

**Utah****Defining Barriers and Improving Health Communication Messages using BRFSS State-Added Questions****Public Health Problem**

Cancer is the second leading cause of death in Utah. Since 1995, the Utah Cancer Control Program (UCCP) has included an open-ended, state-added mammography question in Utah's BRFSS survey. The question is used to assess reasons why women have never had a mammogram or have not had one in the last two years. Until 2006, women's responses that did not fit into pre-determined categories for these questions were classified as "Don't know/Not sure." As a result, the data did not present a clear picture, and program managers could not appropriately address all barriers to screening. Identifying and addressing real or perceived barriers could increase the number of women screened.

**Program Example**

In 2006, the UCCP added an open-ended response category "other." If the respondent's answer to this question did not fit one of the pre-determined answers, the interviewer would select "other" and record verbatim responses. This allowed the program to assess the validity of the pre-determined categories and to recode survey responses, as necessary. In August 2006, the UCCP began reviewing January 2006-August 2006 open-ended responses in the "other" category to determine common patterns and assess if recoding was necessary. After extensive review, the UCCP added four additional responses to the pre-determined categories.

**Implication and Impact**

In 2004, prior to the classification "other," 30% of responses were classified as "Don't know/Not sure." Preliminary 2006 BRFSS data (prior to the recoding) indicate that 39% of responses to the question were classified as "other" and 6% were classified as "Don't know/Not sure." The four new response categories were created, reducing the category "other" to 5%. The UCCP utilizes the data to determine and improve strategies and messaging used by the program to educate women aged 40 years and older about breast cancer screening. Collection and use of accurate public health data is vital to the development and delivery of health messages to the public. Including "other" as a response category and recoding the open-ended responses increased the size of the sample that could be analyzed. Increasing the sample size benefits the program by providing more complete information on barriers and demographic characteristics of the respondents.