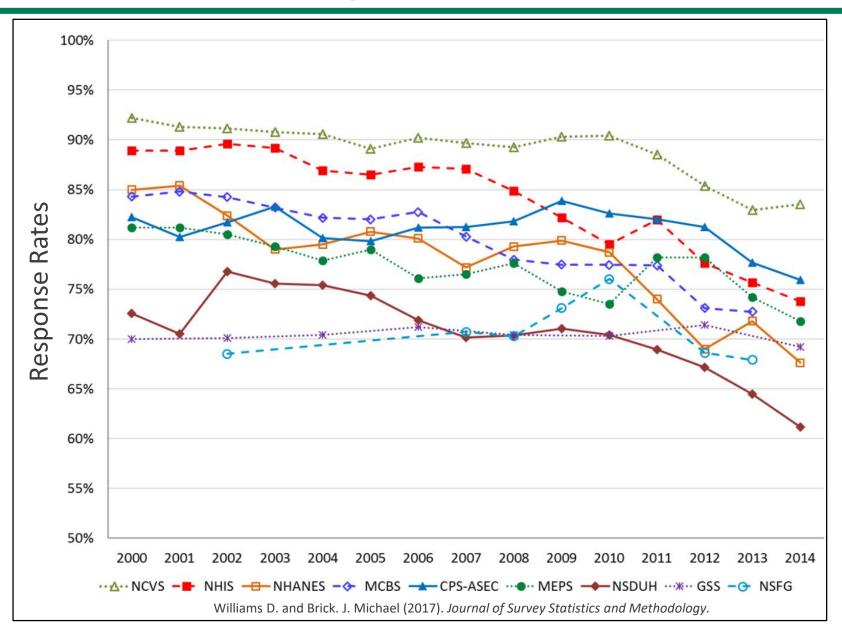
## Non-Response Bias in the National Health and Nutrition Examination Surveys

A Comparison of Cooperative Participants versus Late, Inaccessible, or Reluctant Participants

Tala Fakhouri PhD MPH
Te-Ching Chen PhD
Joseph Afful MS
Jennifer Parker PhD

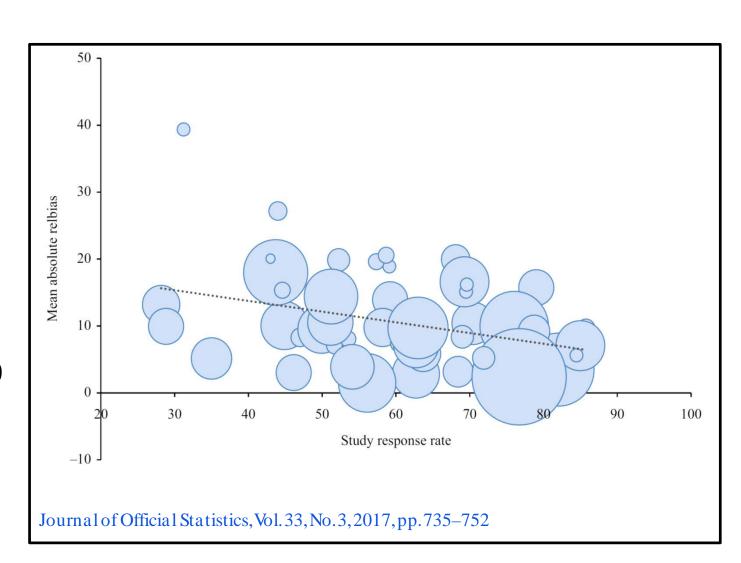
### Trends in US Face-to-Face Household Surveys: 2000 to 2014

- Response rates (RR) declined since 2000
- Driven by changes to the survey landscape
  - Political, physical, and communication
- Relationship between nonresponse and bias is complex
  - No known RR cutoff

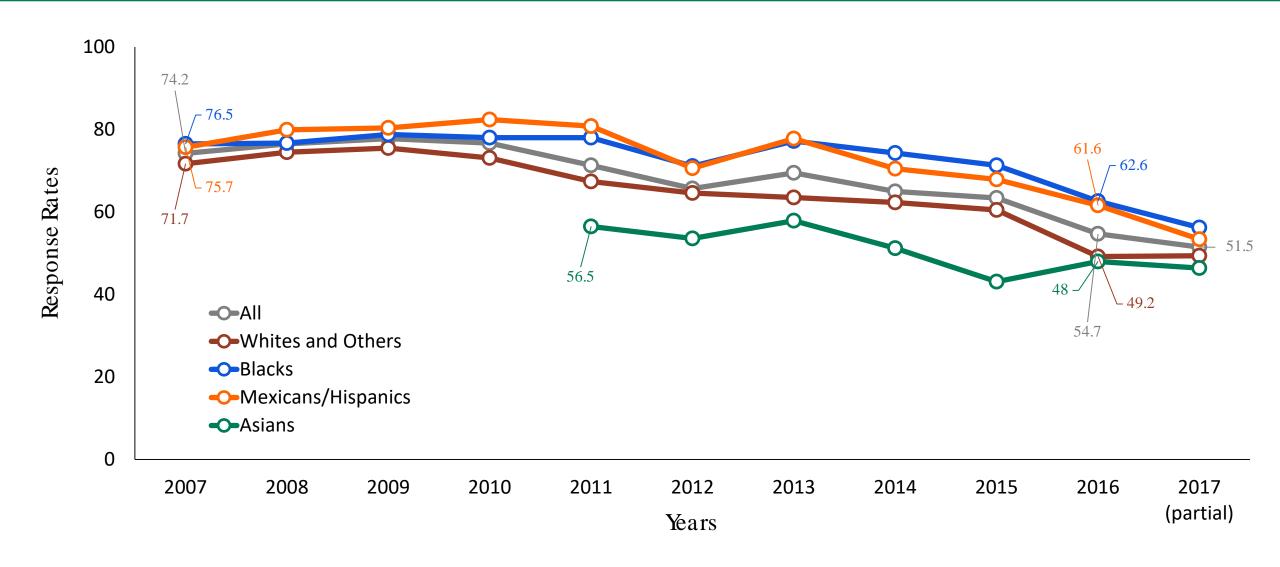


### Relationship between Nonresponse and Bias is Complex

- Increasing RR can help reduce the nonresponse bias on average across estimates within a study
- Image: relationship between mean absolute relative bias and RRs for 59 studies and 959 estimates



# Trends in Response Rates by Race and Hispanic Origin NHANES 2007 to 2017



### Approaches to Assess Nonresponse Bias (Groves 2006)

#### Five approaches:

- 1. RR comparisons across subgroups
- 2. Using sampling frame data or supplemental matched data
- 3. Comparisons to similar estimates from other sources
- 4. Contrasting alternative post-survey adjustments for nonresponse
- 5. Studying variations within existing survey
  - Estimates by quintiles of response propensities
  - "Continuum of resistance" studies

#### **Continuum of Resistance Model**

#### **Assumption:**

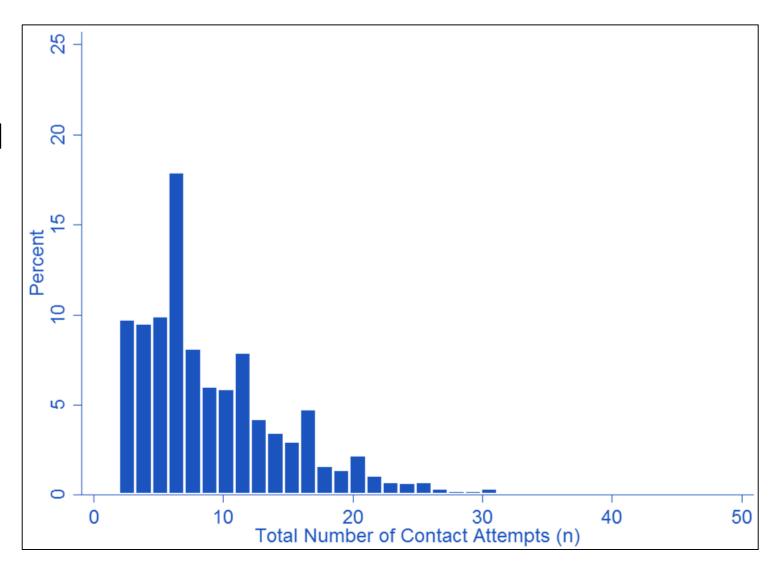
If non-respondents had responded, their survey estimates would be similar to late respondents

#### **Limitation:**

No direct information on non-respondents

### **Number of Contact Attempts: NHANES 2015 – 2016**

- Number of attempts to complete the screener and in-home interview
- Range: 2-49 attempts
- Tertiles of contact attempts:
  - 1 − 5 (early respondents)
  - 6 9
  - 10+ (late respondents)



# Differences in Household (HH) Characteristics by the Number of Contact Attempts: NHANES 2015 – 2016

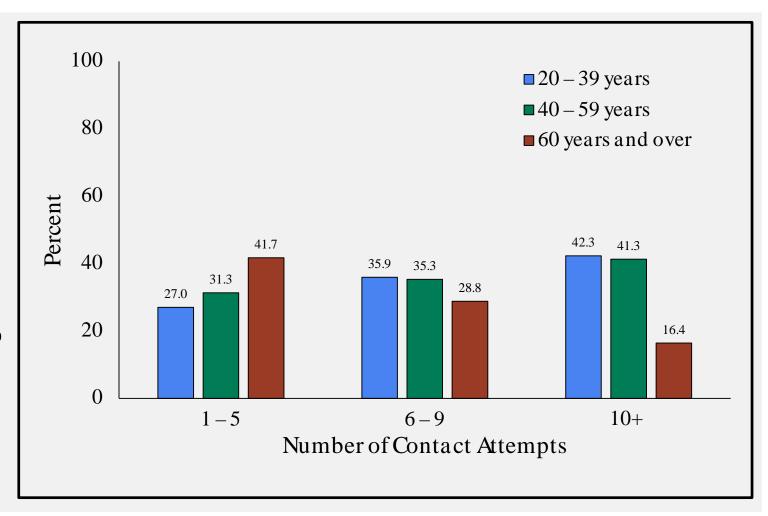
		Number of Contact Attempts			
Characteristics	Total	1–5	6-9	10+	<i>p</i> -value
Number of Sampled Persons (n)	9,950	2,757	3,240	3,953	
HH that Received a Refusal Letter (%)	5.9%	2.5%	5.4%	10.1%	<.0001
HH with Children (%)	50.1%	43.5%	51.0%	56.5%	<.0001
HH that Needed an Interpreter (%)	15.2%	10.6%	14.3%	21.2%	<.0001
HH with Spanish Language Requirement (%)	13.3%	10.0%	11.5%	18.6%	<.0001

# Differences in Demographics between Early *vs* Late Respondents

# Demographic Differences among Adults by the Number of Contact Attempts: NHANES 2015 – 2016

#### By Age:

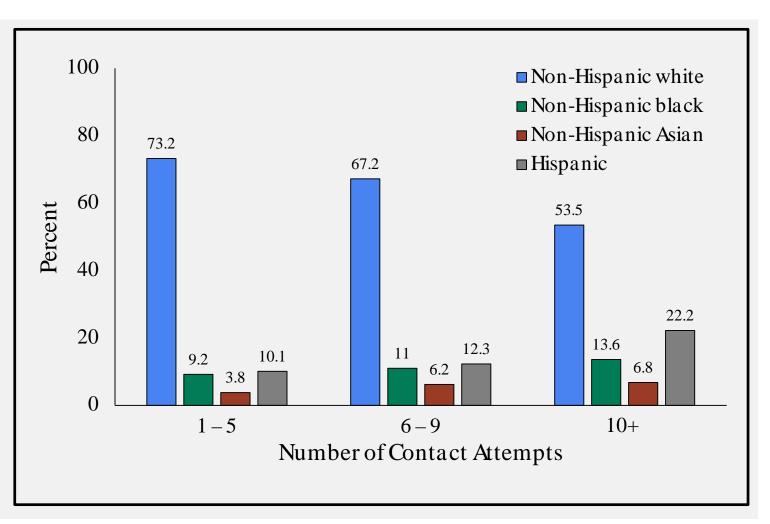
- Different distribution among early vs late respondents (p<0.05)</li>
- Among late respondents,
   42% were 20-39 years vs 16%
   were 60+ years.



# Demographic Differences among Adults by the Number of Contact Attempts: NHANES 2015 – 2016

# By Race and Hispanic Origin:

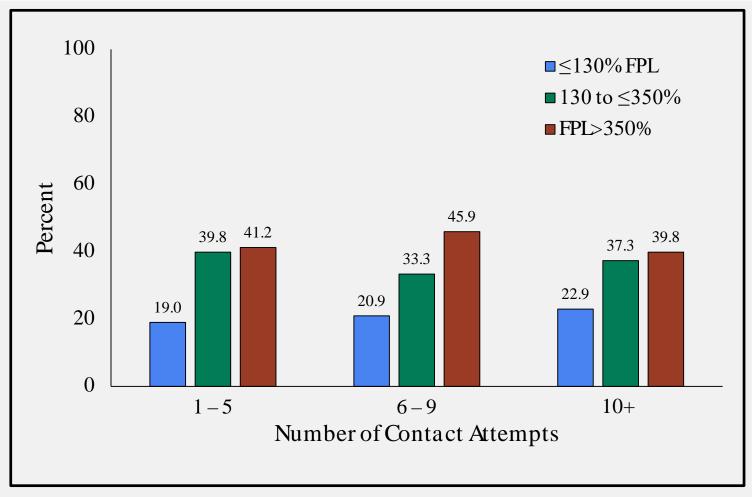
- Different distribution among early versus late respondents (p<0.05)</li>
- Similar findings for children



# Demographic Differences among Adults by the Number of Contact Attempts: NHANES 2015 – 2016

#### By Income:

 The distribution by income is not different.

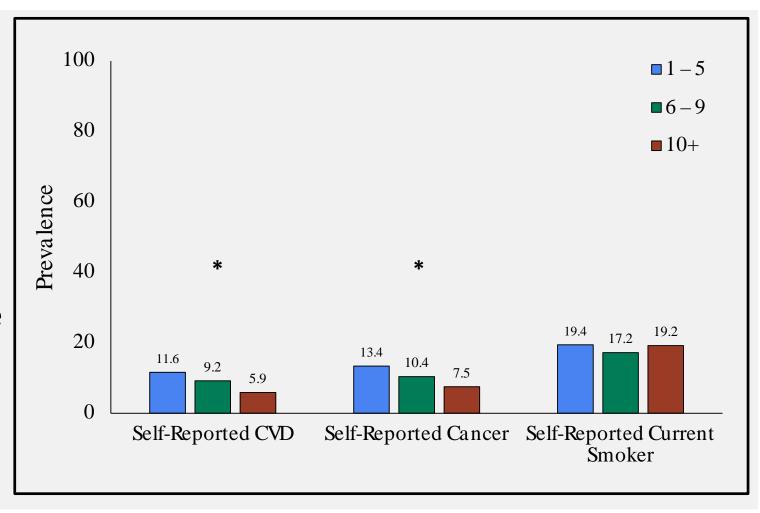


# Differences in Health Characteristics between Early vs Late Respondents

# Differences in Health Characteristics among Adults by the Number of Contact Attempts: NHANES 2015 – 2016

#### **Self-Reported Health:**

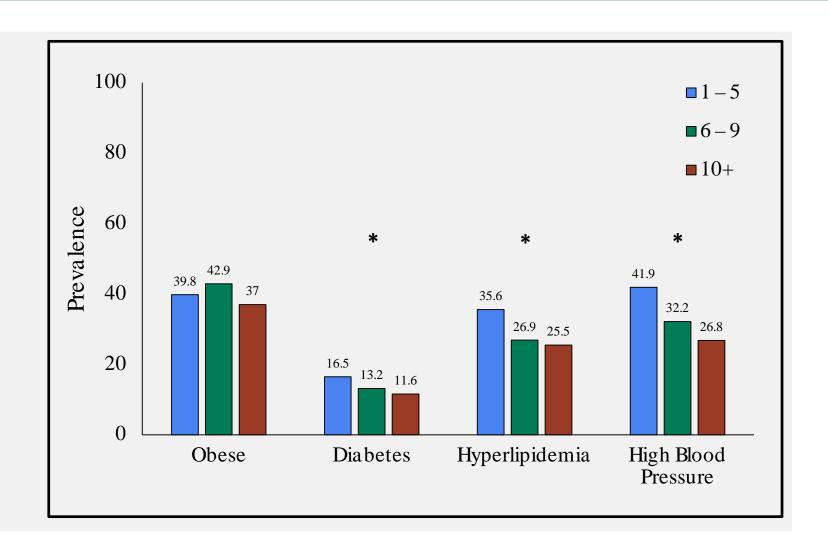
- Statistically significant differences (\*) except for smoking status
- Prevalence lower among late respondents



# Differences in Health Characteristics among Adults by the Number of Contact Attempts: NHANES 2015 – 2016

#### **Measured Health:**

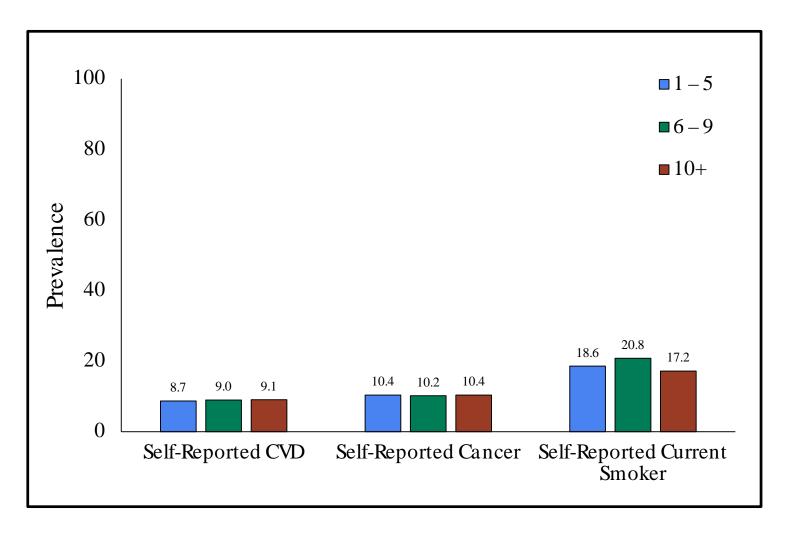
- Statistically significant differences (\*) except for obesity
- Prevalence lower among late respondents



### Most Differences Can be Explained by Age

# Self-Reported Health after Age Adjusting:

- Predicated Marginal Proportions in SUDAAN
- No statistically significant differences



### **Characteristics of Late Respondents**

(and maybe non-respondents?)

- Younger
- Non-Hispanic blacks and Hispanics
- HHs with children
- Healthier?

So, is our sample biased towards "less healthy" SPs?

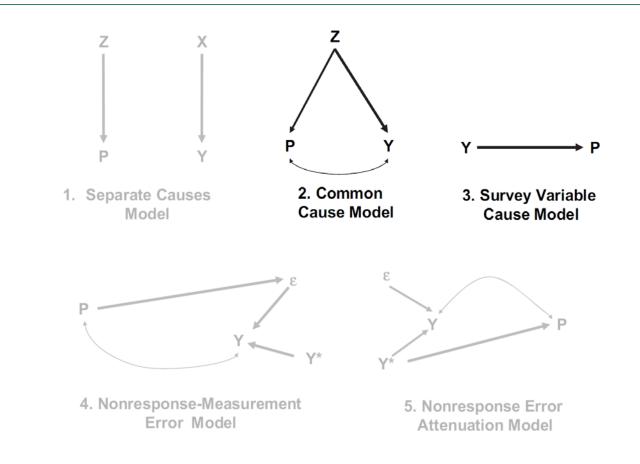
### Are NHANES participants "sicker" than NHIS participants?

	<u>NHANES</u>			<u>NHIS</u>		
	2001-2004	2011-2014		2001-2004	2011-2014	
Variable	Prevalence (SE)		Change (Δ)	Prevalence (SE)		Change (Δ)
Report of "Excellent" Health	21.5 (0.6)	15.5 (0.5)	-6.0	29.6 (0.2)	28.6 (0.2)	-1.0
Report of any Medical Condition	53.0 (0.8)	56.0 (0.8)	3.0	43.4 (0.2)	45.6 (0.2)	2.2

Significant differences between NHANES and NHIS at each time point are in **bold**.

## What's going on?

- Non-response on NHANES may be explained by the "common cause model" or the "survey variable cause model"
- Model 2: missing at random on certain observable conditions and can be adjusted
- Model 3: not missing at random



**Figure 1.** Five idealized causal models of response propensity (P), the reported survey variable (Y), the true value of the survey variable  $(Y^*)$  and other variables (X, Z) having different implications for nonresponse bias of the unadjusted respondent mean on the reported survey variable (Y).

### **Conclusions**

- NHANES response rates have declined over the past decade
- NHANES respondents more aware of their health status or sicker than non-respondents?
- Some NHANES estimates may be biased as assessed by certain analyses
- Extent of bias unknown and difficult to estimate

### **Limitations**

- We still don't have information on non-respondents
  - Follow-up studies? Non-response remains an issue for these studies
- Still unclear how to estimate the magnitude of the bias

### Questions to the BSC

- Use of level of effort data in weight adjustments?
- Use of health estimates in weight adjustments?
- Conduct a non-response follow-up study?
  - Or capture health information on the screener?
- How to report bias in estimates to NHANES users?
  - Different results using different evaluation techniques

# Thank you