link to see its questions. View OH's Quick View Chart

**Activity Limitations
Alcohol Consumption
Asthma
**Cardiovascular Disease
**Cholesterol Awareness
Colorectal Cancer Screening
**Demographics
Diabetes
Choose a question to view its data.

- Have you ever been told by a doctor that you have diabetes?

Exercise
**Firearms
Health Care Access
**Health Care Utilization
Health Status
**HIV/AIDS
**Hypertension Awareness
**Immunization

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View Health Risk Data

Akron, OH Metropolitan Statistical Area 2002

Note: An asterisk (*) denotes that county-specific data are available for this area.If there is only one county listed, the MMSA and county have identical data sets.

Included in this area: Summit County, OH*; Portage County, OH

Select

Compare to another MMSA or year

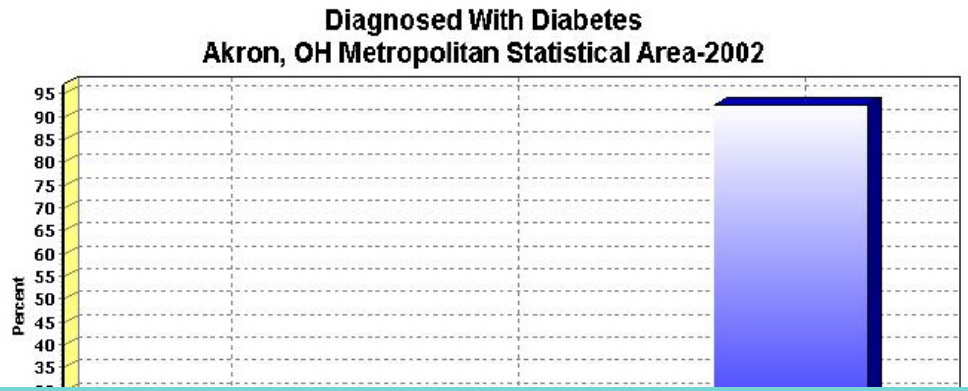
Select another question

List all MMSAs for this question

Diabetes: Have you ever been told by a doctor that you have diabetes?

	Yes	Yes, pregnancy-related	No
%	6.7	1.0	92.4
CI	(4.3-9.1)	(0.0-2.0)	(89.9-94.9)
n	41	5	493

% = Percentage, CI = Confidence Interval, n = Cell Size
Percentages are weighted to population characteristics.
N/A = Not available if the unweighted sample size for the denominator was < 50 or the CI half width was > 10 for any cell.



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View Health Risk Data

Summit County, OH 2002

Select

Compare to another County or year

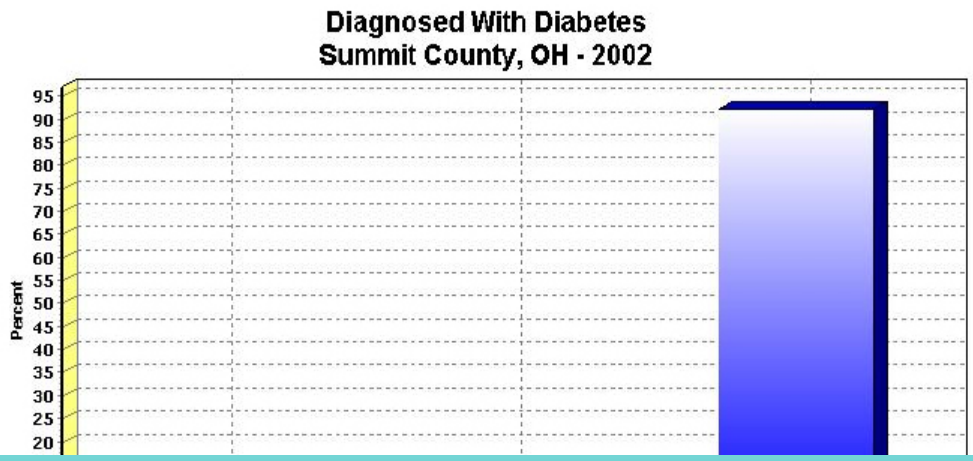
Select another question

List all Counties within this MMSA for this question

Diabetes: Have you ever been told by a doctor that you have diabetes?

	Yes	Yes, pregnancy-related	No
%	6.8	1.1	92.1
CI	(4.4-9.2)	(0.1-2.1)	(89.6-94.6)
n	37	5	449

% = Percentage, CI = Confidence Interval, n = Cell Size
Percentages are weighted to population characteristics.
N/A = Not available if the unweighted sample size for the denominator was < 50 or the CI half width was >10 for any cell.



National Center for Chronic Disease Prevention and Health Promotion

Behavioral Risk Factor Surveillance System

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SMART: Selected Metropolitan/Micropolitan Area Risk Trends

Compare Health Risk Data to Another MMSA or Year

Akron, OH Metropolitan Statistical Area 2002

Diabetes: Have you ever been told by a doctor that you have diabetes?

Compare Akron, OH Metropolitan Statistical Area 2002 to:

Dayton, OH Metropolitan Statistical Area [Go]

Compare Akron, OH Metropolitan Statistical Area 2002 to another year:

2002 [Go]

Data are only available for 2002 at this time. Additional years of data will be added as they become available.

Compare Health Risk Data

Akron, OH Metropolitan Statistical Area vs Dayton, OH Metropolitan Statistical Area 2002

Diabetes: Have you ever been told by a doctor that you have diabetes?

Select

Compare to another MMSA or year

Select another question

List all MMSAs for this question

MMSA:		Yes	Yes, pregnancy-related	No
Akron, OH Metropolitan Statistical Area	% CI n	6.7 (4.3-9.1) 41	1.0 (0.0-2.0) 5	92.4 (89.9-94.9) 493
Dayton, OH Metropolitan Statistical Area	% CI n	7.7 (5.3-10.1) 55	1.9 (0.3-3.5) 9	90.4 (87.7-93.1) 531

% = Percentage, CI = Confidence Interval, n = Cell Size
Percentages are weighted to population characteristics.
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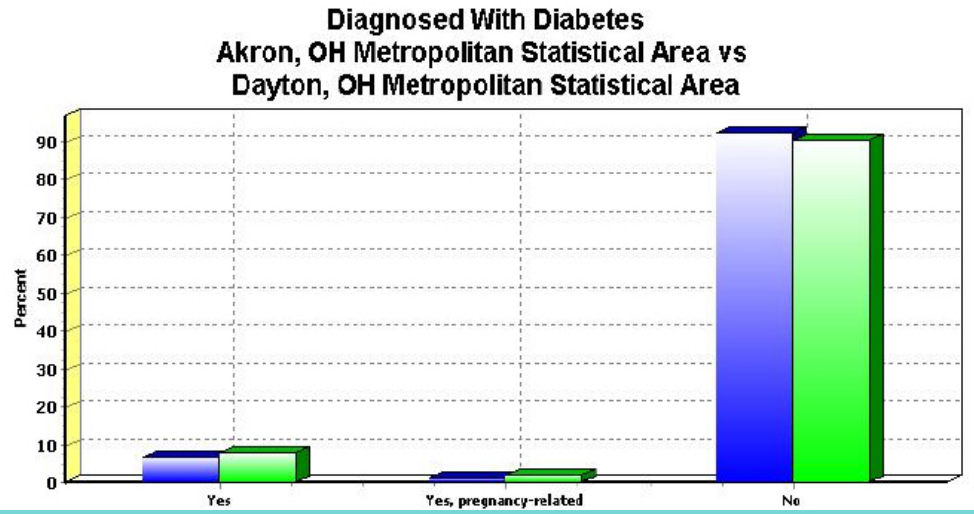

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View Health Risk Data for All MMSAs

Akron, OH Metropolitan Statistical Area 2002

Back to Health Risk Data Page

Select

Compare to another MMSA or year

Select another question

Diabetes: Have you ever been told by a doctor that you have diabetes?

To see a specific MMSA's data, click on the MMSA name.

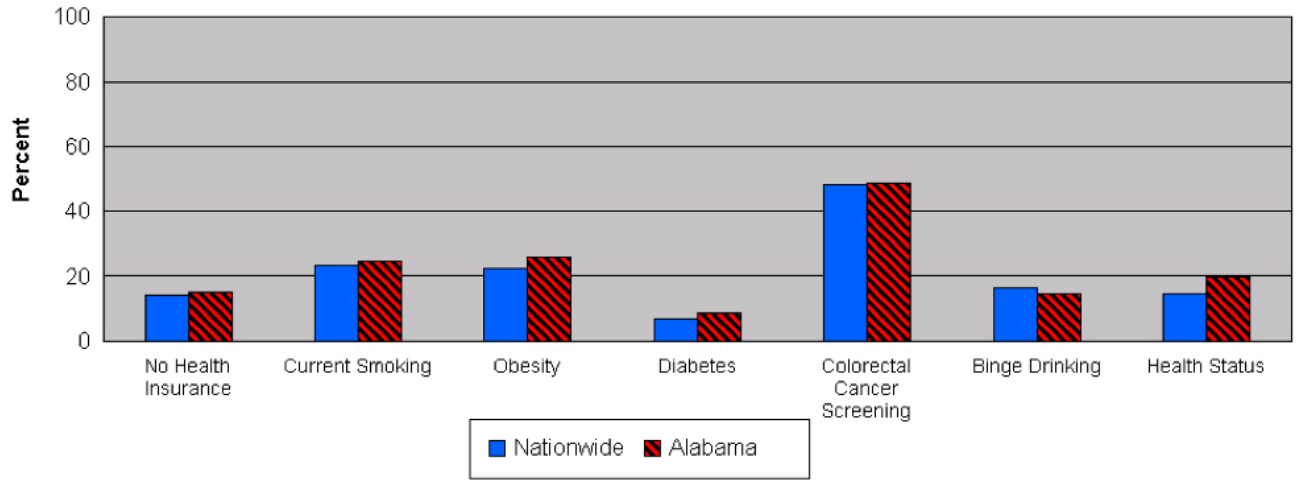
Metropolitan/Micropolitan Area	% Yes	% Yes, pregnancy-related	% No
Akron, OH Metropolitan Statistical Area	6.7	1	92.4
Albuquerque, NM Metropolitan Statistical Area	5.1	0.8	94.2
Anchorage, AK Metropolitan Statistical Area	2.7	3	94.3
Asheville, NC Metropolitan Statistical Area	5.8	0.6	93.6
Atlanta-Sandy Springs-Marietta, GA Metropolitan Statistical Area	5.2	1.3	93.5
Baltimore-Towson, MD Metropolitan Statistical Area	6.2	0.7	93.1
Baton Rouge, LA Metropolitan Statistical Area	6.3	0.7	93
Bethesda-Frederick-Gaithersburg, MD Metropolitan Division	5.5	0.8	93.7
Birmingham-Hoover, AL Metropolitan Statistical Area	10	1.1	88.9
Boise City-Nampa, ID Metropolitan Statistical Area	5.6	1.2	93.2
Boston-Quincy, MA Metropolitan Division	4.9	1.2	93.9
Bridgeport-Stamford-Norwalk, CT Metropolitan Statistical Area	4.4	1.6	94
Burlington-South Burlington, VT Metropolitan Statistical Area	5.5	0.7	93.8
Cambridge-Newton-Framingham, MA Metropolitan Division	5.1	1.5	93.5
Chambersburg, PA Micropolitan Statistical Area	6.7	0.3	93
Charleston, WV Metropolitan Statistical Area	11.1	1	87.9
Cheyenne, WY Metropolitan Statistical Area	6.2	0.3	93.5
Chicago-Naperville-Joliet, IL Metropolitan Division	6.3	2.1	91.6
Cincinnati-Middletown, OH-KY-IN Metropolitan Statistical Area	6.4	2.1	91.5
Columbia, SC Metropolitan Statistical Area	9.4	0.3	90.3

SMART BRFSS

(Selected Metropolitan/Micropolitan Area* Risk Trends from the Behavioral Risk Factor Surveillance System)

Alabama

Percentage of US and Alabama Adults Reporting Selected Health Risks, BRFSS 2002



Survey Definitions

No Health Insurance - Percentage of adults reporting no health care coverage in the past year
Current Smoking - Percentage of adults reporting having smoked at least 100 cigarettes in their lifetime and currently smoke
Obesity - Percentage of adults reporting Body Mass Index greater than or equal to 30.0
Diabetes - Percentage of adults told by doctor they have diabetes
Colorectal Cancer Screening - Percentage of adults 50 years or older reporting having ever had a sigmoidoscopy or colonoscopy exam
Binge Drinking - Percentage of adults reporting having five or more drinks on an occasion, one or more times in the past month
Health Status - Percentage of adults reporting general health as fair or poor

* Metropolitan statistical area - Group of counties that contain at least one urbanized area of 50,000 or more inhabitants. Micropolitan statistical area - Group of counties that contain at least one urban cluster of at least 10,000 but less than 50,000 inhabitants. Metropolitan Division - Smaller group of counties within a metropolitan statistical area which contains 2.5 million or more inhabitants. (Source: U.S. Office of Management and Budget)

SMART BRFSS

(Selected Metropolitan/Micropolitan Area Risk Trends from the Behavioral Risk Factor Surveillance System)

Alabama Areas

Percentage of Adults Reporting Selected Health Risks - Selected Alabama Areas, BRFSS 2002.

	Nationwide Median % *	Alabama % (±95% CI†)	Birmingham - Hoover, AL Metropolitan Statistical Area % (±95% CI)
No Health Insurance	14.1	15.1 (±1.8)	11.1 (±2.7)
Current Smoking	23.0	24.4 (±2.0)	24.0 (±3.7)
Obesity	22.2	25.7 (±2.0)	23.8 (±3.5)
Diabetes	6.7	8.5 (±1.0)	10.0 (±2.4)
Colorectal Cancer Screening	48.1	48.7 (±3.0)	54.4 (±5.9)
Binge Drinking	16.1	14.5 (±1.8)	15.5 (±3.5)
Health Status	14.7	19.7 (±1.6)	18.8 (±3.1)

* Median percentage of 50 states, District of Columbia, Puerto Rico, Guam, and the U.S. Virgin Islands
NA = Prevalence estimate not available if the unweighted sample size for the denominator was < 50 or the CI half width > 10.
† CI Confidence Interval.

Counties included in Area Estimates

Birmingham-Hoover, AL Metropolitan Statistical Area	Bibb County, AL; Blount County, AL; Chilton County, AL; Jefferson County, AL; Shelby County, AL; St. Clair County, AL; Walker County, AL

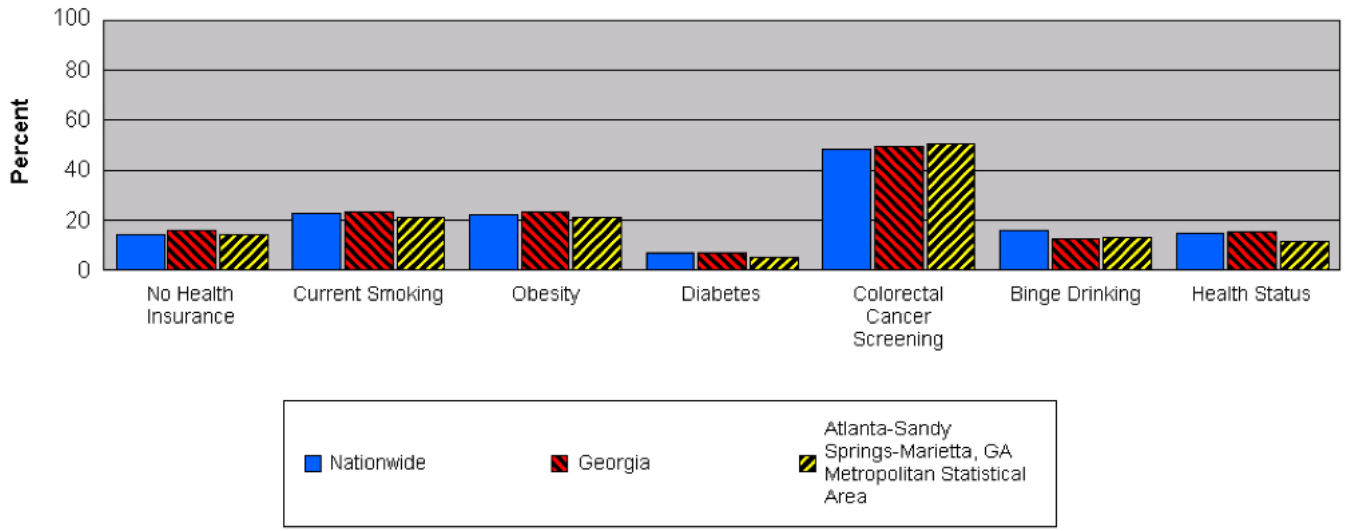
For more information, please contact the Alabama BRFSS state coordinator Sondra Reese, MPH at 334-206-5601 or go to www.cdc.gov/brfss

SMART BRFSS

(Selected Metropolitan/Micropolitan Area* Risk Trends from the Behavioral Risk Factor Surveillance System)

Atlanta-Sandy Springs-Marietta, GA Metropolitan Statistical Area

Percentage of Adults Reporting Selected Health Risks - Atlanta-Sandy Springs-Marietta, GA Metropolitan Statistical Area, BRFSS 2002.



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Colorectal Cancer Screening - Percentage of adults 50 years or older reporting having ever had a sigmoidoscopy or colonoscopy exam
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SMART BRFSS

(Selected Metropolitan/Micropolitan Area Risk Trends from the Behavioral Risk Factor Surveillance System)

Atlanta-Sandy Springs-Marietta, GA Metropolitan Statistical Area

Percentage of Adults Reporting Selected Health Risks - Atlanta-Sandy Springs-Marietta, GA Metropolitan Statistical Area and Selected Counties, BRFSS 2002.

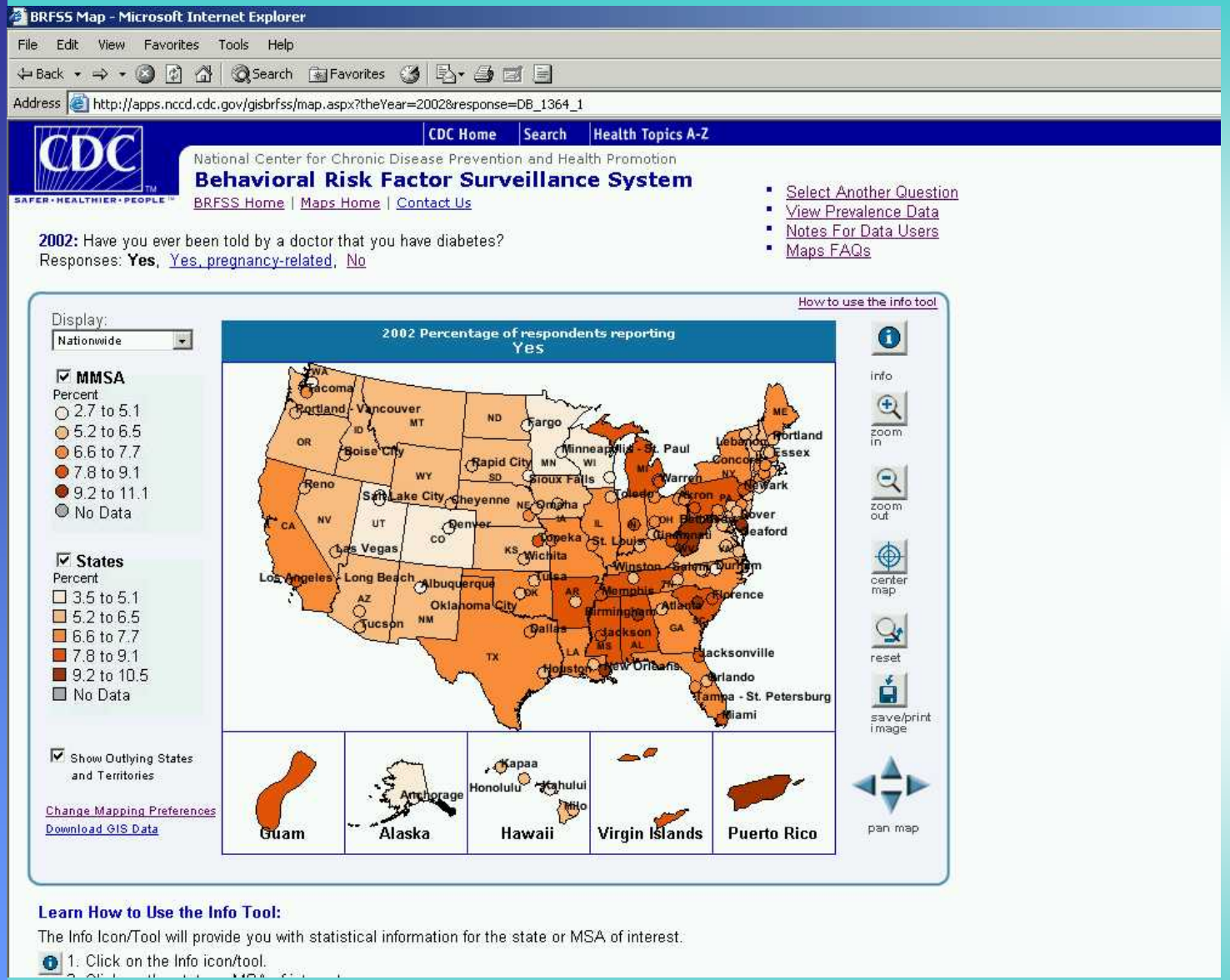
	Nationwide Median % *	Georgia % (±95% CI†)	Atlanta - Sandy Springs - Marietta, GA Metropolitan Statistical Area % (±95% CI)	Cobb County,GA % (±95% CI)	DeKalb County,GA % (±95% CI)	Fulton County,GA % (±95% CI)
No Health Insurance	14.1	15.7 (±1.4)	14.0 (±2.4)	13.0 (±5.3)	15.1 (±5.7)	13.8 (±4.7)
Current Smoking	23.0	23.2 (±1.6)	21.3 (±2.4)	16.1 (±5.5)	18.9 (±7.6)	17.1 (±5.1)
Obesity	22.2	23.5 (±1.6)	20.9 (±2.5)	19.7 (±5.9)	16.0 (±5.1)	24.1 (±6.3)
Diabetes	6.7	7.1 (±0.8)	5.2 (±1.2)	4.8 (±3.1)	5.0 (±2.9)	4.7 (±3.3)
Colorectal Cancer Screening	48.1	49.2 (±2.8)	50.3 (±4.7)	NA	NA	NA
Binge Drinking	16.1	12.8 (±1.8)	13.3 (±2.6)	13.1 (±5.7)	13.9 (±5.7)	13.9 (±7.6)
Health Status	14.7	15.3 (±1.2)	11.5 (±1.6)	10.1 (±4.5)	8.0 (±3.5)	10.1 (±3.9)

* Median percentage of 50 states, District of Columbia, Puerto Rico, Guam, and the U.S. Virgin Islands
NA = Prevalence estimate not available if the unweighted sample size for the denominator was < 50 or the CI half width > 10.
† CI Confidence Interval.

For more information, please contact the Georgia BRFSS State coordinator Linda Martin, MS at 404-657-9627 or go to www.cdc.gov/brfss

BRFSS Maps

- Web-based interactive mapping application
- Uses geographic information system (GIS) mapping technology
- Graphically displays state and MMSA prevalence data
- Features include: info tool, save and print map images, change classification methods, downloadable GIS data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Address http://apps.nccd.cdc.gov/gisbrfss/map.aspx?theYear=2002&response=DB_1364_1
CDC Home Search Health Topics A-Z
CDC
SAFER · HEALTHIER · PEOPLE
National Center for Chronic Disease Prevention and Health Promotion
Behavioral Risk Factor Surveillance System
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Select Another Question
View Prevalence Data
Notes For Data Users
Maps FAQs
2002: Have you ever been told by a doctor that you have diabetes?
Responses: Yes, Yes, pregnancy-related, No
How to use the info tool
Display:
Nationwide
MMSA
Percent
2.7 to 5.1
5.2 to 6.5
6.6 to 7.7
7.8 to 9.1
9.2 to 11.1
No Data
States
Percent
3.5 to 5.1
5.2 to 6.5
6.6 to 7.7
7.8 to 9.1
9.2 to 10.5
No Data
Show Outlying States and Territories
Change Mapping Preferences
Download GIS Data
2002 Percentage of respondents reporting
Yes
Guam
Alaska
Hawaii
Virgin Islands
Puerto Rico
info
zoom in
zoom out
center map
reset
save/print image
pan map
Learn How to Use the Info Tool:
The Info Icon/Tool will provide you with statistical information for the state or MSA of interest.
1. Click on the Info icon/tool.

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Show Outlying States and Territories

Change Mapping Preferences
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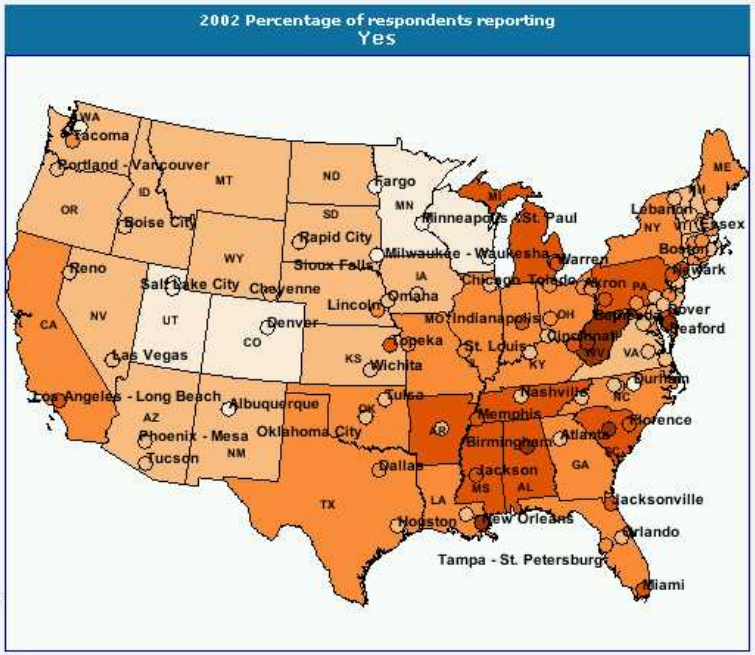

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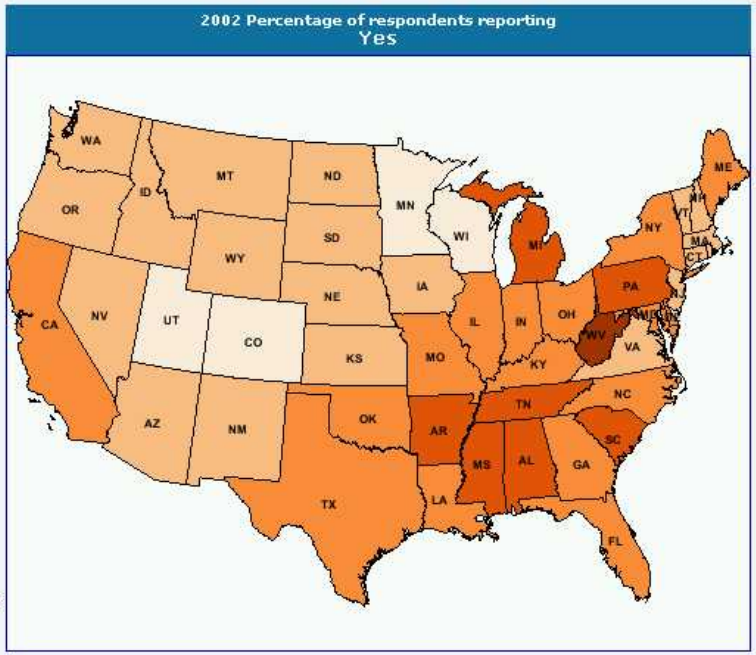

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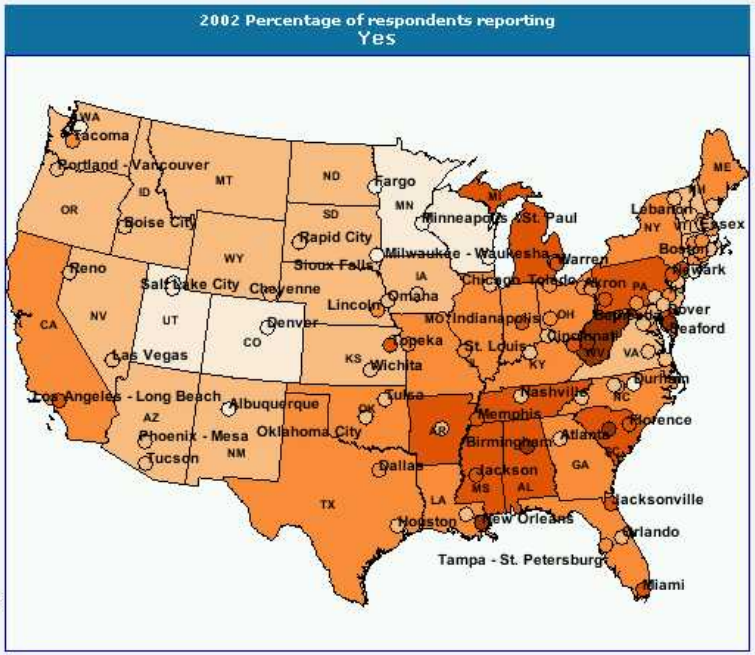

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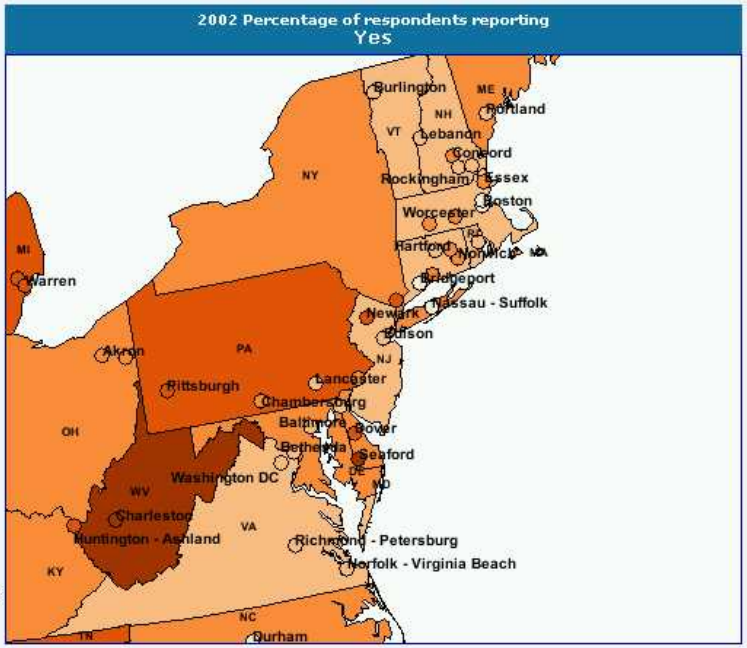

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Research & Development

- Expert panel recommendations
- Advanced letter
- Impact of National Do-Not-Call list
- Multi-mode surveillance

Future Plans

- SMART BRFSS — Continue increasing local data coverage
- 2nd Expert Panel — Stay on cutting edge of survey methodology
- Panels — Follow-up studies of subpopulations identified by BRFSS
- Web Enabled Analysis Tool

www.cdc.gov/brfss