Behavioral Risk Factor Surveillance System (BRFSS)
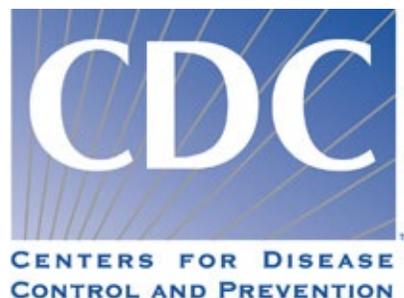## 2023 Alaska Questionnaire

Version 8.22.24

Alaska-specific content is in purple

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CDC
CENTERS FOR DISEASE
CONTROL AND PREVENTION

Public reporting burden of this collection of information is estimated to average 27 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-1061).

NOTE: Interviewers do not need to read any part of the burden estimate nor provide the OMB number unless asked by the respondent for specific information. If a respondent asks for the length of time of the interview provide the most accurate information based on the version of the questionnaire that will be administered to that respondent. If the interviewer is not sure, provide the average time as indicated in the burden statement. If data collectors have questions concerning the BRFSS OMB process, please contact Marquisette Glass Lewis at grp2@cdc.gov.

Behavioral Risk Factor Surveillance System (BRFSS)
2023 Alaska Questionnaire

Table of Contents

Screener – Landline Only

HELLO, I am calling for the Alaska Department of Health. My name is _____(name)_____. We are gathering information about the health of US residents. This project is conducted by the health department with assistance from the Centers for Disease Control and Prevention. Your telephone number has been chosen randomly, and I would like to ask some questions about health and health practices.

Field Size: 1

Variable Name: [CTELENM1]

Question: LL.01 Is this (phone number) ?

1 = Yes - *Go to LL.02, PVTRESD1*
2 = No - *Terminate Phone Call*

Field Size: 1

Variable Name: [PVTRESD1]

Question: LL.02 Is this a private residence?

READ ONLY IF NECESSARY: "By private residence, we mean someplace like a house or apartment."
1 = Yes - *Go to LL.04, STATERE1*
2 = No - *Go to LL.03, COLGHOUS*
3 = No, business phone only - *Terminate Phone Call*

Field Size: 1

Variable Name: [COLGHOUS]

Question: LL.03 Do you live in college housing?

1 = Yes - *Go to LL.04, STATERE1*
2 = No - *Terminate Phone Call*

Field Size: 1

Variable Name: [STATERE1]

Question: LL.04 Do you currently live in ____(state)____?

1 = Yes - *Go to LL.05, CELPHON1*
2 = No - *Terminate Phone Call*

Field Size: 1

Variable Name: [CELPHON1]

Question: LL.05 Is this a cell telephone?

1 = Yes, it is a cell phone - *Terminate Phone Call*
2 = Not a cell phone - *Go to LL.06, LADULT1*

Field Size: 1

Variable Name: [LADULT1]

Question: LL.06 Are you 18 years of age or older?

1 = Yes - *If LL.03, COLGHOUS, is 1 go to LL.07, COLGSEX1; else go to LL.08, NUMADULT*
2 = No - *If LL.03, COLGHOUS, is 1 Terminate Phone Call, else go to LL.08, NUMADULT*

Field Size: 2

Variable Name: [NUMADULT]

Question: LL.07 I need to randomly select one adult who lives in your household to be interviewed. Excluding adults living away from home, such as students away at college, how many members of your household, including yourself, are 18 years of age or older?

1 = Number of adults in the household - *Go to LL.09, LANDSEX2*
2 = Number of adults in the household - *Go to LL.08, RESPSLC1*
3 = Number of adults in the household - *Go to LL.08, RESPSLC1*
4 = Number of adults in the household - *Go to LL.08, RESPSLC1*
5 = Number of adults in the household - *Go to LL.08, RESPSLC1*
6-99 = 6 or more - *Go to LL.08, RESPSLC1*

Field Size:

Variable Name: [RESPSLC1]

Question: LL.08 The person in your household that I need to speak with is the adult with the most recent birthday. Are you the adult with the most recent birthday?

1 = Yes - *Go to Section 01.01 (Health Status) GENHLTH*
2 = No – *Ask for correct respondent*

Field Size: 1

Variable Name: [LANDSEX2]

Question: LL.09 Are you?

1 = Male
2 = Female
3 = Unspecified or another gender identity
7 = Don't know/Not Sure
9 = Refused

Skip Question LL10, if QSTVER >= 20; or if LL.09, LANDSEX2, is coded 1 or 2

Field Size: 1

Variable Name: [LNDSXBRT]

Question: LL.10 What was your sex at birth? Was it male or female?

1 = Male
2 = Female
7 = Don't know/Not Sure - *Terminate Phone Call*
9 = Refused - *Terminate Phone Call*

Screener – Cell Phone Only

Skip Question CP01, if QSTVER < 20

HELLO, I am calling for the <u>Alaska Department of Health</u>. My name is _____(name)____. We are gathering information about the health of U.S. residents. This project is conducted by the health department with assistance from the Centers for Disease Control and Prevention. Your telephone number has been chosen randomly, and I would like to ask some questions about health and health practices.

Skip Question CP01, if QSTVER < 20

Field Size: 1

Variable Name: [SAFETIME]

Question: CP.01 Is this a safe time to talk with you?

1 = Yes - *Go to CP.02, CTELNUM1*
2 = No - *Set Appointment or Terminate Phone Call*

Skip Question CP02, if QSTVER < = 20

Field Size: 1

Variable Name: [CTELNUM1]

Question: CP.02 Is this (phone number)?

1 = Yes - *Go to CP.03, CELLFON5*
2 = No - *Terminate Phone Call*

Field Size: 1

Variable Name: [CELLFON5]

Question: CP.03 Is this a cell phone?

1 = Yes - *Go to CP.04, CADULT1*
2 = No - *Terminate Phone Call*

Field Size: 1

Variable Name: [CADULT1]

Question: CP.04 Are you 18 years of age or older?

1 = Yes - *Go to CP.05, CELLSEX2*
2 = No - *Terminate Phone Call*

Field Size: 1

Variable Name: [CELLSEX2]

Question: CP.05 Are you?

1 = Male - *Go to CP.07, PVTRESD3*
2 = Female - *Go to CP.07, PVTRESD3*
3 = Unspecified or another gender identity - *Go to CP.06, CELSXBRT*
7 = Don't know/Not Sure - *Go to CP.06, CELSXBRT*
9 = Refused - *Go to CP.06, CELSXBRT*

Field Size: 1

Variable Name: [CELSXBRT]

Question: CP.06 What was your sex at birth? Was it male or female?
Note: By private residence, we mean someplace like a house or apartment.

1 = Male - *Go to CP.07, PVTRESD3*
2 = Female - *Go to CP.07, PVTRESD3*
7 = Don't know/Not Sure - *Terminate Phone Call*
9 = Refused - *Terminate Phone Call*

Field Size: 1

Variable Name: [PVTRESD3]

Question: CP.07 Do you live in a private residence?

Note: By private residence, we mean someplace like a house or apartment.

1 = Yes - *Go to CP.08, CSTATE1*
2 = No - *Go to CP.07 CCLGHOUS*

Skip Question CP08, if QSTVER < 20; or CP.07, PVTRESD3, is coded 1

Field Size: 1

Variable Name: [CCLGHOUS]

Question: CP.08 Do you live in college housing?

1 = Yes - *Go to CP.09, CSTATE1*
2 = No - *Terminate Phone Call*

Skip Question CP09, if QSTVER < 20; or CP.08, CCLGHOUS, is coded 2

Field Size: 1

Variable Name: [CSTATE1]

Question: CP.09 Do you currently live in Alaska?

1 = Yes - *Go to CP.11, LANDLINE*
2 = No - *Go to CP.10, RSPSTAT1*

Skip Question CP10, if QSTVER < 20; or CP.09, CSTATE1, is coded 1

Field Size: 2

Variable Name: [RSPSTAT1]

Question: CP.10 In what state do you currently live?

With CDC approval, Alaska changed the protocol on 07.01.20. If respondent lives in a state other than 2 (Alaska), discontinue the interview.

1 = Alabama	22 = Louisiana	41 = Oregon
2 = Alaska	23 = Maine	42 = Pennsylvania
4 = Arizona	24 = Maryland	44 = Rhode Island
5 = Arkansas	25 = Massachusetts	45 = South Carolina
6 = California	26 = Michigan	46 = South Dakota
8 = Colorado	27 = Minnesota	47 = Tennessee
9 = Connecticut	28 = Mississippi	48 = Texas
10 = Delaware	29 = Missouri	49 = Utah
11 = District of Columbia	30 = Montana	50 = Vermont
12 = Florida	31 = Nebraska	51 = Virginia
13 = Georgia	32 = Nevada	53 = Washington
15 = Hawaii	33 = New Hampshire	54 = West Virginia
16 = Idaho	34 = New Jersey	55 = Wisconsin
17 = Illinois	35 = New Mexico	56 = Wyoming
18 = Indiana	36 = New York	66 = Guam
19 = Iowa	37 = North Carolina	72 = Puerto Rico
20 = Kansas	38 = North Dakota	78 = Virgin Islands
21 = Kentucky	39 = Ohio	77 = Out of US - *Terminate Call*
	40 = Oklahoma	99 = Refused - *Terminate Call*

Field Size: 1

Variable Name: [LANDLINE]

Question: CP.11 Do you also have a landline telephone in your home that is used to make and receive calls?

1 = Yes
2 = No
7 = Don't know/Not sure
9 = Refused

Field Size: 2

Variable Name: [HHADULT]

Question: CP.12 How many members of your household, including yourself, are 18 years of age or older?

INTERVIEWER NOTE: IF CCLGHOUS=1, set HHADULT=1

1-76 = Number of adults
77 = Don't know/Not sure
99 = Refused

CDC Core Sections

Respondent Sex

Field Size: 1

Variable Name: [SEXVAR]

Sex of Respondent

1 = Male – *Code=1 if LANDSEX2=1 or LNDSXBRT=1 or CELLSEX2=1 or CELSXBRT=1*
2 = Female – *Code=2 if LANDSEX2=1 or LNDSXBRT=1 or CELLSEX2=1 or CELSXBRT=1*

Section 1: Health Status

Field Size: 1

Variable Name: [GENHLTH]

Question: C01.01 Would you say that in general your health is:

1 = Excellent
2 = Very good

3 = Good
4 = Fair
5 = Poor
7 = Don't know/Not sure
9 = Refused

Section 2: Healthy Days

Field Size: 2

Variable Name: [PHYSHLTH]

Question: C02.01 Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?

01-30 = Number of days
88 = None
77 = Don't know/Not sure
99 = Refused

Field Size: 2

Variable Name: [MENTHLTH]

Question: C02.02 Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?

01-30 = Number of days
88 = None
77 = Don't know/Not sure
99 = Refused

Skip Question 02.03, if Section 02.01, PHYSHLTH, is 88 and Section 2.02, MENTHLTH, is 88

Field Size: 2

Variable Name: [POORHLTH]

Question: C02.03 During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?

01-30 = Number of days
88 = None
77 = Don't know/Not sure
99 = Refused

Field Size: 2

Variable Name: [PRIMINS1]

Question: C03.01 What is the current source of your primary health insurance?

1 = A plan purchased through an employer or union (including plans purchased through another person´s employer)
2 = A private nongovernmental plan that you or another family member buys on your own
3 = Medicare
4 = Medigap
5 = Medicaid
6 = Children´s Health Insurance Program (CHIP)
7 = Military related health care: TRICARE (CHAMPUS) / VA health care / CHAMP- VA
8 = Native Health Service or Indian Health Service
9 = State sponsored health plan
10 = Other government program
88 = No coverage of any type
77 = Don't know/Not Sure
99 = Refused

Field Size: 1

Variable Name: [PERSDOC3]

Question: C03.02 Do you have one person or a group of doctors that you think of as your personal health care provider?

1 = Yes, only one
2 = More than one
3 = No
7 = Don't know/Not sure
9 = Refused

Field Size: 1

Variable Name: [MEDCOST1]

Question: C03.03 Was there a time in the past 12 months when you needed to see a doctor but could not because you could not afford it?

1 = Yes
2 = No
7 = Don't know/Not sure
9 = Refused

Field Size: 1

Variable Name: [CHECKUP1]

Question: C03.04 About how long has it been since you last visited a doctor for a routine checkup? A routine checkup is a general physical exam, not an exam for a specific injury, illness, or condition.

1 = Within past year (anytime less than 12 months ago)
2 = Within past 2 years (1 year but less than 2 years ago)
3 = Within past 5 years (2 years but less than 5 years ago)
4 = 5 or more years ago
8 = Never
7 = Don't know/Not sure
9 = Refused

Section 4: Exercise

Field Size: 1

Variable Name: [EXERANY2]

Question: C04.01 During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?

1 = Yes
2 = No - *Go to Section 04.08 (Exercise (Physical Activity)) STRENGTH*
7 = Don't know/Not sure - *Go to Section 04.08 (Exercise (Physical Activity)) STRENGTH*
9 = Refused - *Go to Section 04.08 (Exercise (Physical Activity)) STRENGTH*

Skip Question 04.02, if Section 04.01, EXERANY2, is coded 2, 7, 9, or Missing;

Field Size: 2

Variable Name: [EXRACT12]

Question: C04.02 What type of physical activity or exercise did you spend the most time doing during the past month?

1 = Walking
2 = Running or jogging
3 = Gardening or yard work
4 = Bicycling or bicycling machine exercise
5 = Aerobics video or class
6 = Calisthenics
7 = Elliptical/EFX machine exercise
8 = Household activities
9 = Weight lifting
10 = Yoga, Pilates, or Tai Chi
11 = Other
77 = Don't know/Not Sure - *Go to Section 04.08 (Exercise (Physical Activity)) STRENGTH*
99 = Refused - *Go to Section 04.08 (Exercise (Physical Activity)) STRENGTH*

Skip Question 04.03, if Section 04.01, EXERANY2, is coded 2, 7, 9, or Missing; or Section 04.02, EXRACT12 is coded 77, 99

Field Size: 3

Variable Name: [EXEROFT1]

Question: C04.03 How many times per week or per month did you take part in this activity during the past month?

101-199 = Times per week
201-299 = Times per month
777 = Don't know/Not sure
999 = Refused

Field Size: 3

Variable Name: [EXERHMM1]

Question: C04.04 And when you took part in this activity, for how many minutes or hours did you usually keep at it?

1-759 = Hours and Minutes
800-959 = Hours and Minutes
777 = Don't know/Not sure
999 = Refused

Field Size: 2

Variable Name: [EXRACT22]

Question: C04.05 What other type of physical activity gave you the next most exercise during the past month?

1 = Walking
2 = Running or jogging
3 = Gardening or yard work
4 = Bicycling or bicycling machine exercise
5 = Aerobics video or class
6 = Calisthenics
7 = Elliptical/EFX machine exercise
8 = Household activities
9 = Weight lifting
10 = Yoga, Pilates, or Tai Chi
11 = Other
77 = Don't know/Not Sure - *Go to Section 04.08 (Exercise (Physical Activity)) STRENGTH*
88 = No other activity - *Go to Section 04.08 (Exercise (Physical Activity)) STRENGTH*
99 = Refused - *Go to Section 04.08 (Exercise (Physical Activity)) STRENGTH*

Field Size: 3

Variable Name: [EXEROFT2]

Question: C04.06 How many times per week or per month did you take part in this activity during the past month?

101-199 = Times per week
201-299 = Times per month
777 = Don't know/Not sure
999 = Refused

Skip Question 04.07, if Section 04.01, EXERANY2, is coded 2, 7, 9, or Missing; or Section 04.02, EXRACT12 is coded 77, 99 or Section 04.05, EXRACT22 is coded 77, 88, 99

Field Size: 3

Variable Name: [EXERHMM2]

Question: C04.07 And when you took part in this activity, for how many minutes or hours did you usually keep at it?

1-759 = Hours and Minutes
800-959 = Hours and Minutes
777 = Don't know/Not sure
999 = Refused

Field Size: 2

Variable Name: [STRENGTH]

Question: C04.08 During the past month, how many times per week or per month did you do physical activities or exercises to STRENGTHEN your muscles?

Do NOT count aerobic activities like walking, running, or bicycling. Count activities using your own body weight like yoga, sit-ups or push-ups and those using weight machines, free weights, or elastic bands.

101-199 = Times per week
201-299 = Times per month
888 = Never
777 = Don't know / Not sure
999 = Refused

Section 5: Hypertension Awareness

Field Size: 1

Variable Name: [BPHIGH6]

Question: C05.01 Have you ever been told by a doctor, nurse or other health professional that you have high blood pressure?

Note: If "Yes" and respondent is female, ask "Was this only when you were pregnant?".

1 = Yes
2 = Yes, but female told only during pregnancy - *Go to Section 06.01 (Cholesterol Awareness) CHOLCHK3*
3 = No - *Go to Section 06.01 (Cholesterol Awareness) CHOLCHK3*
4 = Told borderline high or pre-hypertensive or elevated blood pressure - *Go to Section 06.01 (Cholesterol Awareness) CHOLCHK3*
7 = Don't know/Not sure - *Go to Section 06.01 (Cholesterol Awareness) CHOLCHK3*
9 = Refused - *Go to Section 06.01 (Cholesterol Awareness) CHOLCHK3*

Field Size: 1

Variable Name: [BPMEDS1]

Question: C05.02 Are you currently taking prescription medicine for your high blood pressure?

1 = Yes
2 = No
7 = Don't know/Not Sure
9 = Refused

Section 6: Cholesterol Awareness

Field Size: 1

Variable Name: [CHOLCHK3]

Question: C06.01 About how long has it been since you last had your cholesterol checked?
Cholesterol is a fatty substance found in the blood.

1 = Never – *Go to Section 07.01 (Chronic Health Conditions) CVDINFR4*
2 = Within the past year (anytime less than one year ago)
3 = Within the past 2 years (1 year but less than 2 years ago)
4 = Within the past 3 years (2 years but less than 3 years ago)
5 = Within the past 4 years (3 years but less than 4 years ago)
6 = Within the past 5 years (4 years but less than 5 years ago)
8 = 5 or more years ago
7 = Don't know/Not Sure – *Go to Section 07.01 (Chronic Health Conditions) CVDINFR4*
9 = Refused – *Go to Section 07.01 (Chronic Health Conditions) CVDINFR4*

Field Size: 1

Variable Name: [TOLDHI3]

Question: C06.02 Have you ever been told by a doctor, nurse or other health professional that your cholesterol is high?

1 = Yes
2 = No
7 = Don't know/Not Sure
9 = Refused

Field Size: 1

Variable Name: [CHOLMED3]

Question: C06.03 Are you currently taking medicine prescribed by your doctor or other health professional for your cholesterol?

1 = Yes
2 = No
7 = Don't know/Not Sure
9 = Refused

Section 7: Chronic Health Conditions

Has a doctor, nurse, or other health professional ever told you that you had any of the following? For each, tell me "Yes", "No", or you're "Not sure":

Field Size: 1

Variable Name: [CVDINFR4]

Question: C07.01 (Ever told) you had a heart attack, also called a myocardial infarction?

1 = Yes
2 = No
7 = Don't know/Not sure
9 = Refused

Field Size: 1

Variable Name: [CVDCRHD4]

Question: C07.02 (Ever told) you had angina or coronary heart disease?

1 = Yes
2 = No
7 = Don't know/Not sure
9 = Refused

Field Size: 1

Variable Name: [CVDSTRK3]

Question: C07.03 (Ever told) you had a stroke?

1 = Yes
2 = No
7 = Don't know/Not sure
9 = Refused

Field Size: 1

Variable Name: [ASTHMA3]

Question: C07.04 (Ever told) you had asthma?

1 = Yes
2 = No - *Go to Section 07.06 (Chronic Health Conditions) CHCSCNCR1*
7 = Don't know/Not sure - *Go to Section 07.06 (Chronic Health Conditions) CHCSCNCR1*
9 = Refused - *Go to Section 07.06 (Chronic Health Conditions) CHCSCNCR1*

Skip Question 07.05, if Section 07.04, ASTHMA3 is coded 2, 7, 9, or Missing

Field Size: 1

Variable Name: [ASTHNOW]

Question: C07.05 Do you still have asthma?

1 = Yes
2 = No
7 = Don't know/Not sure
9 = Refused

Field Size: 1

Variable Name: [CHCSCNC1]

Question: C07.06 (Ever told) you had skin cancer that is not melanoma?

1 = Yes
2 = No
7 = Don't know/Not sure
9 = Refused

Field Size: 1

Variable Name: [CHCOCNC1]

Question: C07.07 (Ever told) you had melanoma or any other types of cancer?

1 = Yes
2 = No
7 = Don't know/Not sure
9 = Refused

Field Size: 1

Variable Name: [CHCCOPD3]

Question: C07.08 (Ever told) you had C.O.P.D. (chronic obstructive pulmonary disease), emphysema or chronic bronchitis?

1 = Yes
2 = No
7 = Don't know/Not sure
9 = Refused

Field Size: 1

Variable Name: [ADDEPEV3]

Question: C07.09 (Ever told) you had a depressive disorder (including depression, major depression, dysthymia, or minor depression)?

1 = Yes
2 = No
7 = Don't know/Not sure
9 = Refused

Field Size: 1

Variable Name: [CHCKDNY2]

Question: C07.10 Not including kidney stones, bladder infection or incontinence, were you ever told you had kidney disease?

1 = Yes
2 = No
7 = Don't know/Not sure
9 = Refused

Field Size: 1

Variable Name: [HAVARTH4]

Question: C07.11 (Ever told) you had some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia?

Note: Arthritis diagnoses include: rheumatism, polymyalgia rheumatica; osteoarthritis (not osteoporosis); tendonitis, bursitis, bunion, tennis elbow; carpal tunnel syndrome, tarsal tunnel syndrome; joint infection, etc.

 1 = Yes
2 = No
7 = Don't know/Not sure
9 = Refused

Field Size: 1

Variable Name: [DIABETE4]

Question: C07.12 (Ever told) you had diabetes?

NOTE: If "Yes" and respondent is female, ask "Was this only when you were pregnant?". If Respondent says pre-diabetes or borderline diabetes, use response code 4.

1 = Yes
2 = Yes, but female told only during pregnancy - *Go to Section 08.01 (Demographics) AGE*
3 = No - *Go to Section 08.01 (Demographics) AGE*
4 = No, pre-diabetes or borderline diabetes - *Go to Section 08.01 (Demographics) AGE*

7 = Don't know/Not sure – *Go to Section 08.01 (Demographics) AGE*
9 = Refused – *Go to Section 08.01 (Demographics) AGE*

Skip Question 07.13, if Section 07.12, DIABETE4, is coded 2, 3, 4, 7, 9, or Missing

Field Size: 2

Variable Name: [DIABAGE4]

Question: C07.13 How old were you when you were told you had diabetes?

1-97 = Age in years [97 = 97 and older]
98 = Don't know/Not sure
99 = Refused

Section 8: Demographics

Field Size: 2

Variable Name: [AGE]

Question: C08.01 What is your age?

_ _ = Code age in years [97 = 97 and older]

07 = Don't know / Not sure

09 = Refused

Field Size: 1

Variable Name: [HISPANC3]

Question: C08.02 Are you Hispanic, Latino/a, or Spanish origin?

NOTE: One or more categories may be selected.

1 = Mexican, Mexican American, Chicano/a
2 = Puerto Rican
3 = Cuban
4 = Another Hispanic, Latino/a, or Spanish origin
5 = No
7 = Don't know/Not sure
9 = Refused

Field Size: 2

Variable Name: [MRACE1]

Question: C08.03 Which one or more of the following would you say is your race?

10 = White
20 = Black or African American
30 = American Indian or Alaska Native
40 = Asian
41 = Asian Indian

42 = Chinese
43 = Filipino
44 = Japanese
45 = Korean
46 = Vietnamese
47 = Other Asian
50 = Pacific Islander
51 = Native Hawaiian
52 = Guamanian or Chamorro
53 = Samoan
54 = Other Pacific Islander
60 = Other
1020-6054535251 = Multiple responses
88 = No additional choices
77 = Don't know/Not Sure
99 = Refused

Field Size: 1

Variable Name: [MARITAL]

Question: C08.04 Are you……

1 = Married
2 = Divorced
3 = Widowed
4 = Separated
5 = Never married
6 = A member of an unmarried couple
9 = Refused

Field Size: 1

Variable Name: [EDUCA]

Question: C08.05 What is the highest grade or year of school you completed?

1 = Never attended school or only kindergarten
2 = Grades 1 through 8 (Elementary)
3 = Grades 9 through 11 (Some high school)
4 = Grade 12 or GED (High school graduate)
5 = College 1 year to 3 years (Some college or technical school)
6 = College 4 years or more (College graduate)
9 = Refused

Field Size: 1

Variable Name: [RENTHOM1]

Question: C08.06 Do you own or rent your home?

1 = Own
2 = Rent
3 = Other arrangement

7 = Don't know/Not sure
9 = Refused

Field Size: 3

Variable Name: [~~CTYCODE2~~]

Question: C08.07 In what county do you currently live?

Not asked of Alaska residents: Alaska obtained approval in previous survey years to remove this question. Alaska does not have traditional counties, so this question would not make sense to survey respondents.

_ _ = ANSI county code (formerly FIPS code)
778-887 = ANSI county code (formerly FIPS code)
888 = County from another state (cell phone data only)
777 = Don't know/Not sure
999 = Refused

Field Size: 5

Variable Name: [ZIPCODE1]

Question: C08.08 What is the ZIP Code where you currently live?

1001-77776 = Zipcode
77778-99950 = Zipcode
77777 = Don't know/Not Sure
99999 = Refused

Skip Question 08.09, if QSTVER >= 20

Field Size: 1

Variable Name: [NUMHHOL4]

Question: C08.09 Not including cell phones or numbers used for computers, fax machines or security systems, do you have more than one landline telephone number in your household?

1 = Yes
2 = No - *Go to Section 08.11 (Demographics) CPDEMO1C*
7 = Don't know / Not sure - *Go to Section 08.11 (Demographics) CPDEMO1C*
9 = Refused - *Go to Section 08.11 (Demographics) CPDEMO1C*

Skip Question 08.10, if Section 08.09, NUMHHOL4, is coded 2, 7, 9, or Missing; or QSTVER >= 20

Field Size: 1

Variable Name: [NUMPHON4]

Question: C08.10 How many of these landline telephone numbers are residential numbers?

1-5 = Residential telephone number(s)
6 = Residential telephone numbers [6 = 6 or more]
8 = None
7 = Don't know/Not sure

9 = Refused

Field Size: 1

Variable Name: [CPDEMO1C]

Question: C08.11 How many cell phones do you have for personal use?

INTERVIEWER NOTE: Read if necessary. Include cell phones used for both business and personal use.

1-5 = Enter number (1-5)
6 = Six or more
8 = None
7 = Don't know/Not sure
9 = Refused

Field Size: 1

Variable Name: [VETERAN3]

Question: C08.12 Have you ever served on active duty in the United States Armed Forces, either in the regular military or in a National Guard or military reserve unit?

1 = Yes
2 = No
7 = Don't know/Not sure
9 = Refused

Field Size: 1

Variable Name: [EMPLOY1]

Question: C08.13 Are you currently...?

1 = Employed for wages
2 = Self-employed
3 = Out of work for 1 year or more
4 = Out of work for less than 1 year
5 = A homemaker
6 = A student
7 = Retired
8 = Unable to work
9 = Refused

Field Size: 2

Variable Name: [CHILDREN]

Question: C08.14 How many children less than 18 years of age live in your household?

1-87 = Number of children
88 = None

99 = Refused

Field Size: 2

Variable Name: [INCOME3]

Question: C08.15 Is your annual household income from all sources:
NOTE: If respondent refuses at any income level, code "Refused."

Expanded income options were added for the Alaska BRFSS with CDC approval (see Alaska State Added Questions section).
01 = Less than $10,000?
02 = Less than $15,000? ($10,000 to less than $15,000)
03 = Less than $20,000? ($15,000 to less than $20,000)
04 = Less than $25,000
05 = Less than $35,000 If ($25,000 to less than $35,000)
06 = Less than $50,000 If ($35,000 to less than $50,000)
07 = Less than $75,000? ($50,000 to less than $75,000)
08 = Less than $100,000? ($75,000 to less than $100,000)
09 = Less than $150,000? ($100,000 to less than $150,000)?
10 = Less than $200,000? ($150,000 to less than $200,000)
11 = $200,000 or more
77 = Don't know / Not sure
99 = Refused

Skip Question 08.16, if respondent sex, SEXVAR, is coded 1; or Module 25.01, BIRTHSEX, is coded 1; or AGE is greater than 49

Field Size: 1

Variable Name: [PREGNANT]

Question: C08.16 To your knowledge, are you now pregnant?

1 = Yes
2 = No
7 = Don't know/Not sure
9 = Refused

Field Size: 4

Variable Name: [WEIGHT2]

Question: C08.17 About how much do you weigh without shoes?
NOTE: If respondent answers in metrics, put a 9 in the first column.

50-999 = Weight (pounds)
9000-9998 = Weight (kilograms)
7777 = Don't know/Not sure
9999 = Refused

Field Size: 4

Variable Name: [HEIGHT3]

Question: C08.18 About how tall are you without shoes?

Round fractions down.
Note: If respondent answers in metrics, put a 9 in the first column.

_ _ / _ _ = Height (ft / inches/meters/centimeters)
7777 = Don't know / Not sure
9999 = Refused

Section 9: Disability

Field Size: 1

Variable Name: [DEAF]

Question: C09.01 Some people who are deaf or have serious difficulty hearing use assistive devices to communicate by phone. Are you deaf or do you have serious difficulty hearing?

1 = Yes
2 = No
7 = Don't know/Not sure
9 = Refused

Field Size: 1

Variable Name: [BLIND]

Question: C09.02 Are you blind or do you have serious difficulty seeing, even when wearing glasses?

1 = Yes
2 = No
7 = Don't know/Not sure
9 = Refused

Field Size: 1

Variable Name: [DECIDE]

Question: C09.03 Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions?

1 = Yes
2 = No
7 = Don't know/Not sure
9 = Refused

Field Size: 1

Variable Name: [DIFFWALK]

Question: C09.04 Do you have serious difficulty walking or climbing stairs?

1 = Yes
2 = No
7 = Don't know/Not sure
9 = Refused

Field Size: 1

Variable Name: [DIFFDRES]

Question: C09.05 Do you have difficulty dressing or bathing?

1 = Yes
2 = No
7 = Don't know/Not sure
9 = Refused

Field Size: 1

Variable Name: [DIFFALON]

Question: C09.06 Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping?

1 = Yes
2 = No
7 = Don't know/Not sure
9 = Refused

Section 10: Falls

Skip Question 10.01, if Section 08.01, AGE, coded 18-44

Field Size: 2

Variable Name: [FALL12MN]

Question: C10.01 In the past 12 months, how many times have you fallen?

1-76 = Number of times [76=76 or more]
88 = None - *Go to Section 11.01 (Tobacco Use) SMOKE100*
77 = Don't know/Not Sure - *Go to Section 11.01 (Tobacco Use) SMOKE100*
99 = Refused - *Go to Section 11.01 (Tobacco Use) SMOKE100*

Skip Question 10.02, if Section 10.01, FALL12MN, is coded 77, 88, 99, or Missing;

Field Size: 2

Variable Name: [FALLINJ5]

Question: C10.02 How many of these falls caused an injury that limited your regular activities for at least a day or caused you to go to see a doctor?

1-76 = Number of falls [76=76 or more]
88 = None
77 = Don't know/Not Sure
99 = Refused

Section 11: Tobacco Use

Field Size: 1

Variable Name: [SMOKE100]

Question: C11.01 Have you smoked at least 100 cigarettes in your entire life?

1 = Yes
2 = No - *Go to Section 12.03 (Tobacco Use) USENOW3*
7 = Don't know/Not Sure - *Go to Section 12.03 (Tobacco Use) USENOW3*
9 = Refused - *Go to Section 12.03 (Tobacco Use) USENOW3*

Skip Question 11.02, if Section 11.01, SMOKE100, is coded 2, 7, 9, or Missing

Field Size: 1

Variable Name: [SMOKDAY2]

Question: C11.02 Do you now smoke cigarettes every day, some days, or not at all?

1 = Every day
2 = Some days
3 = Not at all
7 = Don't know / Not sure
9 = Refused

Field Size: 1

Variable Name: [USENOW3]

Question: C11.03 Do you currently use chewing tobacco, snuff, or snus or iq'mik every day, some days, or not at all?
Note: Snus (Swedish for snuff) is a moist smokeless tobacco, usually sold in small pouches that are placed under the lip against the gum. Iq'mik (also known as blackbull) is a form of smokeless tobacco that is chewed. It is made by mixing fire-cured tobacco leaves and "punk ash," which is the ash generated by burning a fungus that grows on birch trees.

1 = Every day
2 = Some days
3 = Not at all
7 = Don't know / Not sure
9 = Refused

Field Size: 1

Variable Name: [ECIGNOW2]

Question: C11.04 Would you say you have never used e-cigarettes or other electronic vaping products in your entire life or now use them every day, use them some days, or used them in the past but do not currently use them at all?

1 = Never used e-cigarettes in your entire life
2 = Use them every day
3 = Use them some days
4 = Not at all (right now)
7 = Don't know / Not sure
9 = Refused

Section 12: Alcohol Consumption

The next questions concern alcohol consumption. One drink of alcohol is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or a drink with one shot of liquor.

Field Size: 3

Variable Name: [ALCDAY4]

Question: C12.01 During the past 30 days, how many days per week or per month did you have at least one drink of any alcoholic beverage?

1 _ _ = Days per week
2 _ _ = Days in past 30 days
888 = No drinks in past 30 days - *Go to Section 13.01 (Immunization) FLUSHOT7*
777 = Don't know/Not sure - *Go to Section 13.01 (Immunization) FLUSHOT7*
999 = Refused - *Go to Section 13.01 (Immunization) FLUSHOT7*

Skip Question 12.02, if Section 12.01, ALCDAY4, is coded 888, 777, or 999;

Field Size: 2

Variable Name: [AVEDRNK3]

Question: C12.02 During the past 30 days, on the days when you drank, about how many drinks did you drink on the average?

Note: A 40-ounce beer would count as 3 drinks, or a cocktail drink with 2 shots would count as 2 drinks.

 _ _ = Number of drinks
88 = None
77 = Don't know / Not sure
99 = Refused

Skip Question 12.03, if Section 12.01, ALCDAY4, is coded 888, 777, or 999;

Field Size: 2
Variable Name: [DRNK3GE5]

Question: C12.03 Considering all types of alcoholic beverages, how many times during the past 30 days did you have 5 or more drinks for men or 4 or more drinks for women on an occasion?

_ _ = Number of times
77 = Don't know / Not sure
88 = no days
99 = Refused

Skip Question 12.04, if Section 12.01, ALCDAY4, is coded 888, 777, or 999;

Field Size: 2

Variable Name: [MAXDRNKS]

Question: C12.04 During the past 30 days, what is the largest number of drinks you had on any occasion?

_ _ = Number of drinks
77 = Don't know / Not sure
99 = Refused

Section 13: Immunization

Field Size: 1

Variable Name: [FLUSHOT7]

Question: C13.01 During the past 12 months, have you had either flu vaccine that was sprayed in your nose or flu shot injected into your arm?

1 = Yes
2 = No - *Go to Section 13.03 (Immunization) PNEUVAC4*
7 = Don't know/Not sure - *Go to Section 13.03 (Immunization) PNEUVAC4*
9 = Refused - *Go to Section 13.03 (Immunization) PNEUVAC4*

Skip Question 13.02, if Section 13.01, FLUSHOT7, is coded 2, 7, or 9

Field Size: 6

Variable Name: [FLSHTMY3]

Question: C13.02 During what month and year did you receive your most recent flu vaccine that was sprayed in your nose or flu shot injected into your arm?

_ _ / _ _ _ _ = Month / Year
777777 = Don't know / Not sure
099999 = Refused

Field Size: 1

Variable Name: [PNEUVAC4]

Question: C13.03 Have you ever had a pneumonia shot also known as a pneumococcal vaccine?

1 = Yes
2 = No
7 = Don't know/Not sure
9 = Refused

Skip Question 13.04, if Section 08.01, AGE, is less than 50;

Field Size: 1

Variable Name: [SHINGLE2]

Question: C13.04 Have you ever had the shingles or zoster vaccine?

1 = Yes
2 = No
7 = Don't know/Not Sure
9 = Refused

Section 14: HIV/AIDS

Field Size: 1

Variable Name: [HIVTST7]

Question: C14.01 Including fluid testing from your mouth, but not including tests you may have had for blood donation, have you ever been tested for H.I.V?

1 = Yes
2 = No - *Go to Section 15.01 (Seatbelt Use and Drinking and Driving) SEATBELT*
7 = Don't know/Not sure - *Go to Section 15.01 (Seatbelt Use and Drinking and Driving) SEATBELT*
9 = Refused - *Go to Section 15.01 (Seatbelt Use and Drinking and Driving) SEATBELT*

Skip Question 14.02, if Section 14.01, HIVTST7, is coded 2, 7, 9, or Missing

Field Size: 6

Variable Name: [HIVTSTD3]

Question: C14.02 Not including blood donations, in what month and year was your last H.I.V. test?
Note: If response is before January 1985, code "777777".

INTERVIEWER NOTE: If the respondent remembers the year but cannot remember the month, code the first two digits 77 and the last four digits for the year.

11985-122022 = Code month and year
771985-772022 = Unknown month and known year
777777 = Don't know/Not sure
999999 = Refused

Section 15: Seatbelt Use and Drinking and Driving

Field Size: 1

Variable Name: [SEATBELT]

Question: C15.01 How often do you use seat belts when you drive or ride in a car? Would you say—

1 = Always
2 = Nearly always
3 = Sometimes
4 = Seldom
5 = Never
7 = Don't know/Not sure
8 = Never drive or ride in a car - *Go to Section 16.1 (Long-Term COVID Effects) COVIDPO1*
9 = Refused

Skip Question 15.02, if Section 12.01, ALCDAY4, is coded 888 or: Section 15.01, SEATBELT, is coded 8

Field Size: 2

Variable Name: [DRNKDRI2]

Question: C15.02 During the past 30 days, how many times have you driven when you've had perhaps too much to drink?

1-76 = Number of times
88 = None
77 = Don't know/Not sure
99 = Refused

Section 16: Long-term COVID Effects

Field Size: 1

Variable Name: [COVIDPO1]

Question: C16.01 Have you ever tested positive for COVID-19 (using a rapid point-of-care test, self-test, or laboratory test) or been told by a doctor or other health care provider that you have or had COVID-19?

1 = Yes
2 = No - *Go to Modules or Closing Statement*
7 = Don't know/Not Sure - *Go to Modules or Closing Statement*
9 = Refused - *Go to Modules or Closing Statement*

Skip Question 16.02, if Section 16.01, COVIDPO1, is coded 2, 7, 9, or Missing

Field Size: 1

Variable Name: [COVIDSM1]

Question: C16.02 Do you currently have symptoms lasting 3 months or longer that you did not have prior to having coronavirus or COVID-19?

1 = Yes
2 = No - *Go to Modules or Closing Statement*
7 = Don't know/Not Sure - *Go to Modules or Closing Statement*
9 = Refused - *Go to Modules or Closing Statement*

Skip Question 16.03, if Section 16.01, COVIDPO1, is coded 2, 7, 9, or Missing; or Section 16.02, COVIDSM1, is coded 2, 7, 9, or Missing

Field Size: 2

Variable Name: [COVIDACT]

Question: C16.03 Do these long-term symptoms reduce your ability to carry out day-to-day activities compared with the time before you COVID-19?

1 = Yes, a lot
2 = Yes, a little
3 = Not at all
7 = Don't know/Not Sure
9 = Refused

Alaska Selected CDC Modules

Module 2: Diabetes

Skip Question M02.01, if Section 07.12, DIABETE4, is coded 2, 3, 4, 7, 9, or Missing

Field Size: 1

Variable Name: [DIABTYPE]

Question: M02.01 According to your doctor or other health professional, what type of diabetes do you have?

1 = Type 1
2 = Type 2
7 = Don't know/Not Sure
9 = Refused

Skip Question M02.02, if Section 07.12, DIABETE4, is coded 2, 3, 4, 7, 9, or Missing

Field Size: 1

Variable Name: [INSULIN1]

Question: M02.02 Are you now taking insulin?
Insulin can be taken by shot or pump.

1 = Yes
2 = No
7 = Don't know/Not Sure
9 = Refused

Skip Question M02.03, if Section 07.12, DIABETE4, is coded 2, 3, 4, 7, 9, or Missing

Field Size: 2

Variable Name: [CHKHEMO3]

Question: M02.03 About how many times in the past 12 months has a doctor, nurse, or other health professional checked you for A-one-C?

1-76 = Number of times [76=76 or more]
88 = None
98 = Never heard of "A one C" test
77 = Don't know/Not sure
99 = Refused

Skip Question M02.04, if Section 07.12, DIABETE4, is coded 2, 3, 4, 7, 9, or Missing

Field Size: 1

Variable Name: [EYEEXAM1]

Question: M02.04 When was the last time you had an eye exam in which the pupils were dilated, making you temporarily sensitive to bright light?

1 = Within the past month (anytime less than 1 month ago)
2 = Within the past year (1 month but less than 12 months ago)
3 = Within the past 2 years (1 year but less than 2 years ago)
4 = 2 or more years ago
7 = Don't know/Not sure
8 = Never
9 = Refused

Skip Question M02.05, if Section 07.12, DIABETE4, is coded 2, 3, 4, 7, 9, or Missing

Field Size: 1

Variable Name: [DIABEYE1]

Question: M02.05 When was the last time a doctor, nurse or other health professional took a photo of the back of your eye with a specialized camera?

1 = Within the past month (anytime less than 1 month ago)
2 = Within the past year (1 month but less than 12 months ago)
3 = Within the past 2 years (1 year but less than 2 years ago)
4 = 2 or more years ago
7 = Don't know/Not sure
8 = Never
9 = Refused

Skip Question M02.06, if Section 07.12, DIABETE4, is coded 2, 3, 4, 7, 9, or Missing

Field Size: 1

Variable Name: [DIABEDU1]

Question: M02.06 When was the last time you took a course or class in how to manage your diabetes yourself?

1 = Within the past year (anytime less than 12 months ago)
2 = Within the last 2 years (1 year but less than 2 years ago)
3 = Within the last 3 years (2 years but less than 3 years ago)

4 = Within the last 5 years (3 to 4 years but less than 5 years ago)
5 = Within the last 10 years (5 to 9 years but less than 10 years ago)
6 = 10 years ago or more
8 = Never
7 = Don't know/Not sure
9 = Refused

Skip Question M02.07, if Section 07.12, DIABETE4, is coded 2, 3, 4, 7, 9, or Missing

Field Size: 1

Variable Name: [FEETSORE]

Question: M02.07 Have you ever had any sores or irritations on your feet that took more than four weeks to heal?

1 = Yes
2 = No
7 = Don't know/Not sure
9 = Refused

Module 22: Sexual Orientation and Gender Identity (SOGI)

Skip Question M22.01, if respondent sex, SEXVAR, is coded 2; or Module 21.01, BIRTHSEX, is coded 2;

The next two questions are about sexual orientation and gender identity.

Field Size: 1

Variable Name: [SOMALE]

Question: M22.01 Which of the following best represents how you think of yourself?

1 = Gay
2 = Straight, that is, not gay
3 = Bisexual
4 = Something else
7 = I don't know the answer
9 = Refused

Skip Question M22.01, if respondent sex, SEXVAR, is coded 1; or Module 21.01, BIRTHSEX, is coded 1;

Field Size: 1

Variable Name: [SOFEMALE]

Question: M22.02 Which of the following best represents how you think of yourself?

1 = Lesbian or Gay
2 = Straight, that is, not gay
3 = Bisexual
4 = Something else
7 = I don't know the answer
9 = Refused

Field Size: 1

Variable Name: [TRNSGNDR]

Question: M22.03 Do you consider yourself to be transgender?
Note: If yes, ask "Do you consider yourself to be male-to-female, female-to-male, or gender non-conforming?"

1 = Yes, Transgender, male-to-female
2 = Yes, Transgender, female to male
3 = Yes, Transgender, gender nonconforming
4 = No
7 = Don't know/not sure
9 = Refused

Module 29: Social Determinants and Health Equity

Field Size: 1

Variable Name: [LSATISFY]

Question: M29.01 In general, how satisfied are you with your life?

1 = Very satisfied
2 = Satisfied
3 = Dissatisfied
4 = Very dissatisfied
7 = Don't know/Not sure
9 = Refused

Field Size: 1

Variable Name: [EMTSUPRT]

Question: M29.02 How often do you get the social and emotional support you need?
INTERVIEWER NOTE: If asked, say "please include support from any source."

1 = Always
2 = Usually
3 = Sometimes
4 = Rarely
5 = Never
7 = Don't know/Not sure
9 = Refused

Field Size: 1

Variable Name: [SDLONELY]

Question: M29.03 How often do you feel lonely? Is it...
INTERVIEWER NOTE: If asked, say "please include support from any source."

1 = Always
2 = Usually
3 = Sometimes
4 = Rarely
5 = Never

7 = Don't know/Not sure
9 = Refused

Field Size: 1

Variable Name: [SDHEMPLY]

Question: M29.04 In the past 12 months have you lost employment or had hours reduced?

1 = Yes
2 = No
7 = Don't know/Not Sure
9 = Refused

Field Size: 1

Variable Name: [FOODSTMP]

Question: M29.05 During the past 12 months, have you received food stamps, also called SNAP, the Supplemental Nutrition Assistance Program on an EBT card?

1 = Yes
2 = No
7 = Don't Know/ Not sure
9 = Refused

Field Size: 1

Variable Name: [SDHFOOD1]

Question: M29.06 During the past 12 months how often did the food that you bought not last, and you didn't have money to get more? Was that...

1 = Always
2 = Usually
3 = Sometimes
4 = Rarely
5 = Never
7 = Don't know/not sure
9 = Refused

Field Size: 1

Variable Name: [SDHBILLS]

Question: M29.07 During the last 12 months, was there a time when you were not able to pay your mortgage, rent or utility bills?

1 = Yes
2 = No
7 = Don't Know/ Not sure
9 = Refused

Field Size: 1

Variable Name: [SDHUTILS]

Question: M29.08 During the last 12 months was there a time when an electric, gas, oil, or water company threatened to shut off services?

1 = Yes
2 = No
7 = Don't Know/ Not sure
9 = Refused

Field Size: 1

Variable Name: [SDHTRNSP]

Question: M29.09 During the past 12 months has a lack of reliable transportation kept you from medical appointments, meetings, work, or from getting things needed for daily living?

1 = Yes
2 = No
7 = Don't Know/ Not sure
9 = Refused

Field Size: 1

Variable Name: [SDHSTRE1]

Question: M29.10 Within the last 30 days, how often have you felt this kind of stress?
Stress means a situation in which a person feels tense, restless, nervous, or anxious, or is unable to sleep at night because his/her mind is troubled all the time.

1 = Always
2 = Usually
3 = Sometimes
4 = Rarely
5 = Never
7 = Don't know/not sure
9 = Refused

Alaska State Added Sections

AK State Added Section 1: Health Care Access
Inserted into Core Section 3: Healthcare Access after 03.04

Skip Question AK01.01, if Section 03.04 is coded 1. If Section 03.04 is coded 1, autofill AK01.01 as 1.

Field Size: 1

Variable Name: [GETCARE]

Question: AK01.01. During the past 12 months, have you seen a doctor, nurse, or other health professional to get ANY kind of care for yourself?

1 = Yes
2 = No
7 = Don't know/ Not sure
9 = Refused

AK State Added Section 2: Borough
Inserted into Core Section 8: Demographics after 08.08

Skip question AK02.01 if 08.08 not in 77777, 99999, or Missing;

Field Size: 2, 35

Variable Name: [AKCENSUS] [AKCENTXT]

Question: AK02.01 In which borough, census area, or municipality do you currently live?
Note: Answer is coded into Alaska geographic regions (public health, behavioral health, and tribal health)

01 = Response_____ [TEXT BOX]
77 = Don't know/ Not sure
99 = Refused

AK State Added Section 3: Income
Inserted into Core Section 8: Demographics

Field Size: 2

Variable Name: [INCOME200]

Question: AK03.01 Is your annual household income from all sources:
NOTE: If respondent refuses at any income level, code "Refused."

[Alaska obtained approval to expand answer options for this core CDC question. The modification to this question's response set allows us to better estimate poverty levels for large households with higher incomes.]

1 = Less than $10,000
2 = Less than $15,000 ($10,000 to less than $15,000)
3 = Less than $20,000 ($15,000 to less than $20,000)
4 = Less than $25,000 ($20,000 to less than $25,000)
5 = Less than $35,000 ($25,000 to less than $35,000)
6 = Less than $50,000 ($35,000 to less than $50,000)
7 = Less than $75,000 ($50,000 to less than $75,000)
8 = Less than $85,000 ($75,000 to less than $85,000)
9 = Less than $100,000 ($85,000 to less than $100,000)
10 = Less than $150,000? ($100,000 to less than $150,000)?

11 = Less than $200,000? ($150,000 to less than $200,000)
12 = $200,000 or more
77 = Don't know/Not sure
99 = Refused

AK State Added Section 4: Tobacco
Inserted into Core Section 11: Tobacco Use

Skip Question AK04.01, if Section 12.02 is coded 1, 2, 7, 9, or Missing

Field Size: 1

Variable Name: [LASTSMK6]

Question: AK04.01. About how long has it been since you last smoked cigarettes regularly? Was that...

6 = 10 years or more
5 = At least 5 years but less than 10 years ago
4 = More than a year ago (but less than 5 years ago)
3 = About 1 year ago
2 = At least 3 months but less than 1 year ago
1 = Less than 3 months ago
7 = Don't know/ Not sure
9 = Refused

Skip Question AK04.02, if Section 12.02 is coded 3, 7, 9, or Missing

Field Size: 1

Variable Name: [STOPSMK2]

Question: AK04.02. During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?

1 = Yes
2 = No
7 = Don't know/ Not sure
9 = Refused

Skip Question AK04.03, if Section 12.02 is coded 3, 7, 9, or Missing, or if Question AK01.02 is coded 2, 7, 9 or Missing

Field Size: 1

Variable Name: [QUITSMOK]

Question: AK04.03 In the past 12 months, has a doctor, nurse, or other health professional advised you to quit smoking?

1 = Yes
2 = No
7 = Don't know/ Not sure
9 = Refused

Field Size: 1

Variable Name: [CHEWNOW]

Question: AK04.04a. These next questions are about specific types of smokeless tobacco products you currently use. Do you currently use chewing tobacco?

1 = Yes
2 = No
7 = Don't know/ Not sure
9 = Refused

Field Size: 1

Variable Name: [SNUFNOW]

Question: AK04.04b. (Do you currently use…) Snuff?

1 = Yes
2 = No
7 = Don't know/ Not sure
9 = Refused

Field Size: 1

Variable Name: [IQMKNOW]

Question: AK04.04c. (Do you currently use…) Iq'mik or blackbull?

1 = Yes
2 = No
7 = Don't know/ Not sure
9 = Refused

Field Size: 1

Variable Name: [SNUSNOW]

Question: AK04.04d. (Do you currently use…) Snus?

1 = Yes
2 = No
7 = Don't know/ Not sure
9 = Refused

AK State Added Section 5: Marijuana Use
Inserted after Module 12: Alcohol Consumption

Field Size: 2

Variable Name: [MARIJAN1]

The next question is about marijuana or cannabis. Do not include hemp-based or CBD-only products in your response.

Question: AK05.01. During the past 30 days, on how many days did you use marijuana or cannabis?
INTERVIEWER NOTE: Do not include hemp-based CBD-only products.

RANGE 1-30 [NUMBER OF DAYS]
88 = None
77 = Don't know/ Not sure
99 = Refused

AK State Added Section 6: CDVSA
Inserted at end of Questionnaire

The next questions are about different types of physical and/or sexual violence that can happen during a person's lifetime, including childhood. Answering these questions will help us better understand the problem of violence and may help others in the future. This is a sensitive topic and some people may feel uncomfortable with these questions. You can ask me to skip any question you do not want to answer or do not feel safe answering. At the end of this section, I can give you a phone number for an organization that can help with these issues.

Field Size: 1

Variable Name: [S_PRNHRT]

Question: AK06.01. As a child, did you ever see or hear one of your parents or guardians being hit, slapped, punched, shoved, kicked, choked, threatened, or otherwise physically hurt by their spouse or partner?

1 = Yes
2 = No
7 = Don't know/ Not sure
9 = Refused

Field Size: 1

Variable Name: [S_MDESEX]

Question: AK06.02. In your lifetime, has anyone ever made you take part in any sexual activity when you really did not want to, including touch that made you uncomfortable?

1 = Yes
2 = No
7 = Don't know/ Not sure
9 = Refused

Field Size: 1

Variable Name: [S_LFEHRT]

Question: AK06.03. In your lifetime, has an intimate partner ever hit, slapped, punched, shoved, kicked, choked, threatened, or otherwise physically hurt you?

1 = Yes
2 = No
7 = Don't know/ Not sure
9 = Refused

Field Size: 1

Variable Name: [S_PST1HT]

Question: AK06.04. In the past twelve months, have you ever feared for your safety or been hit, slapped, punched, shoved, kicked, choked, threatened, or otherwise physically hurt by a current or former intimate partner?

1 = Yes
2 = No
7 = Don't know/ Not sure
9 = Refused

Closing Statement

That was my last question. Everyone's answers will be combined to help us provide information about the health practices of people in this state. Thank you very much for your time and cooperation.