About the Cleveland Steps Behavioral Risk Factor Surveillance Survey

As part of the evaluation plan for the Steps to a Healthier Cleveland (Steps) initiative, Cleveland adults are surveyed annually and asked a broad range of questions regarding their experiences with chronic diseases and related risk and health behaviors, as well as their thoughts and feelings about the city of Cleveland and awareness and use of local resources.

The survey instrument, known as the Cleveland Steps Behavioral Risk Factor Surveillance Survey (Steps-BRFSS), is an adaptation of the Behavioral Risk Factor Surveillance System (BRFSS) administered annually by each state. Established in 1984 by the Centers for Disease Control and Prevention (CDC), the BRFSS is a comprehensive health behavior survey that allows for the collection of standardized and detailed information on various health indicators. The state-level system results in the availability of state-to-state comparison data and the compilation of national estimates.

Comprised of standard core and optional module questions prepared yearly by the CDC, the BRFSS can be tailored with added indicators to address local concerns. The Steps-BRFSS has been expanded to include comprehensive local measures of asthma, diabetes, obesity, physical activity, nutrition, and tobacco use, as well as knowledge about healthy behaviors, awareness and use of local resources, and local social marketing.

About Steps to a Healthier Cleveland

Under the direction of the Cleveland Department of Public Health, Steps to a Healthier Cleveland is a city-wide program designed to engage Clevelanders to live longer, better, and healthier lives. A part of the U.S. Department of Health and Human Service’s Steps to a HealthierUS (5-year) Cooperative Agreement, the local program is one of 40 funded communities nationwide implementing chronic disease prevention and health promotion efforts. The aim of this initiative is to reduce the prevalence and burden of asthma, diabetes, and obesity, and to address the three related risk factors of physical inactivity, poor nutrition, and tobacco use.

Local Steps efforts consist of providing information, resources, support, and services to schools, worksites, healthcare providers, community healthcare workers, and neighborhoods, with the assistance of various contracted community partners. Specific activities include worksite wellness programs, neighborhood improvements and mapping of resources, healthcare provider and community healthcare worker trainings, preventive screenings, providing safer walking and biking routes, urban and community gardening support and enhancement, and efforts toward food security.

In order to help inform the direction of Steps programmatic efforts and to evaluate their effectiveness, the Center for Health Promotion Research at Case Western Reserve University is responsible for managing the collection of local data via the Steps-BRFSS.
Steps-BRFSS Methodology

The Steps-BRFSS is a point-in-time survey conducted via telephone interviews of randomly selected adults aged 18 years and older from randomly sampled, telephone-equipped city of Cleveland households. A representative of the CDC is responsible for sample selection via telephone exchanges, while survey administration is completed by trained researchers at ORC Macro International, Inc., a nationally recognized Opinion Research Corporation Company experienced in state BRFSS administration.

The Steps-BRFSS is generally implemented over a seven to eight week period between the months of July and October. The average interview completion time is 25 minutes, and the overall response rate for all phone numbers called ranges between 26% and 29%.

A total of 2,657 Cleveland adults were surveyed between 2005 and 2006. All participants’ answers were aggregated and weighted to correct for unequal probabilities of selection into the sample, differential non-response rates, and differential coverage rates. The data were then expanded based on Census population figures so that the sample responses approximate population estimates and represent all Cleveland adults.

All sample selection, survey administration, and weighting procedures are consistent with CDC-established protocols. After survey administration, a final dataset is delivered to researchers at the Center for Health Promotion Research for dataset cleaning, coding, and analysis.

<table>
<thead>
<tr>
<th>Steps-BRFSS Administration Data</th>
<th>2005</th>
<th>2006</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Survey Date</strong></td>
<td>Aug 19 - Oct 9</td>
<td>July 6 - Aug 29</td>
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<tr>
<td><strong>Average Interview Time</strong></td>
<td>25 minutes</td>
<td>25 minutes</td>
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<tr>
<td><strong>Unweighted Sample Size</strong></td>
<td>1,154</td>
<td>1,503</td>
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<tr>
<td><strong>Overall Response Rate</strong></td>
<td>26.4%</td>
<td>29.3%</td>
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<td>(for all phone numbers called)</td>
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<tr>
<td><strong>Cooperation Rate</strong></td>
<td>58.6%</td>
<td>70.4%</td>
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<td>(among all eligible households)</td>
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</tbody>
</table>

Weighted Sample Description 2005-2006

- **Gender**
  - Female ....................................................... 53%
  - Male ........................................................... 47%

- **Race-Ethnicity**
  - White .......................................................... 40%
  - Black .......................................................... 51%
  - Hispanic ....................................................... 7%
  - Other ........................................................... 3%

- **Age**
  - 18-24 years old ........................................... 13%
  - 25-34 years old ........................................... 19%
  - 35-44 years old ........................................... 21%
  - 45-54 years old ........................................... 21%
  - 55-64 years old ........................................... 12%
  - 65 years old and older ................................ 15%

- **Education**
  - Less than high school ..................................... 18%
  - High school graduate ..................................... 41%
  - Some college ............................................... 26%
  - College graduate or more ................................ 16%

- **Employment**
  - Working ...................................................... 55%
  - Not employed ............................................... 10%
  - Unable to work ............................................. 9%
  - Student ...................................................... 5%
  - Homemaker ................................................... 5%
  - Retired ....................................................... 15%

- **Household Income**
  - <$15K ......................................................... 24%
  - $15-24K ....................................................... 26%
  - $25-49K ....................................................... 30%
  - $50-74K ....................................................... 12%
  - $75K+ ........................................................... 8%

- **Children (under 18) living in the home?**
  - Yes .............................................................. 42%
  - No .............................................................. 59%

- **Have health care coverage?**
  - Yes .............................................................. 80%
  - No .............................................................. 20%
This methodology document is supplementary to the following Cleveland Steps data briefs released in March 2008:

- Tobacco Use in Cleveland
- Diabetes in Cleveland
- Asthma in Cleveland
- Obesity in Cleveland

The four-brief series highlights baseline information released from the 2005-2006 Steps-BRFSS data on each of the Steps target aims. Though variable definitions are provided within each data brief, the following descriptions provide additional information about other important variables used in each of the specific data briefs.

### Diabetes in Cleveland
- Diabetic - Has ever been diagnosed with diabetes, excluding gestational, pre-diabetes, and borderline diabetes
- No/insufficient physical activity - Does not engage in any physical activity at all OR does not engage in enough moderate physical activity (at least 30 minutes 5 days a week) or vigorous physical activity (at least 20 minutes 3 days a week)
- Inadequate fruit and vegetable consumption - Does not eat at least 5 fruits and vegetable a day
- Current smoker - Has smoked at least 100 cigarettes in lifetime and currently smokes every day or some days
- Former smoker - Has smoked at least 100 cigarettes in lifetime but is not currently smoking
- Obese - Has a Body Mass Index (BMI) of 30 or above as calculated from self-reported weight and height

### Asthma in Cleveland
- Asthmatic - Has ever been diagnosed with asthma and still currently has asthma
- Current smoker - Has smoked at least 100 cigarettes in lifetime and currently smokes every day or some days
- Former smoker - Has smoked at least 100 cigarettes in lifetime but is not currently smoking
- No/insufficient physical activity - Does not engage in any physical activity at all OR does not engage in enough moderate physical activity (at least 30 minutes 5 days a week) or vigorous physical activity (at least 20 minutes 3 days a week)
- Obese - Has a Body Mass Index (BMI) of 30 or above as calculated from self-reported weight and height

### Obesity in Cleveland
- BMI - A number calculated from an individual’s weight and height that serves as an indicator of body fatness
- Obese - Has a Body Mass Index (BMI) of 30 or above as calculated from self-reported weight and height
- Overweight - Has a Body Mass Index (BMI) between 25 and 29.9 as calculated from self-reported weight and height
- Neither overweight/obese - Has a Body Mass Index (BMI) below 25 as calculated from self-reported weight and height
- Not obese - Has a Body Mass Index (BMI) below 30 as calculated from self-reported weight and height
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