National Center for Health Statistics





NONRESPONSE BIAS ANALYSES FOR THE REDESIGNED NATIONAL HEALTH INTERVIEW SURVEY

Stephen Blumberg, PhD

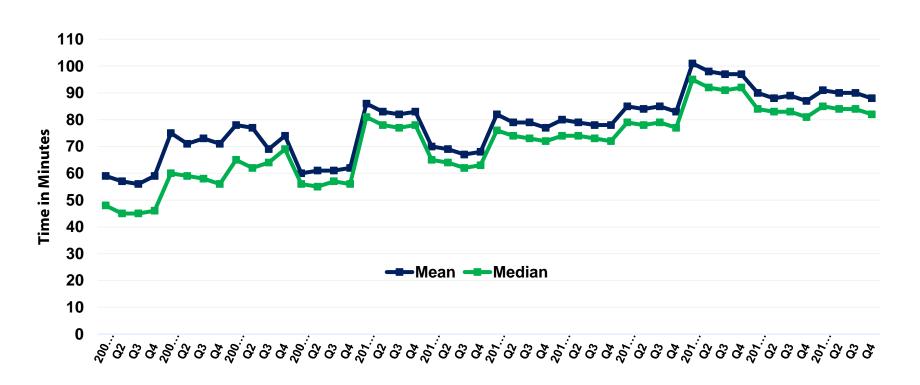
Director, Division of Health Interview Statistics

NCHS Board of Scientific Counselors Meeting September 5, 2019

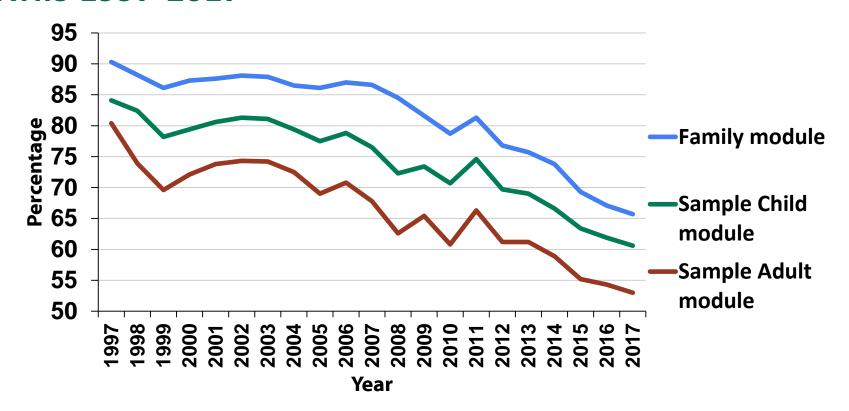
Why Did We Redesign the Questionnaire?

- Most recent major content redesign was 1997
- Respondent burden increasing and response rates decreasing

Length of Completed Interviews, by Quarter: NHIS, 2006, Q1 -- 2018, Q4 (October)



NHIS Family, Child, and Adult Response Rates, NHIS 1997-2017



Goals of the 2019 Questionnaire Redesign

- Improve the relevance of covered health topics, better meeting the needs of the Department of Health and Human Services and other data users
- Harmonize overlapping content with other federal heath surveys
- Reduce respondent burden and improve data quality
- Shorten questionnaire and reduce variation in interview times
- Eliminate or reduce content better covered by other methods

Annual Content Plan 2019-2027

Annual core

- Key measures
- Sociodemographics

Rotating core

- Newer topic areas
- Expanded detail
- Varying periodicity

Sponsored supplements

- "Sustaining" sponsors
- 1- or 2-year modules
- 5 min or less

One adult and one child randomly selected from each household

- Demographics for all HH members
- Family info collected from sample adult and parent of sample child

| Household Roster - Selection of Sample Adult - Informed Consent Chronic Conditions: Hypertension; High Cholesterol; Cardiovascular Conditions; Ashtma; Cancer; Diabetes; Other Chronic Conditions; Functioning and Disability: Vision; Hearing; Mobility; Communication; Cognition; Self-Care and Upper Body Limitations; Anxiety; Depression; Health Insurance: Coverage Status; Sources of Coverage; Characteristics of Coverage; Continuity of Coverage; Reasons for No He Health Care Access and Use: Primary and Urgent Care; Financial Barriers to Care; Prescription Medication; Flu and Pneumonia Immu. Health-Related Behaviors: Cigarettes and E-cigarettes Demographics: Marital Status; Sexual Orientation; Veterans Status; Nativity; Schooling; Employment; Family Income; Food-Related Progrately Cheroservices Service Utilization: Dental Care; Mental Health Care; Other Services Mental Health Assessment Injuries Allegies and Other Conditions Psychological Distress Mental Health Assessment Injuries Injuries Chronic Pain: Severity and Severity | n; Social Functioning Health Insurance | | |
|--|--|--|--|
| Hypertension; High Cholesterol; Cardiovascular Conditions; Asthma; Cancer; Diabetes; Other Chronic Conditions; Functioning and Disability: Vision; Hearing; Mobility; Communication; Cognition; Self-Care and Upper Body Limitations; Anxiety; Depression; Health Insurance: Coverage Status; Sources of Coverage; Characteristics of Coverage; Continuity of Coverage; Reasons for No He Health Care Access and Use: Primary and Urgent Care; Financial Barriers to Care; Prescription Medication; Flu and Pneumonia Immu. Health-Related Behaviors: Cigarettes and E-cigarettes Demographics: Marital Status; Sexual Orientation; Veterans Status; Nativity; Schooling; Employment; Family Income; Food-Related Progratelephone Use Service Utilization: Dental Care; Mental Health Care; Other Services Psychological Distress Industry and Occupation Mantal Health | n; Social Functioning Health Insurance | | |
| Functioning and Disability: Vision; Hearing; Mobility; Communication; Cognition; Self-Care and Upper Body Limitations; Anxiety; Depression; Health Insurance: Coverage Status; Sources of Coverage; Characteristics of Coverage; Continuity of Coverage; Reasons for No Health Care Access and Use: Primary and Urgent Care; Financial Barriers to Care; Prescription Medication; Flu and Pneumonia Immu. Health-Related Behaviors: Cigarettes and E-cigarettes Demographics: Marital Status; Sexual Orientation; Veterans Status; Nativity; Schooling; Employment; Family Income; Food-Related Programents Care; Mental Health Care; Other Services Psychological Distress Industry and Occupation Montal Health | n; Social Functioning Health Insurance | | |
| Vision; Hearing; Mobility; Communication; Cognition; Self-Care and Upper Body Limitations; Anxiety; Depression; Health Insurance: Coverage Status; Sources of Coverage; Characteristics of Coverage; Continuity of Coverage; Reasons for No Health Care Access and Use: Primary and Urgent Care; Financial Barriers to Care; Prescription Medication; Flu and Pneumonia Immu. Health-Related Behaviors: Cigarettes and E-cigarettes Demographics: Marital Status; Sexual Orientation; Veterans Status; Nativity; Schooling; Employment; Family Income; Food-Related Programents Care; Mental Health Care; Other Services Service Utilization: Dental Care; Mental Health Care; Other Services Industry and Occupation Mantal Health | Health Insurance | | |
| Coverage Status; Sources of Coverage; Characteristics of Coverage; Continuity of Coverage; Reasons for No He Health Care Access and Use: Primary and Urgent Care; Financial Barriers to Care; Prescription Medication; Flu and Pneumonia Immu. Health-Related Behaviors: Cigarettes and E-cigarettes Demographics: Marital Status; Sexual Orientation; Veterans Status; Nativity; Schooling; Employment; Family Income; Food-Related Programents Telephone Use Service Utilization: Dental Care; Mental Health Care; Other Services Other Services Industry and Occupation Montal Health Industry and Occupation Montal Health | nunization | | |
| Health-Related Behaviors: Cigarettes and E-cigarettes Demographics: Marital Status; Sexual Orientation; Veterans Status; Nativity; Schooling; Employment; Family Income; Food-Related Progrately Telephone Use Service Utilization: Dental Care; Mental Health Care; Other Services Psychological Distress Industry and Occupation Montal Health | nunization | | |
| Health-Related Behaviors: Cigarettes and E-cigarettes Demographics: Marital Status; Sexual Orientation; Veterans Status; Nativity; Schooling; Employment; Family Income; Food-Related Progrately Telephone Use Service Utilization: Dental Care; Mental Health Care; Other Services Other Service Industry and Occupation Montal Health Occupation Occup | | | |
| Health-Related Behaviors: Cigarettes and E-cigarettes Demographics: Marital Status; Sexual Orientation; Veterans Status; Nativity; Schooling; Employment; Family Income; Food-Related Progrately Telephone Use Service Utilization: Dental Care; Mental Health Care; Other Services Other Service Industry and Occupation Montal Health Occupation Occup | | | |
| Cigarettes and E-cigarettes Demographics: Marital Status; Sexual Orientation; Veterans Status; Nativity; Schooling; Employment; Family Income; Food-Related Programment; Family Income; Family Income; Food-Related Programment; Family Income; Family Income; Family Income; Family Income; Family Income; Family Income; Family | gram Participation; Housing; | | |
| Marital Status; Sexual Orientation; Veterans Status; Nativity; Schooling; Employment; Family Income; Food-Related Program Telephone Use Service Utilization: Dental Care; Mental Health Care; Other Services | gram Participation; Housing; | | |
| Service Utilization: Dental Care; Mental Health Care; Other Services Other Services Other Services Other Services Industry and Occupation Montal Health Telephone Use Allegies and Other Conditions Dental Care; Mental Health Care; Other Services Other Services Industry and Occupation Montal Health Montal Health Montal Health Montal Health | gram Participation; Housing; | | |
| Service Utilization: Dental Care; Mental Health Care; Other Services Industry and Occupation Montal Health Other Service Other Services Other Services Other Services Other Services Other Services Other Services Other Service Other Services Other Service | | | |
| Other Conditions Dental Care; Mental Health Care; Other Services Other Service Utilization: Other Conditions Other Co | Allegies and | | |
| Other Services Psychological Distress Other Services Psychological Distress Other Services Distress Distress Other Services Distress Di | zation: Other Conditions | | |
| Montal Health Industry and Occupation Montal Health Industry and Occupation Montal Health | vices Psychological | | |
| Mental Health Mental Health Mental Health | Distress | | |
| Assessment ¹ Assessment ¹ Assessment ¹ | Industry and Occupation | | |
| | . Laboratora | | |
| Injuries Injuries | Injuries | | |
| Chronic Pain: Health-Related Chronic Pain: | ealth-Related Chronic Pain: | | |
| Behaviors: Behaviors: Behaviors: Behaviors: | Behaviors: Severity and Impact; | | |
| | alking; Sleep; Locations | | |
| Consider Witten | Fatigue; Preventive | | |
| Screening Tests: and Cessation; Screening Tests: and Cessation; Screening Tests: and Cessation; Screening Tests: | nd Cessation; Screening Tests: | | |
| Aspirin Use Aspiri | Alcohol Use Aspirin Use | | |
| Sustaining sponsors* add content every year. Annual sponsored content will include cancer control and prevention (NCI and NCCDPHP), immunizations | | | |
| (NCIRD), non-cigarette tobacco product use (FDA), and food security (USDA). Other sponsors* add content in selected years. Anticipated sponsorships include expanded content on arthritis in 2019 (NCCDPHP and NIAMS), insulin | | | |
| | | | |
| New topics of growing interest may be added by NCHS, generally for one year. In 2019, the topics are prescription opioid use and pain management. | | | |

Impact on Response and Nonresponse

Average length of a household interview now less than 60 minutes

- Sample adult response rates are up by about 6 percentage points
- Nonresponse to the family interview is no longer a factor
- Less information available for nonresponse adjustments at the Sample Adult and Sample Child level

Current (Pre-Redesign) NHIS Weighting

- Weighting class adjustment approach to correct for nonresponse
 - Applied at the geographic area unit
- Ratio adjustment to independent population estimates
 - Applied by sex, age groups, and race/ethnicity groups
- Does not employ any nonresponse prediction or use any appended data that could provide correlates of nonresponse and nonresponse bias

NHIS Nonresponse Bias Analysis Goals

- Quantify nonresponse bias present in the redesigned NHIS
- Evaluate current NHIS weighting against other weighting methods
 - Focus on bias reduction in key health indicators
 - Take advantage of improvements in:
 - Auxiliary data and paradata
 - Machine learning methods and other advanced statistical models
- Obtain evidence for whether to implement a new weighting approach
- Contract awarded to ICF

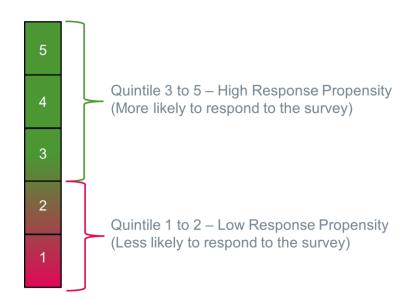


Stage 1: Nonresponse Bias Modeling

- Separate prediction models for household, adult and child response
- Data sources included:
 - Contact History Instrument, Neighborhood Observations Instrument
 - Census Planning Database, Area Health Resources Files
- Predictors selected based on:
 - Bivariate relationship with response in Q1/2019
 - Significant association with key health indicators
- Models selected based on performance metrics (AUC and Brier score)
 - Moved forward with best logistic model and machine learning model

Stage 2: Nonresponse Bias Estimates

- Propensity scores based on the models were divided into quintiles
- Estimates for key health indicators compared between two groups defined by response quintiles
- Significant difference indicates nonresponse bias



Stage 3: Development of Alternative Weights

- Explored modifications to the NHIS weighting procedures designed to reduce the potential for nonresponse bias
 - Adjusting for nonresponse by using predictive models for the response propensity
 - Calibrating to additional population estimates: education, employment, and MSA status (urban vs. non-urban)
- Assessed characteristics of the nonresponse adjustment weights and the final calibrated weights

Stage 4: Comparing Fully-Weighted NHIS Estimates

Considered point estimates and standard errors for 28 health indicators

| Health Construct | Adult or Child Sample | Inclusion Rationale | |
|--|-----------------------|--|--|
| | | | |
| Public health insurance | Adult & Child | Past/Future NHIS Early Release Indicator | |
| Private health insurance | Adult & Child | Past/Future NHIS Early Release Indicator | |
| Uninsured | Adult & Child | Past/Future NHIS Early Release Indicator | |
| Health Care Service Use | | | |
| Emergency dept. visit past year | Adult & Child | Future NHIS Early Release Indicator | |
| Doctor visit past year | Adult & Child | Future NHIS Early Release Indicator | |
| Influenza vaccination past year | Adult & Child | Past/Future NHIS Early Release Indicator | |
| Mental health counseling or therapy past year | Adult & Child | Future NHIS Early Release Indicator | |
| Health Status | | | |
| Disability | Adult & Child | Future NHIS Early Release Indicator | |
| Asthma episode, past year | Adult & Child | Past/Future NHIS Early Release Indicator | |
| Diagnosed Hypertension | Adult | Future NHIS Early Release Indicator | |
| Obese | Adult | Past NHIS Early Release Indicator | |
| Excellent or very good health | Adult & Child | Past NHIS Early Release Indicator | |
| ADHD | Child | Child Health Indicator with Relatively High Prevalence | |
| Health Care Access | | | |
| Usual source of care | Adult & Child | Past NHIS Early Release Indicator | |
| Skipped prescription med doses to save money past year | Adult | Future NHIS Early Release Indicator | |
| Health Behaviors | | | |
| Cigarette smoker | Adult | Past/Future NHIS Early Release Indicator | |
| Stressful Life Events | | | |
| Stressful life events | Child | New NHIS Content | |
| | | | |

Stage 5: Evaluating Tradeoffs

- Substantial reduction in nonresponse bias comes at a cost
 - Increased variance and design effects
 - Decreased effective sample size and reduced power
 - Increased complexity of application and replication
 - Reduced transparency in weighting process

How the BSC Can Help

Review the results

- What do the results suggest about the need for NCHS to implement a new weighting approach?
- Are the results sufficient to draw conclusions about the best weighting strategy?

Share your conclusions

- Given these results, what advice do you have regarding weighting?
- Are there additional analyses that we should conduct?
- How should the results of those new analyses guide NCHS decisionmaking regarding weighting?

For More Information About the Redesign

https://www.cdc.gov/nchs/nhis/2019_quest_redesign.htm