NATIONAL ASSOCIATION OF
CHRONIC DISEASE DIRECTORS
Promoting Health. Preventing Disease.

Advancing Arthritis Public Health Priorities through National Organizations TA/Peer Sharing Webinar Series
May 10, 2022 @ 2:00 p.m. ET
SPECIAL TOPIC WEBINAR -- BRFSS Statistical Brief: Arthritis Module

Webinar Notes and Resources
- Materials available on the Action on Arthritis website: https://actiononarthritis.chronicdisease.org/monthly-webinars/
- Meeting Recording: https://vimeo.com/825610466

Speakers
- Michael Boring, MS, Statistician, Arthritis Program Epidemiology and Applied Research Team, and a Contractor with ASRT Inc. working with the CDC Healthy Aging Branch

Participants
- 36 total participants
  - 9 states (IA, KS, NY, OR, RI, UT, VA, WA, WV)
  - 5 national organizations (CDC, Sound Generations, NACDD, Arthritis Foundation, YMCA of the USA)

Webinar Objectives:
1. Educate participants about the BRFSS Arthritis Module and recently released BRFSS Statistical Brief on Arthritis
2. Provide a platform for questions on the BRFSS arthritis data, and opportunity to share tools and resources, and brainstorm opportunities for collaboration and sustainability

Audience Engagement
- Question: Do you recommend reporting by age adjusted prevalence or crude prevalence?
  Answer: There are benefits to both types of reporting. Crude gives the measure of how much arthritis is in your state where as age standardized is better for comparing data between states.
- Question: Any comments on the disappearance of walking data?
  Answer: While it is unfortunate that this was removed there are other physical activities you can pick up on. The question should be back in 2023 as it was moved into a rotating slot occurring every three years.
  The Survey can change from year to year. Each of the state BRFSS coordinators vote on questions so this is a reminder to be in touch with them about specific needs of your state programs.
- To help data speak to audiences when sample size may be low, there was a suggestion to combine various years of BRFSS data; the CDC PLACES data is a way to produce local estimates that might be helpful

- It is helpful to have the need for BRFSS data called out in cooperative agreements and grants; this helps state and local program coordinators advocate for the inclusion of disease specific questions; it also helps to allow grant/project funding go towards BRFSS questions
- In terms of what else can be done with BRFSS data, there is an opportunity to work with your BRFSS coordinator or epidemiologist to look at other questions on the survey that relate to arthritis (e.g., quality of life, comorbidities, etc.) and combine years for things like gender, socioeconomic status, etc.; you can also include programs partners (e.g., diabetes, heart disease and stroke, etc.) and look at comorbid conditions.
  - WA shared that they created an Excel spreadsheet that looks across indicators to see where program staff might have opportunities to work together; eventually this will be a part of a data dashboard (e.g., Tableau, PowerBI)
- Question: Has anyone used BRFSS to influence policy makers or obtain funding for disease specific activities, or even to fund additional BRFSS questions?
  Answer: WV worked with states regionally to create a report with data from BRFSS that helps to educate policy makers. UT shared that in addition to their annual report to provide updates on public health indicators, they map out data and display online for policy makers - Utah Healthy Places Index - https://dhhs.utah.gov/utahhpi/

Resources:
- The 2021 Behavioral Risk Factor Surveillance System (BRFSS) statistical brief is now available on the CDC Arthritis website. https://bit.ly/3p9fRkV
- BRFSS (https://www.cdc.gov/brfss/)is the nation's premier system of health-related telephone surveys that collect state data about US residents regarding their health-related risk behaviors, chronic health conditions, and use of preventive services. This brief provides guidance to BRFSS coordinators and researchers who would like to conduct analyses of arthritis-specific measures that have appeared in either the BRFSS Core Module or the optional Arthritis Module.
- Utah Arthritis Burden Report where BRFSS data was used to help direct program efforts – "A Community Health Approach to Arthritis in Utah: Engaging Patients in Self-Management Education and Physical Activity." https://healthyaging.utah.gov/data/
- CDC Chronic Disease Indicators – explore by location or by indicator https://www.cdc.gov/cdi/index.html
- BRFSS State Coordinators - https://www.cdc.gov/brfss/state_info/coordinators.htm
- Link to CDC PLACES data site - https://www.cdc.gov/places/index.html
  - https://www.cdc.gov/places/about/pdfs/places-one-page-fact-sheet-508.pdf

Evaluation:
- **Poll Question**: I gained skills related to my organization's ability to use BRFSS data to advance arthritis public health approaches.
  - 100% Strongly Agree or Agree

- **Poll Question**: Please provide additional information on the specific skills that you gained because of attending todays webinar. (Select multiple options)
    - 65% - Knowledge about tools that can be used to advance our work
    - 59% - New ideas/ways of thinking about my programs current approach to increase arthritis public health strategies
    - 18% - New partners to engage with to address arthritis
    - 18% - Strategies to sustain arthritis efforts
    - 0% - Other