

Behavioral Risk Factor Surveillance System

2018 Alaska BRFSS Questionnaire (Alaska-specific content is in purple)



Form Approved OMB No. 0920-1061 Exp. Date 3/31/2018

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 Carol Pierannunzi at ivk7@cdc.gov.

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2018 Questionnaire

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Field Size Variable Name Question Response Options Interviewer's Script - Landline HELLO, I am calling for the <u>(health department)</u>. My name is _ (name) We are gathering information about the health of <u>(state)</u> 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. Is this (phone number) 1 [CTELENM1] 1 = Yes - Go to PVTRESD1 2 = No - Terminate Phone Call Variable only on the land line survey Skip Question if QSTVER >= 20 Is this a private residence? [PVTRESD1] 1 = Yes - Go to STATERE1 1 2 = No - Go to COLGHOUS READ ONLY IF NECESSARY: "By 3 = No, business phone only - Terminate Phone private residence, we mean Call someplace like a house or apartment." Variable only on the land line survey Skip Question if QSTVER >= 20; or PVTRESD1=1 Do you live in college housing? [COLGHOUS] 1 = Yes - Go to STATERE1 2 = No - Terminate Phone Call Variable only on the land line survey Skip Question if QSTVER >= 20 Do you currently live in [STATERE1] 1 = Yes - Go to CELLFON4 ____(state)____? 2 = No - Terminate Phone Call Variable only on the land line survey Skip Question if QSTVER >= 20 Is this a cell telephone? 1 [CELLFON4] 1 = Not a cell phone - Go to LADULT 2 = Yes - Terminate Phone Call Read only if necessary: "By cellular (or cell) telephone we mean a telephone that is mobile and usable outside of your neighborhood." Note: Telephone service over the internet counts as landline service (includes Vonage, Magic Jack and other home-based phone services). Variable only on the land line survey Skip Question if QSTVER >= 20; or COLGHOUS is missing;

Field Size	Variable Name	Question	Response Options
1	[LADULT]	Are you 18 years of age or older? Variable only on the land line survey	1 = Yes, Male Respondent - Go to Survey Introduction 2 = Yes, Female Respondent - Go to Survey Introduction 3 = No - Terminate Phone Call
		Skip Question if QSTVER >=	: 20
2	[NUMADULT]	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 2 = Number of adults in the household 3 = Number of adults in the household 4 = Number of adults in the household 5 = Number of adults in the household 6-99 = 6 or more
		Variable only on the land line survey	
		Skip Question if QSTVER >=	= 20
2	[NUMMEN]	How many of these adults are men? Variable only on the land line survey	O = Number of adult men in the household 1 = Number of adult men in the household 2 = Number of adult men in the household 3 = Number of adult men in the household 4 = Number of adult men in the household 5 = Number of adult men in the household 6-99 = 6 or more
		Skip Question if QSTVER >=	: 20
2	[NUMWOMEN]	So the number of women in the household is [X]. Is that correct? Variable only on the land line survey	0 = Number of adult women in the household 1 = Number of adult women in the household 2 = Number of adult women in the household 3 = Number of adult women in the household 4 = Number of adult women in the household 5 = Number of adult women in the household 6-99 = 6 or more

Interviewer's Script - Cell Phone

		Skip Question	if QSTVER < 2	20
gatherin departm	g information abou ent with assistance	from the Centers for Disea	reside: ase Control a	<u>(name)</u> . We are nts. This project is conducted by the health and Prevention. Your telephone number has ut health and health practices.
1	[SAFETIME]	Is this a safe time to talk with		1 = Yes - Go to CTELNUM1 2 = No - Terminate Phone Call
		Skip Question	-	20
1	[CTELNUMI]	Is this (phone number) Variable only on the cell pho	?	1 = Yes - Go to CELLFON4 2 = No - Terminate Phone Call
	•	Skip Question	if QSTVER < 2	20
1	[CELLFON5]	Is this a cell telephone? Variable only on the cell pho	one survey	1 = Yes - Go to CADULT 2 = No - Terminate Phone Call
	.	Skip Question	if QSTVER < 2	20
1	[CADULT]	Are you 18 years of age or o		1 = Yes, Male Respondent - Go to PVTRESD2 2 = Yes, Female Respondent - Go to PVTRESD2 3 = No - Terminate Phone Call
		Skip Question	if QSTVER < 2	20
1	[PVTRESD3]	Note: By private residence, v someplace like a house or a Variable only on the cell pho	we mean partment.	1 = Yes - Go to CSTATE1 2 = No - Go to CCLGHOUS
		Skip Question if QSTV	'ER < 20; or P\	/TRESD2=1
1	[CCLGHOUS]	Do you live in college housin		1 = Yes - Go to CSTATE 2 = No - Terminate Phone Call
		Skip Question	if QSTVER < 2	20
1	[CSTATE1]	Do you currently live in(state)?		1 = Yes - Go to LANDLINE 2 = No - Go to RSPSTATI
	<u> </u>	Variable only on the cell pho	one survey	20

			L I
2	[RSPSTAT1]	In what state do you currently live?	1 = Alabama
_	[]		2 = Alaska
			4 = Arizona
			5 = Arkansas
			6 = California
			8 = Colorado
			9 = Connecticut
			10 = Delaware
			11 = District of Columbia
			12 = Florida
			I I
			13 = Georgia
			15 = Hawaii
			16 = Idaho
			17 = Illinois
			18 = Indiana
			19 = Iowa
			20 = Kansas
			21 = Kentucky
			22 = Louisiana
			23 = Maine
			24 = Maryland
			25 = Massachusetts
			26 = Michigan
			27 = Minnesota
			28 = Mississippi
			29 = Missouri
			30 = Montana
			31 = Nebraska
			32 = Nevada
			33 = New Hampshire
			34 = New Jersey
			35 = New Mexico
			36 = New York
			37 = North Carolina
			38 = North Dakota
			39 = Ohio
			40 = Oklahoma
			41 = Oregon
			42 = Pennsylvania
			44 = Rhode Island
			45 = South Carolina
			46 = South Dakota
			47 = Tennessee
			48 = Texas
			49 = Utah
			50 = Vermont
			51 = Virginia
			53 = Washington
			54 = West Virginia
			55 = Wisconsin
			56 = Wyoming
			66 = Guam
			72 = Puerto Rico
		Variable only on the cell phone survey	78 = Virgin Islands
		Tanasic only on the cen phone solvey	99 = Refused

1	[LANDLINE]	Variable only on the cell phone survey 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
2	[HHADULT]	Variable only on the cell phone survey How many members of your household, including yourself, are 18 years of age or older? INTERVIEWER NOTE: IF	1-76 = Number of adults 77 = Don't know/Not sure 99 = Refused
		CCLGHOUS=1, set HHADULT=1	
		CDC Core Section	ons
Section	1: Health Status		
1	[GENHLTH]	01.01 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	s — Health Related Quality of Li	ife
2	[PHYSHLTH]	02.01 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?	1-30 = Number of days 88 = None 77 = Don't know/Not sure 99 = Refused
2	[MENTHLTH]	02.02 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?	1-30 = Number of days 88 = None 77 = Don't know/Not sure 99 = Refused
	Skip Question	02.03, if Section 02.01, PHYSHLTH, is 88 an	d Section 2.02, MENTHLTH, is 88
2	[POORHLTH]	02.03 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 selfcare, work, or recreation?	1-30 = Number of days 88 = None 77 = Don't know/Not sure 99 = Refused

Section	3: Health Care	Access	
1	[HLTHPLN1]	03.01 Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare, Native Health Service, or Indian Health Service?	1 = Yes 2 = No 7 = Don't know/Not Sure 9 = Refused
1	[PERSDOC2]	O3.02 Do you have one person you think of as your personal doctor or health care provider? Note: If "No" ask "Is there more than one or is there no person who you think of as your personal doctor or health care provider?".	1 = Yes, only one 2 = More than one 3 = No 7 = Don't know/Not Sure 9 = Refused
1	[MEDCOST]	03.03 Was there a time in the past 12 months when you needed to see a doctor but could not because of cost?	1 = Yes 2 = No 7 = Don't know/Not sure 9 = Refused
1	[CHECKUP1]	O3.04 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 7 = Don't know/Not sure 8 = Never 9 = Refused
Section	4: Exercise		
1	[EXERANY2]	04.01 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 7 = Don't know/Not Sure 9 = Refused
Section	5: Inadequate	Sleep	
2	[SLEPTIM1]	O5.01 On average, how many hours of sleep do you get in a 24-hour period? INTERVIEWER NOTE: Enter hours of sleep in whole numbers, rounding 30 minutes (1/2 hour) or more up to the next whole hour and dropping 29 or fewer minutes.	1-24 = Number of hours [1-24] 77 = Don't know/Not Sure 99 = Refused

1	[CVDINFR4]	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":	1 = Yes 2 = No 7 = Don't know/Not sure 9 = Refused
		06.01 (Ever told) you had a heart attack, also called a myocardial infarction?	
1	[CVDCRHD4]	06.02 (Ever told) you had angina or coronary heart disease?	1 = Yes 2 = No 7 = Don't know/Not sure 9 = Refused
1	[CVDSTRK3]	06.03 (Ever told) you had a stroke.	1 = Yes 2 = No 7 = Don't know/Not sure 9 = Refused
1	[ASTHMA3]	06.04 (Ever told) you had asthma?	1 = Yes 2 = No - Go to Section 06.06 (Chronic Health Conditions) CHCSCNCR 7 = Don't know/Not Sure - Go to Section 06.06 (Chronic Health Conditions) CHCSCNCR 9 = Refused - Go to Section 06.06 (Chronic Health Conditions) CHCSCNCR
	Skip (Question 06.05, if Section 06.04, ASTHMA3, i	is coded 2, 7, 9, or Missing
1	[ASTHNOW]	06.05 Do you still have asthma?	1 = Yes 2 = No 7 = Don't know/Not Sure 9 = Refused
1	[CHCSCNCR]	06.06 (Ever told) you had skin cancer?	1 = Yes 2 = No 7 = Don't know / Not sure 9 = Refused
1	[CHCOCNCR]	06.07 (Ever told) you had any other types of cancer?	1 = Yes 2 = No 7 = Don't know / Not sure 9 = Refused
			,
1	[CHCCOPDI]	06.08 (Ever told) you have chronic obstructive pulmonary disease, C.O.P.D., emphysema or chronic bronchitis?	1 = Yes 2 = No 7 = Don't know / Not sure 9 = Refused

1	[HAVARTH3]	O6.09 (Ever told) you have 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
1	[ADDEPEV2]	O6.10 (Ever told) you have a depressive disorder (including depression, major depression, dysthymia, or minor depression)?	1 = Yes 2 = No 7 = Don't know/Not sure 9 = Refused
1	[CHCKDNY1]	O6.11 (Ever told) you have kidney disease? Note: Do NOT include kidney stones, bladder infection or incontinence.	1 = Yes 2 = No 7 = Don't know / Not sure 9 = Refused
1	[DIABETE3]	O6.12 (Ever told) you have diabetes Note: If "Yes" and respondent is female, ask "Was this only when you were pregnant?". If Respondent says prediabetes or borderline diabetes, use response code 4.	1 = Yes 2 = Yes, but female told only during pregnancy - Go to Section 07.01 (Oral Health) LASTDEN4 3 = No - Go to Section 07.01 (Oral Health) LASTDEN4 4 = No, pre-diabetes or borderline diabetes - Go to Section 07.01 (Oral Health) LASTDEN4 7 = Don't know/Not Sure - Go to Section 07.01 (Oral Health) LASTDEN4 9 = Refused - Go to Section 07.01 (Oral Health) LASTDEN4
	Skip Q	uestion 06.13, if Section 06.12, DIABETE3, is co	oded 2, 3, 4, 7, 9, or Missing
2	[DIABAGE2]	06.13 How old were you when you were told you have diabetes?	1-97 = Age in years [97 = 97 and older] 98 = Don't know/Not sure 99 = Refused
Section	7: Oral Health		
1	[LASTDEN4]	07.01 Including all types of dentists, such as orthodontists, oral surgeons, and all other dental specialists, as well as dental hygienists, how long has it been since you last visited a dentist or a dental clinic for any reason?	1 = Within the past year (anytime less than 12 months ago) 2 = Within the past 2 years (1 year but less than 2 years ago) 3 = Within the past 5 years (2 years but less than 5 years ago) 4 = 5 or more years ago 7 = Don't know/Not sure 8 = Never 9 = Refused

1	[RMVTETH4]	07.02 Not including teeth lost for injury or orthodontics, how many of your permanent teeth have been removed because of tooth decay or gum disease?	1 = 1 to 5 2 = 6 or more, but not all 3 = All 8 = None 7 = Don't know/Not sure 9 = Refused
Section	8: Demographic	cs	
1	[SEX1]	08.01 What is your sex? Was it	1 = Male 2 = Female 7 = Don't know/Not Sure 9 = Refused
2	[AGE]	08.02 What is your age?	18-24 = Age 18 - 24 25-34 = Age 25 - 34 35-44 = Age 35 - 44 45-54 = Age 45 - 54 55-64 = Age 55 - 64 65-99 = Age 65 or older 7 = Don't know/Not sure 9 = Refused
4	[HISPANC3]	O8.03 Are you Hispanic, Latino/a, or Spanish origin? 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 12-4321 = Multiple responses 9 = Refused
28	[MRACEI]	08.04 Which one or more of the following would you say is your race? Select all that apply: Note: If 40 (Asian) or 50 (Pacific Islander) is selected read and code subcategories underneath major heading.	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

2	[ORACE3]	08.05 Which one of these groups would you say best represents your race? Note: If 40 (Asian) or 50 (Pacific Islander) is selected read and code subcategory underneath major heading.	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 77 = Don´t know/Not Sure 99 = Refused
1	[MARITAL]	08.06 Are you: (marital status)	1 = Married 2 = Divorced 3 = Widowed 4 = Separated 5 = Never married 6 = A member of an unmarried couple 9 = Refused
1	[EDUCA]	O8.07 What is the highest grade or year of school you completed? Expanded education options were added for the Alaska BRFSS with approval from the CDC (see Alaska-Added Questions section)	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
1	[RENTHOMI]	08.08 Do you own or rent your home?	1 = Own 2 = Rent 3 = Other arrangement 7 = Don't know/Not Sure 9 = Refused
3	[CTYCODE2]	O8.09 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. Instead, AK DHSS can geocode Alaska regions using zip codes.	ANSI County Code (former FIPS code) 777 = Don't know/ Not sure 888 = County from another state (cell phone data only) 999 = Refused

5	[ZIPCODE1]	08.10 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 08.11, if QSTVER	>= 20
1	[NUMHHOL3]	O8.11 Not including cell phones or numbers used for computers, fax machines or security systems, do you have more than one telephone number in your household?	1 = Yes 2 = No - Go to Section 08.13 (Demographics) CPDEMOIB 7 = Don't know/Not sure - Go to Section 08.13 (Demographics) CPDEMOIB 9 = Refused - Go to Section 08.13 (Demographics) CPDEMOIB
	Skip Question (08.12, if Section 08.11, NUMHHOL3, is coded 2	2, 7, 9, or Missing; or QSTVER >= 20
1	[NUMPHON3]	08.12 How many of these 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
		Skip Question 08.13, if QSTVER	> = 20
1	[CPDEMOIB]	08.13 How many cell phones do you have for personal use?	1-5 = Enter number (1-5) 6 = Six or more 8 = None 7 = Don't know/Not sure 9 = Refused
1	[VETERAN3]	08.14 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
1	[EMPLOY1]	08.15 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
2	[CHILDREN]	08.16 How many children less than 18 years of age live in your household?	1-87 = Number of children 88 = None 99 = Refused

2	[INCOME2]	08.17 Is your annual household income from all sources:	1 = Less than \$10,000 2 = Less than \$15,000 (\$10,000 to less than \$15,000)
		Note: If respondent refuses at any income level, code "Refused."	3 = Less than \$20,000 (\$15,000 to less than \$20,000) 4 = Less than \$25,000 (\$20,000 to less than \$25,000)
		Higher income options were added for the Alaska BRFSS with approval from the CDC (see Alaska-Added Questions section)	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)
			77 = Don't know/Not sure 99 = Refused
4	[WEIGHT2]	O8.18 About how much do you weigh without shoes? Round fractions up.	50-999 = Weight (pounds) 9000-9998 = Weight (kilograms) 7777 = Don't know/Not sure 9999 = Refused
		Note: If respondent answers in metrics, put a 9 in the first column	
4	[HEIGHT3]	08.19 About how tall are you without shoes?	200-711 = Height (ft/inches) 9000-9998 = Height (meters/centimeters) 7777 = Don't know/Not sure
		Round fractions down.	9999 = Refused
		Note: If respondent answers in metrics, put a 9 in the first column	
	Skip Question (08.20, if Section 08.01, SEX1, is coded 1; or Sec	ction 08.02, AGE, is greater than 49
1	[PREGNANT]	08.20 To your knowledge, are you now pregnant?	1 = Yes 2 = No 7 = Don't know/Not Sure 9 = Refused
1	[DEAF]	08.21 Are you deaf or do you have serious difficulty hearing?	1 = Yes 2 = No 7 = Don't know/Not Sure 9 = Refused
1	[BLIND]	08.22 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
1	[DECIDE]	08.23 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
1	[DIFFWALK]	08.24 Do you have serious difficulty walking or climbing stairs?	1 = Yes 2 = No 7 = Don't know/Not Sure 9 = Refused

1	[DIFFDRES]	08.25 Do you have difficulty dressing or bathing?	1 = Yes 2 = No 7 = Don't know/Not Sure 9 = Refused
1	[DIFFALON]	O8.26 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	9: Tobacco Use	e e	
1	[SMOKE100]	09.01 Have you smoked at least 100 cigarettes in your entire life? Note: 5 packs = 100 cigarettes	1 = Yes 2 = No - Go to Section 09.05 (Tobacco Use) USENOW3 7 = Don't know/Not Sure - Go to Section 09.05 (Tobacco Use) USENOW3 9 = Refused - Go to Section 09.05 (Tobacco Use) USENOW3
	Skip (Question 09.02, if Section 09.01, SMOKE100,	is coded 2, 7, 9, or Missing
1	[SMOKDAY2]	09.02 Do you now smoke cigarettes every day, some days, or not at all?	1 = Every day 2 = Some days 3 = Not at all - Go to Section 09.04 (Tobacco Use) LASTSMK2 7 = Don't Know/Not Sure - Go to Section 09.05 (Tobacco Use) USENOW3 9 = Refused - Go to Section 09.05 (Tobacco Use) USENOW3
Skip Quest	tion 09.03, if Section (09.01, SMOKE100, is coded 2, 7, 9, or Missing; ssing	or Section 09.02, SMOKDAY2, is coded 3, 7, 9, or Mi
1	[STOPSMK2]	09.03 During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?	1 = Yes - Go to Section 09.05 (Tobacco Use)
Skip Qu	estion 09.04, if Sectio	n 09.01, SMOKE100, is coded 2, 7, 9, or Missin Missing; or Section 09.03, STOPSMK2, is	ng; or Section 09.02, SMOKDAY2, is coded 7, 9, or coded 1, 2, 7, 9;

2	[LASTSMK2]	09.04 How long has it been since you last smoked a cigarette, even one or two puffs?	1 = Within the past month (less than 1 month ago) 2 = Within the past 3 months (1 month but less than 3 months ago) 3 = Within the past 6 months (3 months but less than 6 months ago) 4 = Within the past year (6 months but less than 1 year ago) 5 = Within the past 5 years (1 year but less than 5 years ago) 6 = Within the past 10 years (5 years but less than 10 years ago) 7 = 10 years or more 8 = Never smoked regularly 77 = Don't know/Not sure 99 = Refused
1	[USENOW3]	O9.05 Do you currently use chewing tobacco, snuff, snus, or iq'mik every day, some days, or not at all? Snus (rhymes with 'goose') 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 firecured tobacco leaves and "punk a sh", 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
Section	10: Alcohol Co	nsumption	
3	[ALCDAY5]	10.01 During the past 30 days, how many days per week or per month did you have at least one drink of any alcoholic beverage such as beer, wine, a malt beverage or liquor?	101-107 = Days per week 201-230 = Days in past 30 days 888 = No drinks in past 30 days - Go to Section 11.01 (Immunization) FLUSHOT6 777 = Don't know/Not sure - Go to Section 11.01 (Immunization) FLUSHOT6 999 = Refused - Go to Section 11.01 (Immunization) FLUSHOT6
	Skip	Question 10.02, if Section 10.01, ALCDAY5, is	s coded 888, 777, or 999;
2	[AVEDRNK2]	10.02 One drink is equivalent to a 12- ounce beer, a 5-ounce glass of wine, or a drink with one shot of liquor. During the past 30 days, on the days when you drank, about how many drinks did you drink on the average?	1-76 = Number of drinks 78-98 = Number of drinks 77 = Don't know/Not sure 99 = Refused
		Note: A 40 ounce beer would count as 3 drinks, or a cocktail drink with 2 shots would count as 2 drinks.	

	Skip	Question 10.03, if Section 10.01, ALCDAY5, is	coded 888, 777, or 999;
2	[DRNK3GE5]	10.03 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?	1-76 = Number of Times 88 = None 77 = Don't know/Not Sure 99 = Refused
	Skip	Question 10.04, if Section 10.01, ALCDAY5, is	coded 888, 777, or 999;
2	[MAXDRNKS]	10.04 During the past 30 days, what is the largest number of drinks you had on any occasion?	1-76 = Number of drinks 77 = Don't know/Not sure 99 = Refused
Section	11: Immunizatio	on	
1	[FLUSHOT6]	11.01 During the past 12 months, have you had either a flu shot or a flu vaccine that was sprayed in your nose? Note: A new flu shot came out in 2011 that injects vaccine into the skin with a very small needle. It is called Fluzone Intradermal vaccine. This is also considered a flu shot.	1 = Yes 2 = No - Go to Section 11.04 (Immunization) PNEUVAC4 7 = Don't know/Not Sure - Go to Section 11.04 (Immunization) PNEUVAC4 9 = Refused - Go to Section 11.04 (Immunization) PNEUVAC4
		Skip Question 11.02, if Section 11.01, FLUSHOT	6, is coded 2, 7, or 9
6	[FLSHTMY2]	11.02 During what month and year did you receive your most recent flu shot injected into your arm or flu vaccine that was sprayed in your nose?	12017-122018 = Month / Year 777777 = Don't know/Not Sure 999999 = Refused
	I	! Skip Question 11.03, if Section 11.01, FLUSHOT	! 6, is coded 2, 7, or 9
2	[IMFVPLAC]	11.03 At what kind of place did you get your last flu shot or vaccine?	1 = A doctor´s office or health maintenance organization (HMO) 2 = A health department 3 = Another type of clinic or health center (a community health center) 4 = A senior, recreation, or community center 5 = A store (supermarket, drug store) 6 = A hospital (inpatient) 7 = An emergency room 8 = Workplace 9 = Some other kind of place 10 = Received vaccination in Canada/Mexico 11 = A school 77 = Don't know / Not sure 99 = Refused
1	[PNEUVAC4]	11.04 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 12.01, if Section 08.02, AC	E, coded 18-44
2	[FALL12MN]	12.01 In the past 12 months, how many times have you fallen? INTERVIEWER NOTE: By a fall, we mean when a person unintentionally comes to rest on the ground or another lower level.	 1-76 = Number of times [76=76 or more] 88 = None - Go to Section 13.01 (Seatbelt Use an Drinking and Driving) SEATBELT 77 = Don't know/Not Sure - Go to Section 13.01 (Seatbelt Use and Drinking and Driving) SEATBELT 99 = Refused - Go to Section 13.01 (Seatbelt Use and Drinking and Driving) SEATBELT
Ski	ip Question 12.02, if Se	ection 08.02, AGE, coded 18-44; or Section 12.	01, FALL3MN2, is coded 77, 88, 99 or Missing
2	[FALLINJ3]	12.02 Did this fall cause an injury? (If only one fall Q12.01).How many of these falls caused an injury that limited your regular activities for at least a day?	1-76 = Number of falls [76=76 or more] 88 = None 77 = Don't know/Not Sure 99 = Refused
		INTERVIEWER NOTE: By an injury, we mean the fall caused you to limit your regular activities for at least a day or to go see a doctor.	
ection	13: Seatbelt Us	se and Drinking and Driving	
1	[SEATBELT]	13.01 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 14.1 (Breast and Cervical Cancer Screening) HADMAM 9 = Refused
	Skip Question 13.	02, if Section 10.01, ALCDAY5, is coded 888 o	r: Section 13.01, SEATBELT, is coded 8
_	[DRNKDRI2]	13.02 During the past 30 days, how many times have you driven when you've	1-76 = Number of times 88 = None 77 = Don't know/Not sure
2		had perhaps too much to drink?	99 = Refused

1	[HADMAM]	14.01 Have you ever had a mammogram?	1 = Yes 2 = No - Go to Section 14.03 (Breast and Cervical Cancer Screening) HADPAP2 7 = Don't know/Not sure - Go to Section 14.03 (Breast and Cervical Cancer Screening) HADPAP2 9 = Refused - Go to Section 14.03 (Breast and Cervical Cancer Screening) HADPAP2
	Skip Question 14.02,	if Section 08.01, SEX1, is coded 1; or Module 14	4.01, HADMAM, is coded 2, 7, 9, or Missing
1	[HOWLONG]	14.02 How long has it been since you had your last mammogram?	1 = Within the past year (anytime less than 12 months ago) 2 = Within the past 2 years (1 year but less than 2 years ago) 3 = Within the past 3 years (2 years but less than 3 years ago) 4 = Within the past 5 years (3 years but less than 5 years ago) 5 = 5 or more years ago 7 = Don't know/Not sure 9 = Refused
		Skip Question 14.03, if Section 08.01, S	EX1, is coded 1
1	[HADPAP2]	14.03 Have you ever had a Pap test?	1 = Yes 2 = No - Go to Section 14.05 (Breast and Cervical Cancer Screening) HPVTEST 7 = Don't know/Not sure - Go to Section 14.05 (Breast and Cervical Cancer Screening) HPVTEST 9 = Refused - Go to Section 14.05 (Breast and Cervical Cancer Screening) HPVTEST
	Skip Question 14.04, i	if Section 08.01, SEX1, is coded 1; or Section 14	4.03, HADPAP2, is coded 2, 7, 9, or Missing
1	[LASTPAP2]	14.04 How long has it been since you had your last Pap test?	1 = Within the past year (anytime less than 12 months ago) 2 = Within the past 2 years (1 year but less than 2 years ago) 3 = Within the past 3 years (2 years but less than 3 years ago) 4 = Within the past 5 years (3 years but less than 5 years ago) 5 = 5 or more years ago 7 = Don't know/Not sure 9 = Refused
		Skip Question 14.05, if Section 08.01, S	EX1, is coded 1
1	[HPVTEST]	14.05 An H.P.V. test is sometimes given with the Pap test for cervical cancer screening. Have you ever had an H.P.V. test?	1 = Yes 2 = No - Go to Section 14.07 (Breast and Cervical Cancer Screening) HADHYST2 7 = Don't know/Not Sure - Go to Section 14.07 (Breast and Cervical Cancer Screening) HADHYST2 9 = Refused - Go to Section 14.07 (Breast and Cervical Cancer Screening) HADHYST2

,	[UDLCTTCT]	14 Of Hamler - h - 24 h - 2	1 - Wishingshampshampshampshampshampshampshampshamp
1	[HPLSTTST]	your last H.P.V. test?	1 = Within the past year (anytime less than 12 months ago)
			2 = Within the past 2 years (1 year but less than 2
			years ago)
			3 = Within the past 3 years (2 years but less than
			3 years ago) 4 = Within the past 5 years (3 years but less than
			5 years ago)
			5 = 5 or more years ago
			7 = Don't know/Not Sure
			9 = Refused
	Skip Question	14.07, if Section 08.01, SEX1, is coded 1; or Sec	tion 08.20, PREGNANT, is coded 1
1	[HADHYST2]	14.07 Have you had a hysterectomy?	1 = Yes
			2 = No
		Note: A hysterectomy is an operation to	7 = Don't know/Not sure
		remove the uterus (womb).	9 = Refused
ection	15: Prostate Ca	ancer Screening	
	Skip Question	n 15.01, if Section 08.02, AGE, is less than 40;	or Section 08.01, SEX1, is coded 2;
1	[PCPSAAD3]	15.01 Has a doctor, nurse, or other health	1 = Yes
		professional ever talked with you	2 = No
		about the advantages of the	7 = Don't know/Not Sure
		Prostate-Specific Antigen or P.S.A. test?	9 = Refused
	Skip Questio	n 15.02, if Section 08.02, AGE, is less than 40;	or Section 08.01, SEX1, is coded 2
1	[PCPSADI1]	15.02 Has a doctor, nurse, or other health	1 = Yes
		professional ever talked with you	2 = No
		about the disadvantages of the	7 = Don't know/Not Sure
		P.S.A. test?	9 = Refused
•	Skip Question	15.03, if Section 08.02, AGE, is less than 40;	or Section 08.01, SEX1, is coded 2;
1	[PCPSARE1]	15.03 Has a doctor, nurse, or other health	1 = Yes
		professional ever recommended	2 = No
		that you have a P.S.A. test?	7 = Don't know/Not Sure
			9 = Refused
	Skip Question	15.04, if Section 08.02, AGE, is less than 40;	or Section 08.01, SEX1, is coded 2;
1	[PSATEST1]	15.04 Have you ever HAD a P.S.A. test?	1 = Yes
			2 = No - Go to Section 16.1 (Colorectal Cancer
			Screening) BLDSTOOL
			7 = Don't know/Not Sure - Go to Section 16.1
			(Colorectal Cancer Screening) BLDSTOOL
			9 = Refused - Go to Section 16.1 (Colorectal Cancer Screening) BLDSTOOL

2, 7, 9, or Missing

1	[PSATIME]	15.05 How long has it been since you had your last P.S.A. test?	1 = Wi thin the past year (anytime less than 12 months ago) 2 = Within the past 2 years (1 year but less than 2 years ago) 3 = Within the past 3 years (2 years but less than 3 years ago) 4 = Within the past 5 years (3 years but less than 5 years ago) 5 = 5 or more years ago 7 = Don't know/Not Sure 9 = Refused
	[PCPSARS1]	15.06 What was the MAIN reason you had this P.S.A. test – was it?	1 = Part of a routine exam 2 = Because of a prostate problem 3 = Because of a family history of prostate cancer 4 = Because you were told you had prostate cancer 5 = Some other reason 7 = Don't know/Not Sure 9 = Refused
Section	16: Colorectal	Cancer Screening	
		Skip Question 16.01, if Section 08.02, AGE	E, is less than 50
1	[BLDSTOOL]	16.01 A blood stool test is a test that may use a special kit at home to determine whether the stool contains blood. Have you ever had this test using a home kit?	1 = Yes 2 = No - Go to Section 16.03 (Colorectal Cancer Screening) HADSIGM3 7 = Don't know/Not Sure - Go to Section 16.03 (Colorectal Cancer Screening) HADSIGM3 9 = Refused - Go to Section 16.03 (Colorectal Cancer Screening) HADSIGM3
Sk	: ip Question 16.02, if S	ection 08.02, AGE, is less than 50; or Section	16.01, BLDSTOOL, is coded 2, 7, 9, or Missing
1	[LSTBLDS3]	16.02 How long has it been since you had your last blood stool test using a home kit?	1 = Within the past year (anytime less than 12 months ago) 2 = Within the past 2 years (1 year but less than 2 years ago) 3 = Within the past 3 years (2 years but less than 3 years ago) 4 = Within the past 5 years (3 years but less than 5 years ago) 5 = 5 or more years ago 7 = Don't know/Not sure 9 = Refused
		Skip Question 16.03, if Section 08.02, AG	E, is less than 50
1	[HADSIGM3]	16.03 Sigmoidoscopy and colonoscopy are exams in which a tube is inserted in the rectum to view the colon for signs of cancer or other health problems. Have you ever had either of these exams?	1 = Yes 2 = No - Go to Section 17.01 (HIV/AIDS) HIVTST6 7 = Don't know/Not Sure - Go to Section 17.01 (HIV/AIDS) HIVTST6 9 = Refused - Go to Section 17.01 (HIV/AIDS) HIVTST6

1	[HADSGCO1]	similar, but uses a longer tube, and you are usually given medication through a needle in your arm to make you sleepy and told to have someone else drive you home after the test. Was your most recent exam a sigmoidoscopy or a colonoscopy?	1 = Sigmoidoscopy 2 = Colonoscopy 7 = Don't know/Not Sure 9 = Refused
1	[LASTSIG3]	16.05 How long has it been since you had your last sigmoidoscopy or colonoscopy?	16.03, HADSIGM3, is coded 2, 7, 9, or Missing 1 = Within the past year (anytime less than 12 months ago) 2 = Within the past 2 years (1 year but less than 2 years ago) 3 = Within the past 3 years (2 years but less than 3 years ago) 4 = Within the past 5 years (3 years but less than 5 years ago) 5 = Within the past 10 years (5 years but less than 10 years ago) 6 = 10 or more years ago 7 = Don't know/Not sure 9 = Refused
1	17: HIV/AIDS [HIVTST6]	17.01 Have you ever been tested for HIV? Do not count tests you may have had as part of a blood donation. Include testing fluid from your mouth.	1 = Yes 2 = No - Go to Section 17.03 (HIV/AIDS) HIVRISKS 7 = Don't know/Not Sure - Go to Section 16.03 (HIV/AIDS) HIVRISKS 9 = Refused - Go to Section 16.03 (HIV/AIDS) HIVRISKS
6	[HIVTSTD3]	17.02 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.	11985-122019 = Code month and year 771985-772019 = Unknown month and known year 777777 = Don't know/Not sure 999999 = Refused

1	[HIVRISK5]	17.03 I am going to read you a list. When I am done, please tell me if any of the situations apply to you. You do not need to tell me which one.	1 = Yes 2 = No 7 = Don't know/Not sure 9 = Refused
		 You have injected any drug other than those prescribed for you in the past year. You have been treated for a sexually transmitted disease or STD in the past year. You have given or received money or drugs in exchange for sex in the past year. You had anal sex without a condom in the past year. You had four or more sex partners in the past year. Do any of these situations apply to you? 	

Closing Statement / Transition to Modules

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.

Module	Alaska Selected CDC Modules Module 1: Pre-Diabetes				
	Skip Question M01.01, if Section 06.12, DIABETE3, is coded 1				
1	[PDIABTST]	M01.01 Have you had a test for high blood sugar or diabetes within the past three years?	1 = Yes 2 = No 7 = Don't know/Not Sure 9 = Refused		
	the state of the s	on M01.02, if Section 06.12, DIABETE3, is cod coded 4 automatically code Module 01.02, PR			
1	[PREDIAB1]	M01.02 Have you ever been told by a doctor or other health professional that you have pre-diabetes or borderline diabetes?	1 = Yes 2 = Yes, during pregnancy 3 = No 7 = Don't know/Not Sure 9 = Refused		
		Note: If "Yes" and respondent is female, ask: "Was this only when you were pregnant?"			

Module	6: E-Cigarettes		
1	[ECIGARET]	M06.01 Have you ever used an e- cigarette or other electronic vaping product, even just one time, in your entire life?	1 = Yes 2 = No - Go to next module 7 = Don't know/Not Sure - Go to next module 9 = Refused - Go to next module
		Read if necessary: Electronic cigarettes (e-cigarettes) and other electronic vaping products include electronic hookahs (e-hookahs), vape pens, e-cigars, and others. These products are battery-powered and usually contain nicotine and flavors such as fruit, mint, or candy.	
		Interviewer note: These questions concern electronic vaping products for nicotine use. The use of electronic vaping products for marijuana use is not included in these questions.	
	Skip Qu	estion M06.02, if Module 06.01, ECIGARET,	is coded 2, 7, 9, or Missing
1	[ECIGNOW]	M06.02 Do you now use e-cigarettes or other electronic vaping products every day, some days or not at all? Interviewer note: These questions concern electronic vaping products for nicotine use. The use of electronic vaping products for marijuana use is not included in these questions.	1 = Every day 2 = Some days 3 = Not at all 7 = Don't know / Not sure 9 = Refused
		Alaska Added Ques	stions
Expande	ed Education and	d Income Categories	
1	[EDUCA_AK]	O8.07 What is the highest grade or year of school you completed? Interviewer probe: If respondent says Grade 12: "When you say that you completed 12th grade, does that mean you graduated with a diploma from your high school or a correspondence school or home-school, or did you receive a GED?"	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) 7 = GED (High School equivalence diploma) 8 = Home-schooled with diploma or correspondence school 9 = Refused
		Alaska obtained approval in the 2017 survey year to expand answer options for this core CDC question.	

2	[INCOME100]	O8.17 Is your annual household income from all sources: Note: If respondent refuses at any income level, code "Refused." Alaska obtained approval in the 2017 survey year to expand answer options for this question. Income levels in Alaska are generally higher than other states due to increased cost of living. The modification to this question's answer options would allow 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 (\$70,000 to less than \$85,000) 9 = Less than \$100,000 (\$85,000 to less than \$100,000) 10 = \$100,000 or more 77 = Don't know/Not sure 99 = Refused
Tobacco	o Use (E-Cigare	ettes)	
	Skip AKA.1 it	Module 06.02 is coded 2, 7,9 or Missing or M	106.01 is coded 3, 7, 9, or Missing
2	[VAPE30D]	AKA.1 During the past 30 days, on how many days did you use an ecigarette or other electronic vaping product?	(01-30) Number of days 88 = None 77 = Don't Know/Not sure 99 = Refused
Hyperte	ension Awarene	ess and Action to Control High E	Blood Pressure
1	[BPHIGH4]	AKB.1 Have you EVER been told by a doctor, nurse, or other health professional that you have high blood pressure? [Read only if necessary: By "other health professional" we mean a nurse practitioner, a physician's assistant, or some other licensed health professional.] [If "Yes" and respondent is female, ask: "Was this only when you were pregnant?"]	1 = Yes 2 = Yes, but female told only during pregnancy 3 = No 4 = Told borderline high or prehypertensive 7 = Don't know / Not sure 9 = Refused
		Skip AKB.2 if AKB.1 is coded 2, 3, 4, 5,	9 or Missing
1	[BPMEDS]	AKB.2 Are you currently taking medicine for your high blood pressure?	1 = Yes 2 = No 7 = Don't know / Not sure 9 = Refused
		Skip AKB.3 if AKB.1 is coded 2, 3, 4, 5,	9 or Missing

1	[BPMEDAD]	AKB.3 Has a doctor or other health professional EVER advised you to take medication to help lower or control your high blood pressure?	1 = Yes 2 = No 7 = Don't know / Not sure 9 = Refused
Cardiov	ascular Health		
		Skip AKC.1 if Core 06.01 is coded 2, 7, 9 or	r Missing
1	[HAREHAB1]	I would like to ask you a few more questions about cardiovascular or heart health.	1 = Yes 2 = No 7 = Don't know / Not sure 9 = Refused
		AKC.1 Following your heart attack, did you go to any kind of outpatient rehabilitation? (This is sometimes called "rehab.")	
		Skip AKC.2 if Core 06.03 is coded 2, 7, 9 o	r Missing
1	[STREHAB1]	AKC.2 Following your stroke, did you go to any kind of outpatient rehabilitation? This is sometimes called "rehab."	1 = Yes 2 = No 7 = Don't know / Not sure 9 = Refused
Sodium	or Salt-Related	Behavior	
1	[WTCHSALT]	I would like to ask you a few more questions about your cardiovascular or heart health. AKD.1 Most of the sodium or salt we eat	1 = Yes 2 = No 7 = Don't know / Not sure 9 = Refused
		comes from processed foods and foods prepared in restaurants. Salt also can be added in cooking or at the table. Are you currently watching or reducing your sodium or salt intake?	
1	[DRADVISE]	AKD.2 Has a doctor or other health professional ever advised you to reduce sodium or salt intake?	1 = Yes 2 = No 7 = Don't know / Not sure 9 = Refused
			y = Refused
	o Use (Smokele	ess) to Use, question 09.05 (USENOW3)	y = Refused

1 1 1 1 1 20	[USENWAK5] [USENWAK6] [USENWAK7] [USENWAK8] [USENWAK9] [USENWAKT]	AKE.1 Which smokeless tobacco products do you currently use? Chewing tobacco, snuff, snus, or iq'mik* (also known as blackbull)? [Probe for which]? (Select all that apply). First mention is in position 1, second mention is in position two, etc. These are later collapsed by Alaska BRFSS program so that all "chewing tobacco" responses are in one variable, all "snus" responses are in another variable, etc.	1 = Yes, chewing tobacco 2 = Yes, snuff 3 = Yes, iq'mik or blackbull 4 = Yes, snus 5 = Yes, other (specify text) 7 = Don't know / Not sure 9 = Refused
Marijuai	na Use		
2	[MARIJANI]	AKF.1 During the past 30 days, on how many days did you use marijuana or cannabis? Note: Hashish omitted from question wording in 2018	01-30 Number of days 88 = None [Go to AKF.6] 77 = Don't know/not sure [Go to AKF.6] 99 = Refused [Go to AKF.6]
		Skip AKF.2 if AKF.1 is coded as 88, 77,	99 or Missing
1 1 1 1 1 1 20	[MJUSE1] [MJUSE2] [MJUSE3] [MJUSE4] [MJUSE5] [MJUSE6] [MJUSET]	AKF.2 During the past 30 days, how did you use marijuana or cannabis? (Select all that apply). First mention is in position 1, second mention is in position 2, etc. These are later collapsed by the Alaska BRFSS program so that all "smoke it" responses are in one variable, all "eat it" responses are in a second variable, etc.	1= Smoke it (for example, in a joint, bong, pipe, or blunt) 2 = Eat it (for example, in brownies, cakes, cookies, or candy) 3 = Drink it (for example, 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 waxes or concentrates) 6 = Use it some other way (specify TEXT) 7 = Don't know/not sure 9 = Refused
		Skip AKF.3 if AKF.1 is coded as 88, 77,	99 or Missing
1 20	[MJGETHOW] [MJGETHOWT]	AKF.3 The last time you used marijuana or cannabis, how did you get it?	1 = You bought it from a retail store 2 = You bought it from a medical dispensary 3 = You bought it from a dealer 4 = You got it for free or shared someone else's 5 = You grew it yourself at home 6 = You got it from a collective garden or from someone authorized to grow it for you 8 = You got it from somewhere else (specify TEXT) 7 = Don't know/not sure
			9 = Refused
		Skip AKF.4 if AKF.1 is coded as 88, 77,	99 or Missing
1	[MJDRIVE]	AKF.4 During the past 30 days, have you driven a vehicle while you were under the influence of marijuana or cannabis?	1 = Yes 2 = No 7 = Don't know / Not sure 9 = Refused
		Skip AKF.5 if AKF.1 is coded as 88, 77,	99 or Missing

1	[MJKEEP]	AKF.5 If marijuana or cannabis is stored in your home, is it kept in a secure place where children cannot get it?	1 = Yes 2 = No not stored securely 3 = No cannabis in home 7 = Don't know/not sure 9 = Refused
2	[MJSHS]	AKF.6 During the past 7 days, on how many days did you breathe the smoke from someone who was smoking marijuana or cannabis products in an indoor or outdoor public place? [CATI NOTE: If needed, examples of indoor public places are school buildings, stores, restaurants, concert halls, and sports arenas. Examples of outdoor public places are school grounds, parking lots, stadiums, fairgrounds, and parks.]	O1-30 Number of days 88 = None 77 = Don't know/not sure 99 = Refused
3	[MJAGEFRST]	AKF.7 How old were you the first time you used marijuana or cannabis?	001-099 Number of years 888 = None 777 = Don't know/not sure 999 = Refused
Opioid	Use		
2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	[OPTYPE1] [OPTYPE2] [OPTYPE3] [OPTYPE4] [OPTYPE5] [OPTYPE6] [OPTYPE7] [OPTYPE8] [OPTYPE9] [OPTYPE10] [OPTYPE10] [OPTYPE11]	AKG.1 In the past 30 days what, if any, opioids have you taken? Examples of opioids include Codeine, fentanyl, hydrocodone, Methadone, OxyContin, Percocet, tramadol, and Vicodin. [INTERVIEWER NOTE: Do not read answer options. Check all opioids the participant indicates. If unsure of what the respondent indicates is an opioid, write it in "Other".] (Select all that apply). First mention is in position 1, second mention is in position 2, and so on. These are later collapsed by the Alaska BRFSS program so that all "Buprenorphine" responses are in one variable, all "Codeine" responses are in a second variable, etc.	O1 = Buprenorphine (Butrans, Subutex, Buprenex) O2 = Codeine O3 = Fentanyl (Duragesic, Actiq) O4 = Hydrocodone (Norco, Vicodin, Lortab, Lorcet) O5 = Hydromorphone (Dilaudid, Exalgo) O6 = Meperidine (Demerol) O7 = Methadone (Methadose, Dolophine) O8 = Morphine (MS Contin, Embeda) O9 = Oxycodone (Oxycontin, Endocet, Percocet) 10 = Tramadol (Ultram, Tramal) 11 = Other (specify TEXT) 88 = Did not take opioids in the last 30 days 77 = Don't know/Not Sure 99 = Refused

Sexual Orientation and Gender Identity				
1 20	[SXORIENT] [SEXORTXT]	Now I'm going to ask you a question about sexual orientation.	2 = Gay or Lesbian 1 = Straight, that is, not lesbian or gay 3 = Bisexual	
		AKH.1 Do you think of yourself as: A. Gay or lesbian, B. Straight, that is, not lesbian or gay, C. Bisexual, or D. Something else?	4 = Something else (specify TEXT)	
		[INTERVIEWER NOTE: Please read the letters with the answer categories, so that respondent may use either the letter or words to give their answer. You may use the descriptions below if respondent asks for clarification.]		
		[INTERVIEWER NOTE, IF NEEDED SAY: "Research has shown that some sexual minority community members have important health risk factors, such as smoking. We are collecting information about sexual orientation to learn whether this is true in Alaska. Remember, you don't have to answer any question if you don't want."]		
		[INTERVIEWER NOTE, IF NEEDED SAY: "Gay or Lesbian — A person who is gay or lesbian is exclusively attracted to people of the same sex. Straight— A person who is "straight" is exclusively attracted to people of the opposite sex. Bisexual— A person who is bisexual is attracted to people of either sex."]		
1	[TRANSG]	AKH.2 Some people have a different gender identity from their sex at birth. Do you consider yourself to be the same sex or gender as you were at birth?	1 = Yes 2 = No 7 = Don't know / Not sure 9 = Refused	
		[INTERVIEWER NOTE, IF NEEDED SAY: "Gender Identity— one's internal sense of being male, female, neither of these, both, or other gender(s)."]		