



# Behavioral Risk Factor Surveillance System (BRFSS) 2021 Alaska Questionnaire

Version 1.31.23

Alaska-specific content is in purple

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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](mailto:ivk7@cdc.gov).

# Behavioral Risk Factor Surveillance System (BRFSS)

## 2021 Alaska Questionnaire

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# Screeners – Landline Only

*Skip Question LL01, if QSTVER > = 20*

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.

*Skip Question LL01, if QSTVER > = 20*

Field Size: 1

Variable Name: [CTELENM1]

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

- 1 = Yes - *Go to LL.02, PVTRES D1*
- 2 = No - *Terminate Phone Call*

*Skip Question LL02, if QSTVER >= 20*

Field Size: 1

Variable Name: [PVTRES D1]

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*

*Skip Question LL03, if QSTVER >= 20; or LL.02, PVTRES D1, is coded 1*

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*

*Skip Question LL04, if QSTVER >= 20*

Field Size: 1

Variable Name: [STATERE1]

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

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

*Skip Question LL05, if QSTVER >= 20*

Field Size: 1

Variable Name: [CELPHONE]

**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*

*Skip Question LL06, if QSTVER >= 20*

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, COLGSEX; else go to LL.08, NUMADULT*

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

*Skip Question LL07, if QSTVER >= 20; or if LL.03, COLGHOUS, is not coded 1*

Field Size: 1

Variable Name: [COLGSEX]

**Question: LL.07 Are you male or female?**

1 = Male - *Go to Section 01.01 (Health Status) GENHLTH*

2 = Female - *Go to Section 01.01 (Health Status) GENHLTH*

7 = Don't know/Not sure - *Terminate Phone Call*

9 = Refused - *Terminate Phone Call*

*Skip Question LL08, if QSTVER >= 20*

Field Size: 2

Variable Name: [NUMADULT]

**Question: LL.08 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, LANDSEX*

2 = Number of adults in the household - *Go to LL.10, NUMMEN*

3 = Number of adults in the household - *Go to LL.10, NUMMEN*

4 = Number of adults in the household - *Go to LL.10, NUMMEN*

5 = Number of adults in the household - *Go to LL.10, NUMMEN*

6-99 = 6 or more - *Go to LL.10, NUMMEN*

*Skip Question LL09, if QSTVER >= 20; or if LL.08, NUMADULT, is greater than 1*

Field Size: 1

Variable Name: [LANDSEX]

Question: LL.09 Are you male or female?

1 = Male - *Go to C01.01, GENHLTH*

2 = Female - *Go to C01.01, GENHLTH*

7 = Don't know/Not sure - *Terminate Phone Call*

9 = Refused - *Terminate Phone Call*

*Skip Question LL10, if QSTVER >= 20; or if LL.08, NUMADULT, is equal to 1*

Field Size: 2

Variable Name: [NUMMEN]

Question: LL.10 How many of these adults are men?

0 = 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 LL11, if QSTVER >= 20; or if LL.08, NUMADULT, is equal to 1*

Field Size: 2

Variable Name: [NUMWOMEN]

Question: LL.11 So the number of women in the household is [X]. Is that correct?

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

*Skip Question LL12, if QSTVER >= 20; or if LL.08, NUMADULT, is equal to 1*

Field Size: 1

Variable Name: [RESPSLCT]

Question: LL.12 The person in your household that I need to speak with is [XXX]. Are you the [XXX] in this household

1 = Male - *Go to Section 01.01 (Health Status) GENHLTH*

2 = Female - *Go to Section 01.01 (Health Status) GENHLTH*

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 Alaska Department of Health. 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*

*Skip Question CP03, if QSTVER < 20*

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*

*Skip Question CP04, if QSTVER < 20*

Field Size: 1

Variable Name: [CADULT1]

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

1 = Yes - *Go to CP.05, CELLSEX*

2 = No - *Terminate Phone Call*

*Skip Question CP05, if QSTVER < 20*

Field Size: 1

Variable Name: [CELLSEX]

**Question: CP.05 Are you male or female?**

1 = Male - *Go to CP.06, PVTRES3*

2 = Female - *Go to CP.06, PVTRES3*

7 = Don't know/Not sure - *Terminate Phone Call*

9 = Refused - *Terminate Phone Call*

*Skip Question CP06, if QSTVER < 20*

Field Size: 1

Variable Name: [PVTRES3]

**Question: CP.06 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 CP07, if QSTVER < 20; or CP.06, PVTRES3, is coded 1*

Field Size: 1

Variable Name: [CCLGHOUS]

**Question: CP.07 Do you live in college housing?**

1 = Yes - *Go to CP.08, CSTATE1*

2 = No - *Terminate Phone Call*

*Skip Question CP08, if QSTVER < 20*

Field Size: 1

Variable Name: [CSTATE1]

**Question: CP.08 Do you currently live in Alaska?**

1 = Yes - *Go to CP.10, LANDLINE*

2 = No - *Go to CP.09, RSPSTAT1*

*Skip Question CP09, if QSTVER < 20; or CP.08, CSTATE1, is coded 1*

Field Size: 2

Variable Name: [RSPSTAT1]

**Question: CP.09 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

2 = Alaska



4 = Arizona  
5 = Arkansas  
6 = California  
8 = Colorado  
9 = Connecticut  
10 = Delaware  
11 = District of Columbia  
12 = Florida  
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  
78 = Virgin Islands  
77 = Out of US - *Terminate Phone Call*  
99 = Refused - *Terminate Phone Call*

*Skip Question CP10, if QSTVER < 20; or RSPSTAT1=77 or 99*

Field Size: 1

Variable Name: [LANDLINE]

**Question: CP.10 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

*Skip Question CP11, if QSTVER < 20; or RSPSTAT1=77 or 99*

Field Size: 2

Variable Name: [HHADULT]

**Question: CP.11 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

## Respondent Sex

Field Size: 1

Variable Name: [SEXVAR]

**Sex of Respondent**

- 1 = Male - *Code=1 if LANDSEX=1 or CELLSEX=1 or COLGSEX=1*
- 2 = Female - *Code=2 if LANDSEX=2 or CELLSEX=2 or COLGSEX=2*

## CDC Core Sections

### 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

## Section 3: Health Care Access

Field Size: 2

Variable Name: [PRIMINSR]

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

01 = A plan purchased through an employer or union (including plans purchased through another person's employer)

02 = A private nongovernmental plan that you or another family member buys on your own

03 = Medicare

04 = Medigap

05 = Medicaid

06 = Children's Health Insurance Program (CHIP)

07 = Military related health care: TRICARE (CHAMPUS)/VA health care/CHAMP-VA

08 = Native Health Service or Indian Health Service  
09 = 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

7 = Don't know/Not sure

9 = 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*

*Skip Question 05.02, if Section 05.01, BPHIGH6, is coded 2, 3, 4, 7, 9, or Missing*

Field Size: 1

Variable Name: [BPMEDS]

Question: C05.02 Are you currently taking 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 Cholesterol is a fatty substance found in the blood. About how long has it been since you last had your cholesterol checked?

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](#)

*Skip Question 06.02, if Section 06.01, CHOLCHK3, is coded 1, 7, 9, or Missing*

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

*Skip Question 06.03, if Section 06.01, CHOLCHK3, is coded 1, 7, 9, or Missing or 06.02 TOLDHI3 is coded 2,7,9 or Missing.*

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 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 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: [CHCSCNCR]

Question: C07.06 (Ever told) you had skin cancer?

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

Field Size: 1

Variable Name: [CHCOCNCR]

Question: C07.07 (Ever told) (you had) 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: [DIABETE4]

Question: C07.11 (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 \(Arthritis\) HAVARTH5](#)  
3 = No - [Go to Section 08.01 \(Arthritis\) HAVARTH5](#)  
4 = No, pre-diabetes or borderline diabetes - [Go to Section 08.01 \(Arthritis\) HAVARTH5](#)



7 = Don't know/Not sure - [Go to Section 08.01 \(Arthritis\) HAVARTH5](#)

9 = Refused - [Go to Section 08.01 \(Arthritis\) HAVARTH5](#)

*Skip Question 07.12, if Section 07.11, DIABETE4, is coded 2, 3, 4, 7, 9, or Missing*

Field Size: 2

Variable Name: [DIABAGE3]

Question: C07.12 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: Arthritis

Field Size: 1

Variable Name: [HAVARTH5]

Question: C08.01 Has a doctor, nurse or other health professional ever told you that you had some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia?

1 = Yes

2 = No - [Go to Section 09.01 \(Demographics\) AGE](#)

7 = Don't know/Not sure - [Go to Section 09.01 \(Demographics\) AGE](#)

9 = Refused - [Go to Section 09.01 \(Demographics\) AGE](#)

*Skip Question 08.02, if Section 08.01, HAVARTH5, is coded 2, 7, 9, or Missing*

Field Size: 1

Variable Name: [ARTHEXER]

Question: C08.02 Has a doctor or other health professional ever suggested physical activity or exercise to help your arthritis or joint symptoms?

NOTE: If the respondent is unclear about whether this means an increase or decrease in physical activity, this means increase.

1 = Yes

2 = No

7 = Don't know/Not sure

9 = Refused

*Skip Question 08.03, if Section 08.01, HAVARTH5, is coded 2, 7, 9, or Missing*

Field Size: 1

Variable Name: [ARTHEDU]

Question: C08.03 Have you ever taken an educational course or class to teach you how to manage problems related to your arthritis or joint symptoms?

1 = Yes

2 = No

7 = Don't know/Not sure

9 = Refused

*Skip Question 08.04, if Section 08.01, HAVARTH5, is coded 2, 7, 9, or Missing*

Field Size: 1

Variable Name: [LMTJOIN3]

**Question: C08.04 Are you now limited in any way in any of your usual activities because of arthritis or joint symptoms?**

1 = Yes

2 = No

7 = Don't know/Not sure

9 = Refused

*Skip Question 08.05, if Section 08.01, HAVARTH5, is coded 2, 7, 9, or Missing*

Field Size: 1

Variable Name: [ARTHDIS2]

In this next question we are referring to work for pay.

**Question: C08.05 Do arthritis or joint symptoms now affect whether you work, the type of work you do or the amount of work you do?**

1 = Yes

2 = No

7 = Don't know/Not sure

9 = Refused

*Skip Question 08.06, if Section 08.01, HAVARTH5, is coded 2, 7, 9, or Missing*

Field Size: 2

Variable Name: [JOINPAI2]

Please think about the past 30 days, keeping in mind all of your joint pain or aching and whether or not you have taken medication.

**Question: C08.06 During the past 30 days, how bad was your joint pain on average on a scale of 0 to 10 where 0 is no pain and 10 is pain or aching as bad as it can be?**

0-10 = Enter number [0-10]

77 = Don't know/Not sure

99 = Refused

## Section 9: Demographics

Field Size: 2

Variable Name: [AGE]

**Question: C09.01 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

Field Size: 4

Variable Name: [HISPANC3]

**Question: C09.02 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  
12-4321 = Multiple responses  
9 = Refused

Field Size: 28

Variable Name: [MRACE1]

**Question: C09.03 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

*Skip Question 09.04, if Section 09.04, MRACE1, has only one valid race code (10-60)*

Field Size: 2

Variable Name: [ORACE3]

**Question: C09.04 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

Field Size: 1

Variable Name: [MARITAL]

**Question: C09.05 Are you: (marital status)**

- 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: C09.06 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 State-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

Field Size: 1

Variable Name: [RENTHOM1]

Question: C09.07 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: C09.08 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.

1-776 = 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: C09.09 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 09.10, if QSTVER >= 20*

Field Size: 1

Variable Name: [NUMHHOL3]

Question: C09.10 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 09.12 \(Demographics\) CPDEMO1B](#)

7 = Don't know/Not sure - [Go to Section 09.12 \(Demographics\) CPDEMO1B](#)

9 = Refused - [Go to Section 09.12 \(Demographics\) CPDEMO1B](#)

*Skip Question 09.11, if Section 09.10, NUMHHOL3, is coded 2, 7, 9, or Missing; or QSTVER >= 20*

Field Size: 1

Variable Name: [NUMPHON3]

**Question: C09.11 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

Field Size: 1

Variable Name: [CPDEMO1B]

**Question: C09.12 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: C09.13 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: C09.14 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: C09.15 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: C09.16 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).

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 \$100,000? (\$75,000 to less than \$100,000)

9 = 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 09.17, if respondent sex, SEXVAR, is coded 1; or Module 27.01, BIRTHSEX, is coded 1; or AGE is greater than 49*

Field Size: 1

Variable Name: [PREGNANT]

Question: C09.17 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: C09.18 About how much do you weigh without shoes?

Round fractions up.

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: C09.19 About how tall are you without shoes?**

Round fractions down.

NOTE: If respondent answers in metrics, put a 9 in the first column

200-711 = Height (ft/inches)

9000-9998 = Height (meters/centimeters)

7777 = Don't know/Not sure

9999 = Refused

## Section 10: Disability

Field Size: 1

Variable Name: [DEAF]

**Question: C10.01 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: C10.02 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: C10.03 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: C10.04 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: C10.05 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: C10.06 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 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 11.03 (Tobacco Use) USENOW3*
- 7 = Don't know/Not sure - *Go to Section 11.03 (Tobacco Use) USENOW3*
- 9 = Refused - *Go to Section 11.03 (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, 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 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

*Skip Question 11.04, if AK04.05 is coded 2, 7, 9, or Missing*

Field Size: 1

Variable Name: [ECIGNOW1]

**Question: C11.04 Do you now use e-cigarettes or other electronic vaping products every day, some days, or not at all?**

With CDC approval, '4 = Never smoked' was auto-populated from AK04.05 = '2' (never used e-cigarettes).

1 = Every day  
2 = Some days  
3 = Not at all  
4 = Never smoked e-cigs  
7 = Don't know/Not sure  
9 = Refused

## Section 12: Alcohol Consumption

Field Size: 3

Variable Name: [ALCDAY5]

**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 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 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, ALCDAY5, is coded 888, 777, or 999*

Field Size: 2

Variable Name: [AVEDRNK3]

**Question: C12.02 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?**

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

1-76 = Number of drinks

78-87 = Number of drinks

89-98 = Number of drinks

88 = None

77 = Don't know/Not sure

99 = Refused

*Skip Question 12.03, if Section 12.01, ALCDAY5, 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?**

1-76 = Number of Times

88 = None

77 = Don't know/Not sure

99 = Refused

*Skip Question 12.04, if Section 12.01, ALCDAY5, is coded 888, 777, or 999*

Field Size: 2

[MAXDRNKS]

**Question: C12.04 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 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 13.04 \(Immunization\) PNEUVAC4](#)

7 = Don't know/Not sure - [Go to Section 13.04 \(Immunization\) PNEUVAC4](#)

9 = Refused - [Go to Section 13.04 \(Immunization\) 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?**

12020-122021 = Month/Year

777777 = Don't know/Not sure

999999 = Refused

*Skip Question 13.03, if Section 13.01, FLUSHOT7, is coded 2, 7, or 9*

Field Size: 2

Variable Name: [IMFVPLA2]

**Question: C13.03 At what kind of place did you get your last flu shot or vaccine?**

01 = A doctor's office or health maintenance organization (HMO)

02 = A health department

03 = Another type of clinic or health center (a community health center)

04 = A senior, recreation, or community center

05 = A store (supermarket, drug store)

06 = A hospital (inpatient or outpatient)

07 = An emergency room

08 = Workplace

09 = Some other kind of place

10 = Received vaccination in Canada/Mexico

11 = A school

12 = A drive through location at some other place than listed above

77 = Don't know/Not sure

99 = Refused

Field Size: 1

Variable Name: [PNEUVAC4]

**Question: C13.04 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

## **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 \(Fruits & Vegetables\) FRUIT2](#)

7 = Don't know/Not sure - *Go to Section 15.01 (Fruits & Vegetables) FRUIT2*

9 = Refused - *Go to Section 15.01 (Fruits & Vegetables) FRUIT2*

*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.

11985-122021 = Code month and year

771985-772021 = Unknown month and known year

777777 = Don't know/Not sure

999999 = Refused

## **Section 15: Fruits & Vegetables**

Field Size: 3

Variable Name: [FRUIT2]

**Question: C15.01 Not including juices, how often did you eat fruit?**

101-199 = Days

201-299 = Weeks

301-399 = Month/Year

300 = Less than once a month

555 = Never

777 = Don't know/Not sure

999 = Refused

Field Size: 3

Variable Name: [FRUITJU2]

**Question: C15.02 Not including fruit-flavored drinks or fruit juices with added sugar, how often did you drink 100% fruit juice such as apple or orange juice?**

101-199 = Days

201-299 = Weeks

301-399 = Month/Year

300 = Less than once a month

555 = Never

777 = Don't know/Not sure

999 = Refused

Field Size: 3

Variable Name: [FVGREEN1]

Question: C15.03 How often did you eat a green leafy or lettuce salad, with or without other vegetables?

101-199 = Days

201-299 = Weeks

301-399 = Month/Year

300 = Less than once a month

555 = Never

777 = Don't know/Not sure

999 = Refused

Field Size: 3

Variable Name: [FRENCHF1]

Question: C15.04 How often did you eat any kind of fried potatoes, including french fries, home fries, or hash browns?

101-199 = Days

201-299 = Weeks

301-399 = Month/Year

300 = Less than once a month

555 = Never

777 = Don't know/Not sure

999 = Refused

Field Size: 3

Variable Name: [POTATOE1]

Question: C15.05 How often did you eat any other kind of potatoes, or sweet potatoes, such as baked, boiled, mashed potatoes, or potato salad?

101-199 = Days

201-299 = Weeks

301-399 = Month/Year

300 = Less than once a month

555 = Never

777 = Don't know/Not sure

999 = Refused

Field Size: 3

Variable Name: [VEGETAB2]

Question: C15.06 Not including lettuce salads and potatoes, how often did you eat other vegetables?

101-199 = Days

201-299 = Weeks

301-399 = Month/Year

300 = Less than once a month  
555 = Never  
777 = Don't know/Not sure  
999 = Refused

## **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.**

# Alaska Selected CDC Modules

## Module 2: Diabetes

Inserted after Section 7: Chronic Health Conditions

*Skip Question M02.01, if Section 07.11, DIABETE4, is coded 2, 3, 4, 7, 9, or Missing*

Field Size: 1

Variable Name: [INSULIN1]

Question: M02.01 Are you now taking insulin?

1 = Yes

2 = No

7 = Don't know/Not sure

9 = Refused

*Skip Question M02.02, if Section 07.11, DIABETE4, is coded 2, 3, 4, 7, 9, or Missing*

Field Size: 3

Variable Name: [BLDSUGAR]

Question: M02.02 About how often do you check your blood for glucose or sugar? [Include times when checked by a family member or friend, but do NOT include times when checked by a health professional.]

101-199 = Times per day

201-299 = Times per week

301-399 = Times per month

401-499 = Times per year

888 = Never

777 = Don't know/Not sure

999 = Refused

*Skip Question M02.03, if Section 07.11, DIABETE4, is coded 2, 3, 4, 7, 9, or Missing*

Field Size: 3

Variable Name: [FEETCHK3]

Question: M02.03 Including times when checked by a family member or friend, about how often do you check your feet for any sores or irritations?

101-199 = Times per day

201-299 = Times per week

301-399 = Times per month

401-499 = Times per year

555 = No feet

888 = Never

777 = Don't know/Not sure

999 = Refused



*Skip Question M02.04, if Section 07.11, DIABETE4, is coded 2, 3, 4, 7, 9, or Missing*

Field Size: 2

Variable Name: [DOCTDIAB]

**Question: M02.04 About how many times in the past 12 months have you seen a doctor, nurse, or other health professional for your diabetes?**

1-76 = Number of times [76=76 or more]

88 = None

77 = Don't know/Not sure

99 = Refused

*Skip Question M02.05, if Section 07.11, DIABETE4, is coded 2, 3, 4, 7, 9, or Missing*

Field Size: 2

Variable Name: [CHKHEMO3]

**Question: M02.05 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 M02.06, if Section 07.11, DIABETE4, is coded 2, 3, 4, 7, 9, or Missing; or Module 2.03, FEETCHK3, is coded 555*

Field Size: 2

Variable Name: [FEETCHK]

**Question: M02.06 About how many times in the past 12 months has a health professional checked your feet for any sores or irritations?**

1-76 = Number of times [76=76 or more]

88 = None

77 = Don't know/Not sure

99 = Refused

*Skip Question M02.07, if Section 07.11, DIABETE4, is coded 2, 3, 4, 7, 9, or Missing*

Field Size: 1

Variable Name: [EYEXAM1]

**Question: M02.07 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

8 = Never

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

*Skip Question M02.08, if Section 07.11, DIABETE4, is coded 2, 3, 4, 7, 9, or Missing*

Field Size: 1

Variable Name: [DIABEYE]

Question: M02.08 Has a doctor ever told you that diabetes has affected your eyes or that you had retinopathy?

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

*Skip Question M02.09, if Section 07.11, DIABETE4, is coded 2, 3, 4, 7, 9, or Missing*

Field Size: 1

Variable Name: [DIABEDU]

Question: M02.09 Have you ever taken a course or class in how to manage your diabetes yourself?

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

## Module 19: Caregiver

Inserted after Alaska State Added Section 5: Sugar Sweetened Beverages

Field Size: 1

Variable Name: [CAREGIV1]

Question: M19.01 During the past 30 days, did you provide regular care or assistance to a friend or family member who has a health problem or disability?

1 = Yes  
2 = No - *Go to Module 19.09 (Caregiver) CRGVEXPT*  
8 = Caregiving recipient died in past 30 days - *Go to next module*  
7 = Don't know/Not sure - *Go to Module 19.09 (Caregiver) CRGVEXPT*  
9 = Refused - *Go to Module 19.09 (Caregiver) CRGVEXPT*

*Skip Question M19.02, if Module 19.01, CAREGIV1, is coded 2, 8, 7 or 9*

Field Size: 2

Variable Name: [CRGVREL4]

Question: M19.02 What is his or her relationship to you?

01 = Mother

02 = Father  
03 = Mother-in-law  
04 = Father-in-law  
05 = Child  
06 = Husband  
07 = Wife  
08 = Live-in partner  
09 = Brother or brother-in-law  
10 = Sister or sister-in-law  
11 = Grandmother  
12 = Grandfather  
13 = Grandchild  
14 = Other relative  
15 = Non-relative/Family friend  
77 = Don't know/Not sure  
99 = Refused

*Skip Question M19.03, if Module 19.01, CAREGIV1, is coded 2, 8, 7 or 9*

Field Size: 1

Variable Name: [CRGVLNG1]

**Question: M19.03 For how long have you provided care for that person?**

1 = Less than 30 days  
2 = 1 month to less than 6 months  
3 = 6 months to less than 2 years  
4 = 2 years to less than 5 years  
5 = 5 or more years  
7 = Don't know/Not sure  
9 = Refused

*Skip Question M19.04, if Module 19.01, CAREGIV1, is coded 2, 8, 7 or 9*

Field Size: 1

Variable Name: [CRGVHRS1]

**Question: M19.04 In an average week, how many hours do you provide care or assistance?**

1 = Up to 8 hours per week  
2 = 9 to 19 hours per week  
3 = 20 to 39 hours per week  
4 = 40 hours or more  
7 = Don't know/Not sure  
9 = Refused

*Skip Question M19.05, if Module 19.01, CAREGIV1, is coded 2, 8, 7 or 9*

Field Size: 2

Variable Name: [CRGVPRB3]

**Question: M19.05** What is the main health problem, long-term illness, or disability that the person you care for has?

- 1 = Arthritis/ rheumatism
- 2 = Asthma
- 3 = Cancer
- 4 = Chronic respiratory conditions such as emphysema or COPD
- 5 = Alzheimer's disease, dementia or other cognitive impairment disorder - [Go to Module 19.07 \(Caregiver\) CRGVPER1](#)
- 6 = Developmental disabilities such as autism, Down's Syndrome, and spina bifida
- 7 = Diabetes
- 8 = Heart disease, hypertension, stroke
- 9 = Human Immunodeficiency Virus Infection (H.I.V.)
- 10 = Mental illnesses, such as anxiety, depression, or schizophrenia
- 11 = Other organ failure or diseases such as kidney or liver problems
- 12 = Substance abuse or addiction disorders
- 13 = Injuries, including broken bones
- 14 = Old age/ infirmity/frailty
- 15 = Other
- 77 = Don't know/Not sure
- 99 = Refused

*Skip Question M19.06, if Module 19.01, CAREGIV1, is coded 2, 8, 7 or 9; or Module 19.05, CRGVPRB3, is coded 5*

Field Size: 1

Variable Name: [CRGVALZD]

**Question: M19.06** Does the person you care for also have Alzheimer's disease, dementia, or other cognitive impairment disorder?

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

*Skip Question M19.07, if Module 19.01, CAREGIV1, is coded 2, 8, 7 or 9*

Field Size: 1

Variable Name: [CRGVPER1]

**Question: M19.07** In the past 30 days, did you provide care for this person by managing personal care such as giving medications, feeding, dressing, or bathing?

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

*Skip Question M19.08, if Module 19.01, CAREGIV1, is coded 2, 8, 7 or 9*

Field Size: 1

Variable Name: [CRGVHOU1]

Question: M19.08 In the past 30 days, did you provide care for this person by managing household tasks such as cleaning, managing money, or preparing meals?

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

*Skip Question M19.09, if Module 19.01, CAREGIV1, is coded 1 or 8*

Field Size: 1

Variable Name: [CRGVEXPT]

Question: M19.09 In the next 2 years, do you expect to provide care or assistance to a friend or family member who has a health problem or disability?

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

## Module 21: Marijuana Use

Inserted after Module 19: Caregiver

Field Size: 2

Variable Name: [MARIJANI]

Question: M21.01 During the past 30 days, on how many days did you use marijuana or cannabis?

- 1-30 = Number of Days
- 88 = None - *Go to next module*
- 77 = Don't know/Not sure - *Go to next module*
- 99 = Refused - *Go to next module*

*Skip Question M21.02, if Module 21.01, MARIJANI, is coded 77, 88, 99 or Missing*

Field Size: 1

Variable Name: [USEMRJN3]

Question: M21.02 During the past 30 days, which one of the following ways did you use marijuana the most often? Did you usually...

Please select one. Did you...

- 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 a dabbing rig, knife, or dab pen)
- 6 = Use it some other way

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

*Skip Question M21.03, if Module 21.01, MARIJAN1, is coded 77, 88, 99 or Missing*

Field Size: 1

Variable Name: [RSNMRJN2]

Question: M21.03 When you used marijuana or cannabis during the past 30 days, was it usually:

1 = For medical reasons  
2 = For non-medical reasons  
3 = For both medical and non-medical reasons  
7 = Don't know/Not sure  
9 = Refused

## Module 23: Firearm Safety

Inserted after Module 21: Marijuana Use

Field Size: 1

Variable Name: [FIREARM5]

Question: M23.01 Are any firearms now kept in or around your home?

1 = Yes  
2 = No - *Go to Next Module*  
7 = Don't know/Not sure - *Go to Next Module*  
9 = Refused - *Go to Next Module*

*Skip Question M23.02, if Module 23.01, FIREARM5, is coded 2, 7, 9, or Missing*

Field Size: 1

Variable Name: [GUNLOAD]

Question: M23.02 Are any of these firearms now loaded?

1 = Yes  
2 = No - *Go to Next Module*  
7 = Don't know/Not sure - *Go to Next Module*  
9 = Refused - *Go to Next Module*

*Skip Question M23.03, if Module 23.01, FIREARM5, is coded 2, 7, 9, or Missing;  
or Module 23.02, GUNLOAD, is coded 2, 7, 9, or Missing*

Field Size: 1

Variable Name: [LOADULK2]

Question: M23.03 Are any of these loaded firearms also unlocked?

INTERVIEWER NOTE: By "unlocked" we mean you do not need a key or a combination to get the gun or to fire it. We don't count a safety as a lock.

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

9 = Refused

## Module 28: Sexual Orientation and Gender Identity (SOGI)

Inserted after Section 9: Demographics

*Skip Question M28.01a, if respondent sex, SEXVAR, is coded 2*

Field Size: 1

Variable Name: [SOMALE]

**Question: M28.01a** 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 M28.01b, if respondent sex, SEXVAR, is coded 1*

Field Size: 1

Variable Name: [SOFEMALE]

**Question: M28.01b** 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

[TRNSGNDR]

**Question: M28.02** 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

# Alaska State Added Questions

## State Added Section 1: Provider Ask About Desire for Pregnancy

Inserted in Section 3 after 03.04: Healthcare Access

*Skip Question AK01.01, if SEXVAR is coded 1; or Section 09.01 > 44; or Section 03.04 is coded 2, 3, 4, 7, 8, 9, or Missing*

Field Size: 1

Variable Name: [ASKPREG]

Question: AK01.01 During that visit, did a doctor, nurse, or other health professional ask you if you wanted to become pregnant in the coming year?

1 = Yes

2 = No

7 = Don't know/Not sure

9 = Refused

*Skip Question AK01.02, if Section 03.04 is coded 1. If Section 03.04 is coded 1, autofill AK01.02 as 1.*

Field Size: 1

Variable Name: [GETCARE]

Question: AK01.02 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

## State Added Section 2: Expanded Education Categories

Extra categories inserted in Section 9: Demographics

Field Size: 1

Variable Name: [EDUCA\_AK]

Question: AK02.01 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?"

Alaska obtained approval to expand answer options for this core CDC question.

1 = Never attended school or only kindergarten

2 = Grades 1 through 8 (Elementary)

3 = Grades 9 through 11 (Some high school)

4 = Grade 12 (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 equivalance diploma)

8 = Home-schooled with diploma or correspondence school

9 = Refused



## State Added Section 3: Expanded Income Categories

Extra categories inserted in Section 9: 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

## State Added Section 4: Tobacco

Inserted in Section 11: Tobacco Use

*Skip Question AK04.01, if Section 11.02 is coded 1, 2, 7, 9, or Missing*

Field Size: 2

Variable Name: [LASTSMK4]

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

- 1 = Within the past 24 hours
- 2 = At least 24 hours ago but less than 7 days ago
- 3 = At least 7 days ago but less than 30 days ago
- 4 = At least 30 days ago but less than 3 months ago
- 5 = At least 3 months but less than 6 months ago
- 6 = At least 6 months but less than one year ago
- 7 = About 1 year ago
- 8 = More than a year ago but less than 2 years ago
- 9 = At least 2 years but less than 5 years ago
- 10 = At least 5 years but less than 10 years ago
- 11 = 10 years or more
- 77 = Don't know/Not sure
- 99 = Refused

*Skip Question AK04.02, if Section 11.02 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 11.02 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

*Skip Question AK04.04a, if Section 11.03 is coded 3, 7, 9, or Missing*

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

*Skip Question AK04.04b, if Section 11.03 is coded 3, 7, 9, or Missing*

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

*Skip Question AK04.04c, if Section 11.03 is coded 3, 7, 9, or Missing*

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

*Skip Question AK04.04d, if Section 11.03 is coded 3, 7, 9, or Missing*

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

Field Size: 1

Variable Name: [ECIGARET]

**Question: AK04.05 Have you ever used an e-cigarette or other electronic vaping product even just one time in your entire life?**

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. Brands you may have heard of are JUUL, NJOY, or blu.

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

**State Added Section 5: Sugar Sweetened Beverages**

Inserted after Section 15: Fruits and Vegetables

Field Size: 3

Variable Name: [SSBSUGR2]

**Question: AK05.01 During the past 30 days, how often did you drink regular soda or pop that contains sugar? Do not include diet soda or diet pop.**

- 1\_\_ = Times per day (range: 101-199)
- 2\_\_ = Times per week (range: 201-299)
- 3\_\_ = Times per month (range: 301-399)
- 888 = Never
- 777 = Don't know/Not sure
- 999 = Refused

Field Size: 3

Variable Name: [SSBFRUT3]

Question: AK05.02 During the past 30 days, how often did you drink sugar-sweetened fruit drinks (such as Kool-aid™ and lemonade), sweet tea, and sports or energy drinks (such as Gatorade™ and Red Bull™)? Do not include 100% fruit juice, diet drinks, or artificially sweetened drinks.

1\_\_ = Times per day (range: 101-199)

2\_\_ = Times per week (range: 201-299)

3\_\_ = Times per month (range: 301-399)

888 = Never

777 = Don't know/Not sure

999 = Refused

## State Added Section 6: Colorectal Cancer Screening

Inserted at the end of the survey after Module 23: Firearm Safety

*Skip Question AK06.01, if Section 09.01, AGE, is less than 45*

Field Size: 1

Variable Name: [HADSIGM4]

AK06.01 Colonoscopy and sigmoidoscopy are exams to check for colon cancer. Have you ever had either of these exams?

1 = Yes

2 = No

7 = Don't know/Not sure

9 = Refused

*Skip Question AK06.02, if Section 09.01, AGE, is less than 45*

Field Size: 1

Variable Name: [COLNCNCR]

AK06.02 Have you ever had any other kind of test for colorectal cancer, such as virtual colonoscopy, CT colonography, blood stool test, FIT DNA, or Cologuard test?

1 = Yes

2 = No

7 = Don't know/Not sure

9 = Refused