

Report Three

# CHIS 2005 Methodology Series

Data Processing Procedures

# CALIFORNIA HEALTH INTERVIEW SURVEY

# **CHIS 2005 METHODOLOGY SERIES**

# **REPORT 3**

# **DATA PROCESSING PROCEDURES**

**April 2007** 

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www.chis.ucla.edu

This report describes the data processing and editing procedures for CHIS 2005 that were performed by Westat. It discusses standard data editing procedures and addresses the steps taken for ensuring data quality. It also presents discussions on special procedures of editing and coding of the geography, industry and occupation, and race and ethnicity survey items.

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#### **PREFACE**

Data Processing Procedures is the third report in a series of methodological reports describing the 2005 California Health Interview Survey (CHIS 2005). The other reports are listed below. This report describes the data processing procedures that took place at Westat. It does not include the additional processing procedures performed later by UCLA. Please check the CHIS website (www.chis.ucla.edu) for availability of reports on the data processing procedures at UCLA.

CHIS is a collaborative project of the University of California, Los Angeles (UCLA) Center for Health Policy Research, the California Department of Health Services, and the Public Health Institute. Westat was responsible for data collection and the preparation of five methodological reports from the 2005 survey. The survey examines public health and health care access issues in California. The telephone survey is the largest state health survey ever undertaken in the United States. The plan is to monitor these issues and examine changes over time by conducting surveys in the future.

#### **Methodological Reports**

The first five methodological reports for CHIS 2005 are as follows:

- Report 1: Sample Design;
- Report 2: Data Collection Methods;
- Report 3: Data Processing Procedures;
- Report 4: Response Rates; and
- Report 5: Weighting and Variance Estimation.

The reports are interrelated and contain many references to each other. For ease of presentation, the references are simply labeled by the report numbers given above.

This report describes the data processing and editing procedures for CHIS 2005. One chapter details the data editing procedures and addresses the steps taken for ensuring data quality. Delivery of the final data sets is also discussed. Another chapter presents information about the geographic and the industry and occupation coding. The next chapter describes how the race and ethnicity survey items were coded for CHIS.

# TABLE OF CONTENTS

<u>Chapter</u>		<u>Page</u>		
	PREFACE	i		
1	CHIS 2005 DESIGN AND METHODOLOGY SUMMARY	1-1		
	1.1 Overview			
	1.2 Sample Design Objectives	1-2		
	1.3 Data Collection	1-3		
	1.4 Response Rate	1-4		
	1.5 Weighting the Sample	1-9		
	1.6 Imputation Methods	1-10		
	1.7 Methodology Report Series	1-11		
2	DATA EDITING PROCEDURES	2-1		
	2.1 Resolving Problem Cases	2-2		
	2.2 Interviewer Comments			
	2.3 Coding with Text Strings	2-6		
	2.4 Verifying Data Updates			
	2.5 Data Conversion and Delivery			
3	GEOGRAPHIC AND INDUSTRY AND OCCUPATION CODING	3-1		
	3.1 Geographic Coding			
	3.1.1 School Name and Geographic Coding	3-10		
	3.2 Industry and Occupation Coding	3-11		
4	RACE AND ETHNICITY CODING	4-1		
	4.1 Coding Procedures	4-2		
	List of Tables			
<u>Table</u>		Page		
1-1	California county and county group strata used in the CHIS 2005 sample	1.0		
	design			
1-2	Number of completed CHIS 2005 interviews by type of sample, instrument			
1-3	CHIS 2005 Survey topic areas by instrument			

# TABLE OF CONTENTS

# List of Tables (continued)

<u>Table</u>		<u>Page</u>
2-1	Examples of difficult reponses to code in CHIS 2005	2-5
2-2	Response codes added to CHIS 2005	2-7
3-1	Zip codes within sampling stratum	3-3
3-2	Final distribution of adult extended completed cases by self-reported and	
	original sampling stratum	3-9

#### 1 CHIS 2005 DESIGN AND METHODOLOGY SUMMARY

#### 1.1 Overview

The California Health Interview Survey (CHIS) is a population-based random-digit dial telephone survey of California's population conducted every other year since 2001. CHIS is the largest health survey conducted in any state and one of the largest health surveys in the nation. CHIS is based at the UCLA Center for Health Policy Research and is conducted in collaboration with the California Department of Health Services and the Public Health Institute. CHIS collects extensive information for all age groups on health status, health conditions, health-related behaviors, health insurance coverage, access to health care services, and other health and health related issues.

The sample is designed to meet and optimize two goals:

- provide estimates for large- and medium-sized counties in the state, and for groups of the smallest counties (based on population size), and
- ii) provide statewide estimates for California's overall population, its major racial and ethnic groups, as well as several ethnic subgroups.

The CHIS sample is representative of California's non-institutionalized population living in households.

This series of reports describes the methods used in collecting data for CHIS 2005, the third CHIS data collection cycle, which was conducted between July 2005 and April 2006. The previous CHIS cycles (2001 and 2003) are described in similar series, available at <a href="http://www.chis.ucla.edu/methods">http://www.chis.ucla.edu/methods</a> main.html.

CHIS data and results are used extensively by federal and State agencies, local public health agencies and organizations, advocacy and community organizations, other local agencies, hospitals, community clinics, health plans, foundations, and researchers. The data are widely used for analyses and publications to assess public health and health care needs, to develop and advocate policies to meet those needs, and to plan and budget health care coverage and services.

# 1.2 Sample Design Objectives

To achieve the sample design objectives stated above, CHIS employed a multi-stage sample design. First, the state was divided into 44 geographic sampling strata, including 41 single-county strata and three multi-county strata comprised of the 17 remaining counties. Second, within each geographic stratum, residential telephone numbers were selected through random-digit dial (RDD) sampling, and within each household, one adult (age 18 and over) respondent was randomly selected. In those households with adolescents (ages 12-17) and/or children (under age 12), one adolescent and one child were randomly selected; the adolescent was interviewed directly, and the adult most knowledgeable about the child's health completed the child interview.

Table 1-1 shows the 44 sampling strata for CHIS 2005. A sufficient number of adult interviews were allocated to each stratum to support the first sample design objective. The geographic stratification of the state was revised from the design used in previous CHIS cycles, increasing the number of individual counties from 33 to 41.

Table 1-1. California county and county group strata used in the CHIS 2005 sample design

1. Los Angeles	16. Sonoma	31. Napa
2. San Diego	17. Stanislaus	32. Kings
3. Orange	18. Santa Barbara	33. Madera
4. Santa Clara	19. Solano	34. Monterey
5. San Bernardino	20. Tulare	35. Humboldt
6. Riverside	21. Santa Cruz	36. Nevada
7. Alameda	22. Marin	37. Mendocino
8. Sacramento	23. San Luis Obispo	38. Sutter
9. Contra Costa	24. Placer	39. Yuba
10. Fresno	25. Merced	40. Lake
11. San Francisco	26. Butte	41. San Benito
12. Ventura	27. Shasta	42. Colusa, Glen, Tehama
13. San Mateo	28. Yolo	43. Plumas, Sierra, Siskiyou, Lassen,
14. Kern	29. El Dorado	Modoc, Trinity, Del Norte
15. San Joaquin	30. Imperial	44. Mariposa, Mono, Tuolumne,
		Alpine, Amador, Calaveras, Inyo

Source: UCLA Center for Health Policy Research, 2005 California Health Interview Survey.

The samples in Marin, Humboldt, and Solano Counties were enhanced with additional funding. Additional samples were also selected statewide and in San Diego County to increase the number of child interviews; telephone numbers selected in these two additional samples were screened to identify households with children ages 0 to 11. All supplemental samples were implemented with and incorporated into the original statewide RDD sample.

The main RDD CHIS sample size is sufficient to accomplish the second objective. To increase the precision of estimates for Koreans and Vietnamese, areas with relatively high concentrations of these groups were sampled at higher rates. These geographically targeted oversamples were supplemented by telephone numbers associated with group-specific surnames drawn from listed telephone directories to further increase the sample size for Koreans and Vietnamese.

#### 1.3 Data Collection

To capture the rich diversity of the California population, interviews were conducted in five languages: English, Spanish, Chinese (Mandarin and Cantonese dialects), Vietnamese, and Korean. These languages were chosen based on analysis of 2000 Census data to identify the languages that would cover the largest number of Californians in the CHIS sample that either did not speak English or did not speak English well enough to otherwise participate.

Westat, a private firm that specializes in statistical research and large-scale sample surveys, conducted the CHIS 2005 data collection under contract with the UCLA Center for Health Policy Research. Westat staff interviewed one randomly selected adult in each sampled household, and sampled one adolescent and one child if present in the household and the sampled adult was the parent or legal guardian. Up to three interviews could have been completed in each sampled household. In households with children where the sampled adult was not the screener respondent, children and adolescents could be sampled as part of the screening interview, and the extended child (and adolescent) interviews could be completed before the adult interview. This "child-first" procedure was new for CHIS 2005 and substantially increased the yield of child interviews. While numerous subsequent attempts were made to complete the adult interview, there were completed child and/or adolescent interviews in households for which an adult interview was not completed. Table 1-2 shows the number of completed adult, child, and adolescent interviews in CHIS 2005 by the type of sample (RDD or supplemental sample).

Table 1-2. Number of completed CHIS 2005 interviews by type of sample and instrument

Type of sample	Adult	Child	Adolescent
Total RDD + supplemental cases	43,020	11,358	4,029
RDD			
Base plus county supplements	41,074	9,605	3,739
Statewide child supplement	525	511	84
San Diego child supplement	1,143	1,160	186
Supplemental samples:			
Korean	199	60	14
Vietnamese	79	22	6

Source: UCLA Center for Health Policy Research, 2005 California Health Interview Survey.

Interviews in all languages were administered using Westat's computer-assisted telephone interviewing (CATI) system. The average adult interview took 35 minutes to complete. The average child and adolescent interviews took 15 minutes and 20 minutes, respectively. For "child-first" interviews, additional household information asked as part of the child interview averaged almost 8 minutes. Interviews in non-English languages generally took longer to complete. Just over 10 percent of the adult interviews were completed in a language other than English, as were 18 percent of all child (parent proxy) interviews and 7 percent of all adolescent interviews.

Table 1-3 shows the major topic areas for each of the three survey instruments (adult, child, and adolescent).

#### 1.4 Response Rates

The overall response rate for CHIS 2005 is a composite of the screener completion rate (i.e., success in introducing the survey to a household and randomly selecting an adult to be interviewed) and the extended interview completion rate (i.e., success in getting one or more selected persons to complete the extended interview). To maximize the response rate, especially at the screener stage, an advance letter in five languages was mailed to all sampled telephone numbers for which an address could be obtained from reverse directory services. An advance letter was mailed for approximately 67 percent of the sampled telephone numbers. In CHIS 2005, for the first time a \$2 bill was included with the advance letter to promote cooperation. CHIS 2005 also included methodological experiments to test the effects on response of the incentive and different advance letter treatments.

Table 1-3. CHIS 2005 survey topic areas by instrument

Asthma Diabetes Heart disease, high blood pressure, epilepsy Physical disability/need for special equipment Parental concerns with child development, attention deficit disorder (ADD)  Mental health Adult Teen Ch Mental health status Perceived need, use of mental health services Emotional functioning  Health behaviors Emotional functioning  Health behaviors Adult Teen Ch Dietary intake Physical activity and exercise Walking for transportation and leisure Sedentary time Body image Flu Shot Alcohol and tobacco use Drug use Sexual behavior, STD testing, birth control practices  Women's health Adult Teen Ch Pap test screening, mammography screening, hormone replacement therapy Emergency contraception Pregnancy status  Cancer history and prevention Adult Teen Ch Cancer history of respondent and family history Colon cancer screening, prostrate cancer (PSA) test  Dental health Adult Teen Ch Last dental visit Dental insurance coverage	Health status	Adult	Teen	Child
Health conditions Asthma Diabetes Heart disease, high blood pressure, epilepsy Physical disability/need for special equipment Parental concerns with child development, attention deficit disorder (ADD)  Mental health Adult Teen Ch Mental health status Perceived need, use of mental health services Emotional functioning  Health behaviors Adult Teen Ch Dietary intake Physical activity and exercise Walking for transportation and leisure Sedentary time Body image Flu Shot Alcohol and tobacco use Drug use Sexual behavior, STD testing, birth control practices  Women's health Pap test screening, mammography screening, hormone replacement therapy Emergency contraception Pregnancy status  Cancer history and prevention Adult Teen Ch Dental health Adult Teen Ch Ch Cancer history frespondent and family history Colon cancer screening, prostrate cancer (PSA) test  Injury Adult Teen Ch Ch Serious injuries (frequency, cause)	General health status, height and weight	✓	✓	✓
Asthma Diabetes Heart disease, high blood pressure, epilepsy Physical disability/need for special equipment Parental concerns with child development, attention deficit disorder (ADD)  Mental health Adult Teen Ch Mental health status Perceived need, use of mental health services Emotional functioning  Health behaviors Adult Teen Ch Dietary intake Physical activity and exercise Walking for transportation and leisure Sedentary time Body image Flu Shot Alcohol and tobacco use Drug use Sexual behavior, STD testing, birth control practices Women's health Pap test screening, mammography screening, hormone replacement therapy Emergency contraception Pregnancy status  Cancer history and prevention Adult Teen Ch Cancer history and prevention Cancer history of respondent and family history Colon cancer screening, prostrate cancer (PSA) test  Injury Adult Teen Ch Serious injuries (frequency, cause)	Days missed from school due to health problems	$\checkmark$	$\checkmark$	$\checkmark$
Asthma Diabetes Heart disease, high blood pressure, epilepsy Physical disability/need for special equipment Parental concerns with child development, attention deficit disorder (ADD)  Mental health Adult Teen Ch Mental health status Perceived need, use of mental health services Emotional functioning  Health behaviors Adult Teen Ch Dietary intake Physical activity and exercise Walking for transportation and leisure Sedentary time Body image Flu Shot Alcohol and tobacco use Drug use Sexual behavior, STD testing, birth control practices Vomen's health Adult Teen Ch Pap test screening, mammography screening, hormone replacement therapy Emergency contraception Pregnancy status  Cancer history and prevention Adult Teen Ch Cancer history and prevention Adult Teen Ch Cancer history of respondent and family history Colon cancer screening, prostrate cancer (PSA) test  Dental health Adult Teen Ch Last dental visit Dental insurance coverage	Health conditions	Adult	Teen	Child
Heart disease, high blood pressure, epilepsy Physical disability/need for special equipment Parental concerns with child development, attention deficit disorder (ADD)  Mental health Mental health status Perceived need, use of mental health services Emotional functioning  Health behaviors Emotional functioning  Health behaviors  Adult Pen Ch Dictary intake Physical activity and exercise Walking for transportation and leisure Sedentary time Sedentary time Sedult Teen V Walking for transportation and leisure Sexual behavior, STD testing, birth control practices  Women's health Pap test screening, mammography screening, hormone replacement therapy Emergency contraception Pregnancy status  Cancer history and prevention Adult Teen Ch Cancer history of respondent and family history Colon cancer screening, prostrate cancer (PSA) test  Injury Adult Teen Ch Ch Serious injuries (frequency, cause)			✓	✓
Physical disability/need for special equipment Parental concerns with child development, attention deficit disorder (ADD)  Mental health	Diabetes	$\checkmark$	$\checkmark$	
Physical disability/need for special equipment Parental concerns with child development, attention deficit disorder (ADD)    Mental health	Heart disease, high blood pressure, epilepsy	$\checkmark$		
Mental health       Adult       Teen       Ch         Mental health status       /       /         Perceived need, use of mental health services       /       /         Emotional functioning       /       /         Health behaviors       Adult       Teen       Ch         Dietary intake       /       /       /         Physical activity and exercise       /       /       /         Walking for transportation and leisure       /       /       /         Sedentary time       /       /       /         Body image       /       /       /         Flu Shot       /       /       /         Alcohol and tobacco use       /       /       /         Drug use       /       /       /         Sexual behavior, STD testing, birth control practices       /       /         Women's health       Adult       Teen       Ch         Pap test screening, mammography screening, hormone replacement therapy       /       /         Emergency contraception       /       /       /         Pregnancy status       /       /       /         Cancer history and prevention       Adult       Teen       Ch <td></td> <td><math>\checkmark</math></td> <td></td> <td></td>		$\checkmark$		
Mental health       Adult       Teen       Ch         Mental health status       ✓       ✓         Perceived need, use of mental health services       ✓       ✓         Emotional functioning       ✓       ✓         Health behaviors       Adult       Teen       Ch         Dietary intake       ✓       ✓       ✓         Physical activity and exercise       ✓       ✓       ✓         Walking for transportation and leisure       ✓       ✓       ✓         Sedentary time       Ø       ✓       ✓         Body image       ✓       ✓       ✓         Flu Shot       ✓       ✓       ✓         Alcohol and tobacco use       ✓       ✓       ✓         Drug use       ✓       ✓       ✓         Sexual behavior, STD testing, birth control practices       ✓       ✓         Women's health       Adult       Teen       Ch         Pap test screening, mammography screening, hormone replacement therapy       ✓       ✓         Emergency contraception       ✓       ✓       ✓         Pregnancy status       ✓       ✓       ✓         Cancer history and prevention       Adult       Teen       Ch <td>Parental concerns with child development, attention deficit</td> <td></td> <td></td> <td><math>\checkmark</math></td>	Parental concerns with child development, attention deficit			$\checkmark$
Mental health status Perceived need, use of mental health services Emotional functioning  Health behaviors Adult Teen Dietary intake Physical activity and exercise Walking for transportation and leisure Sedentary time Body image Flu Shot Alcohol and tobacco use Drug use Sexual behavior, STD testing, birth control practices  Women's health Adult Teen Ch Pap test screening, mammography screening, hormone replacement therapy Emergency contraception Pregnancy status  Cancer history and prevention Cancer history of respondent and family history Colon cancer screening, prostrate cancer (PSA) test  Dental health Adult Teen Ch Serious injuries (frequency, cause)	disorder (ADD)			
Perceived need, use of mental health services Emotional functioning  Health behaviors  Adult  Physical activity and exercise Walking for transportation and leisure Sedentary time Body image Flu Shot Alcohol and tobacco use Drug use Sexual behavior, STD testing, birth control practices  Women's health Adult  Pap test screening, mammography screening, hormone replacement therapy Emergency contraception Pregnancy status  Cancer history and prevention Adult  Cancer history of respondent and family history Colon cancer screening, prostrate cancer (PSA) test  Dental health Adult Teen Ch Caser injury Adult Teen Ch Serious injuries (frequency, cause)	Mental health	Adult	Teen	Child
Emotional functioning  Health behaviors  Adult Teen Ch Dietary intake Physical activity and exercise Walking for transportation and leisure Sedentary time Body image Flu Shot Alcohol and tobacco use Drug use Sexual behavior, STD testing, birth control practices  Women's health Adult Teen Ch Pap test screening, mammography screening, hormone replacement therapy Emergency contraception Pregnancy status  Cancer history and prevention Cancer history of respondent and family history Colon cancer screening, prostrate cancer (PSA) test  Injury Adult Teen Ch Serious injuries (frequency, cause)	Mental health status	✓		✓
Emotional functioning  Health behaviors  Adult Teen Ch  Dietary intake  Physical activity and exercise  Walking for transportation and leisure  Sedentary time  Body image Flu Shot  Alcohol and tobacco use  Drug use  Sexual behavior, STD testing, birth control practices  Women's health  Adult Teen Ch  Pap test screening, mammography screening, hormone replacement therapy  Emergency contraception  Pregnancy status  Cancer history and prevention  Cancer history of respondent and family history  Colon cancer screening, prostrate cancer (PSA) test  Adult Teen Ch  Last dental visit  Dental health  Adult Teen Ch  Last dental visit  Dental insurance coverage	Perceived need, use of mental health services	$\checkmark$		$\checkmark$
Dietary intake Physical activity and exercise Walking for transportation and leisure Sedentary time Body image Flu Shot Alcohol and tobacco use Drug use Sexual behavior, STD testing, birth control practices  Women's health Adult Teen Ch Pap test screening, mammography screening, hormone replacement therapy Emergency contraception Pregnancy status  Cancer history and prevention Adult Teen Ch Cancer history of respondent and family history Colon cancer screening, prostrate cancer (PSA) test  Dental health Adult Teen Ch Last dental visit Dental insurance coverage  Injury Adult Teen Ch Serious injuries (frequency, cause)			$\checkmark$	
Physical activity and exercise  Walking for transportation and leisure  Sedentary time  Body image Flu Shot Alcohol and tobacco use Drug use Sexual behavior, STD testing, birth control practices  Women's health Adult Teen Ch Pap test screening, mammography screening, hormone replacement therapy Emergency contraception Pregnancy status  Cancer history and prevention Adult Teen Ch Cancer history of respondent and family history Colon cancer screening, prostrate cancer (PSA) test  Dental health Adult Teen Ch Last dental visit Dental insurance coverage  Injury Adult Teen Ch Serious injuries (frequency, cause)	Health behaviors	Adult	Teen	Child
Physical activity and exercise  Walking for transportation and leisure  Sedentary time  Body image Flu Shot  Alcohol and tobacco use Drug use Sexual behavior, STD testing, birth control practices  Women's health  Adult Teen Ch  Pap test screening, mammography screening, hormone replacement therapy Emergency contraception Pregnancy status  Cancer history and prevention  Cancer history of respondent and family history Colon cancer screening, prostrate cancer (PSA) test  Dental health  Adult Teen Ch  Last dental visit Dental insurance coverage  Injury  Adult Teen Ch  Serious injuries (frequency, cause)	Dietary intake	✓	✓	✓
Walking for transportation and leisure  Sedentary time  Body image Flu Shot  Alcohol and tobacco use Drug use Sexual behavior, STD testing, birth control practices  Women's health  Pap test screening, mammography screening, hormone replacement therapy Emergency contraception Pregnancy status  Cancer history and prevention  Cancer history of respondent and family history Colon cancer screening, prostrate cancer (PSA) test  Dental health  Last dental visit Dental insurance coverage  Adult Teen Ch Serious injuries (frequency, cause)	· · · · · · · · · · · · · · · · · · ·	$\checkmark$	$\checkmark$	$\checkmark$
Sedentary time Body image Flu Shot Alcohol and tobacco use Drug use Sexual behavior, STD testing, birth control practices  Women's health Adult Teen Ch Pap test screening, mammography screening, hormone replacement therapy Emergency contraception Pregnancy status  Cancer history and prevention Cancer history of respondent and family history Colon cancer screening, prostrate cancer (PSA) test  Dental health Adult Teen Ch Last dental visit Dental insurance coverage  Injury Adult Teen Ch Serious injuries (frequency, cause)	·	$\checkmark$		
Flu Shot Alcohol and tobacco use Drug use Sexual behavior, STD testing, birth control practices  Women's health Adult Teen Ch Pap test screening, mammography screening, hormone replacement therapy Emergency contraception Pregnancy status  Cancer history and prevention Adult Teen Ch Cancer history of respondent and family history Colon cancer screening, prostrate cancer (PSA) test  Dental health Adult Teen Ch Last dental visit Dental insurance coverage  Injury Adult Teen Ch Serious injuries (frequency, cause)	• .		$\checkmark$	$\checkmark$
Alcohol and tobacco use Drug use Sexual behavior, STD testing, birth control practices  Women's health Pap test screening, mammography screening, hormone replacement therapy Emergency contraception Pregnancy status  Cancer history and prevention Cancer history of respondent and family history Colon cancer screening, prostrate cancer (PSA) test  Dental health Last dental visit Dental insurance coverage  Injury Adult Teen Ch Serious injuries (frequency, cause)	·		$\checkmark$	
Drug use Sexual behavior, STD testing, birth control practices  Women's health Pap test screening, mammography screening, hormone replacement therapy Emergency contraception Pregnancy status  Cancer history and prevention Cancer history of respondent and family history Colon cancer screening, prostrate cancer (PSA) test  Dental health Last dental visit Dental insurance coverage  Injury Adult Teen Ch Serious injuries (frequency, cause)	Flu Shot	$\checkmark$		
Sexual behavior, STD testing, birth control practices  Women's health Pap test screening, mammography screening, hormone replacement therapy Emergency contraception Pregnancy status  Cancer history and prevention Cancer history of respondent and family history Colon cancer screening, prostrate cancer (PSA) test  Dental health Adult Teen Ch Last dental visit Dental insurance coverage  Injury Adult Teen Ch Serious injuries (frequency, cause)	Alcohol and tobacco use	$\checkmark$	$\checkmark$	
Women's health       Adult       Teen       Ch         Pap test screening, mammography screening, hormone replacement therapy       ✓       ✓         Emergency contraception       ✓       ✓         Pregnancy status       ✓       ✓         Cancer history and prevention       Adult       Teen       Ch         Cancer history of respondent and family history       ✓       ✓         Colon cancer screening, prostrate cancer (PSA) test       ✓       ✓         Dental health       Adult       Teen       Ch         Last dental visit       ✓       ✓         Dental insurance coverage       ✓       ✓         Injury       Adult       Teen       Ch         Serious injuries (frequency, cause)       ✓       ✓	Drug use		$\checkmark$	
Pap test screening, mammography screening, hormone replacement therapy  Emergency contraception Pregnancy status  Cancer history and prevention  Cancer history of respondent and family history Colon cancer screening, prostrate cancer (PSA) test  Dental health  Last dental visit Dental insurance coverage  Injury  Adult  Teen Ch  Serious injuries (frequency, cause)	Sexual behavior, STD testing, birth control practices	$\checkmark$	✓	
replacement therapy Emergency contraception Pregnancy status  Cancer history and prevention Cancer history of respondent and family history Colon cancer screening, prostrate cancer (PSA) test  Dental health Last dental visit Dental insurance coverage  Injury Adult Teen Ch Serious injuries (frequency, cause)	Women's health	Adult	Teen	Child
replacement therapy Emergency contraception Pregnancy status  Cancer history and prevention Cancer history of respondent and family history Colon cancer screening, prostrate cancer (PSA) test  Dental health Last dental visit Dental insurance coverage  Injury Adult Teen Ch Serious injuries (frequency, cause)	Pap test screening, mammography screening, hormone	✓		
Pregnancy status  Cancer history and prevention Cancer history of respondent and family history Colon cancer screening, prostrate cancer (PSA) test  Dental health Last dental visit Dental insurance coverage  Injury Adult Teen Ch Serious injuries (frequency, cause)				
Cancer history and prevention  Cancer history of respondent and family history Colon cancer screening, prostrate cancer (PSA) test  Dental health  Last dental visit Dental insurance coverage  Injury  Adult  Teen Ch  Serious injuries (frequency, cause)	Emergency contraception		$\checkmark$	
Cancer history of respondent and family history Colon cancer screening, prostrate cancer (PSA) test  Dental health Last dental visit Dental insurance coverage  Injury Adult Teen Ch Serious injuries (frequency, cause)	Pregnancy status	$\checkmark$	$\checkmark$	
Colon cancer screening, prostrate cancer (PSA) test  Dental health Last dental visit Dental insurance coverage  Injury Adult Teen Ch Serious injuries (frequency, cause)	Cancer history and prevention	Adult	Teen	Child
Dental health       Adult       Teen       Ch         Last dental visit       ✓       ✓         Dental insurance coverage       ✓       ✓         Injury       Adult       Teen       Ch         Serious injuries (frequency, cause)       ✓       ✓	Cancer history of respondent and family history	$\sqrt{}$		
Last dental visit Dental insurance coverage  Injury Adult Teen Ch Serious injuries (frequency, cause)	Colon cancer screening, prostrate cancer (PSA) test	$\checkmark$		
Dental insurance coverage  ✓ ✓  Injury	Dental health	Adult	Teen	Child
Injury Adult Teen Ch Serious injuries (frequency, cause) ✓ ✓	Last dental visit			<b>√</b>
Serious injuries (frequency, cause)	Dental insurance coverage		$\checkmark$	✓
Serious injuries (frequency, cause)	Injury	Adult	Teen	Child
			✓	✓
injury prevention controls (one nemicus, settoetts)	Injury prevention behaviors (bike helmets, seatbelts)		$\checkmark$	

Table 1-3. CHIS 2005 survey topic areas by instrument (Continued)

Food insecurity/hunger	Adult	Teen	Child
Availability of food in household over past 12 months	<b>√</b>		
Food environment	Adult	Teen	Child
Quality of food stores in area, where does teen/child eat		✓	✓
lunch and breakfast			
School has vending machines		✓	
Access to and use of health care	Adult	Teen	Child
Usual source of care, visits to medical doctor	✓	✓	✓
Emergency room visits	$\checkmark$	$\checkmark$	$\checkmark$
Delays in getting care (prescriptions, tests, treatment)	$\checkmark$	$\checkmark$	$\checkmark$
Racial/ethnic discrimination in health care, MD discussed	$\checkmark$		
diet and exercise			
Communication problems with doctor	$\checkmark$	$\checkmark$	$\checkmark$
Ability and parental knowledge of teen contacting a doctor		$\checkmark$	
Health insurance	Adult	Teen	Child
Current insurance coverage, spouse's coverage, who pays	✓	✓	✓
for coverage	,	,	,
Health plan enrollment, characteristics of plan	<b>√</b>	✓	✓
Whether employer offers coverage, respondent/spouse eligibility	✓		
Coverage over past 12 months	$\checkmark$	$\checkmark$	$\checkmark$
Reasons for lack of insurance	✓	$\checkmark$	$\checkmark$
Public program eligibility	Adult	Teen	Child
Household poverty level	✓		
Program participation (TANF, CalWorks, Public Housing, Food Stamps, SSI, SSDI, WIC)	✓	✓	✓
Assets, alimony/child support/social security/pension	✓		
Eligible for Medi-Cal and healthy families	✓	$\checkmark$	$\checkmark$
Reason for Medi-Cal nonparticipation among potential	✓	$\checkmark$	$\checkmark$
eligibles			
Neighborhood and housing	Adult	Teen	Child
Neighborhood safety	√ ·	✓	
Home ownership, number of rooms, amount of	$\checkmark$		
mortgage/rent			
Parental involvement/adult supervision	Adult	Teen	Child
Parental presence after school, parental knowledge of teen's		✓	
activities			/
Child's activities with family			✓

Table 1-3. CHIS 2005 survey topic areas by instrument (Continued)

Child care and school attendance	Adult	Teen	Child
Current child care arrangements			✓
Paid child care	$\checkmark$		
First 5 California: receipt of parent kit and attitudes towards			$\checkmark$
preschool			
Preschool/school attendance, public/private school		$\checkmark$	$\checkmark$
Employment	Adult	Teen	Child
Employment status, spouse's employment status	<b>√</b>		
Work in last week, industry and occupation	$\checkmark$		
Hours worked at all jobs	$\checkmark$	$\checkmark$	
Income	Adult	Teen	Child
Respondent's and spouse's earnings last month before taxes	✓		
Household income (annual before taxes)	$\checkmark$		
Number of persons supported by household income	✓		
Respondent characteristics	Adult	Teen	Child
Age, gender, height, weight, education	✓	✓	✓
Race and ethnicity	$\checkmark$	$\checkmark$	✓
Marital status	$\checkmark$		
Sexual orientation	$\checkmark$	$\checkmark$	
Citizenship, immigration status, country of birth, length of	$\checkmark$	$\checkmark$	✓
time in U.S., languages spoken at home, English language			
proficiency			

Source: UCLA Center for Health Policy Research, 2005 California Health Interview Survey.

The CHIS 2005 screener completion rate was 49.8 percent and was higher for households that were sent the advance letter. The extended interview completion rate varied across the adult, child and adolescent interviews. Multiplying the screener and extended rates gives an overall response rate for each type of interview. At the household level, the percentage of households completing one or more of the extended interviews (adult, child, and/or adolescent) is a useful summary of the overall success of the study. For CHIS 2005, the household response rate was 29.5 percent (the product of the screener response rate and the completion rate at the household level of 59.3 percent). The 2005 survey is the first time that a household response rate has been reported because in earlier cycles the adult interview had to be completed before the child or the adolescent interview (i.e., the household rate equaled the adult rate). The adult extended completion rate for 2005 was 54.0 percent, resulting in an overall adult response rate of 26.9 percent for adults. All of the household and person level response rates vary by sampling stratum.

For more information about the CHIS 2005 response rates, please see *CHIS 2005 Methodology Series:* Report 4 – Response Rates.

The CHIS response rate is comparable to response rates of other scientific telephone surveys in California, such as the 2005 California Behavioral Risk Factor Surveillance System (BRFSS) Survey with an overall response rate of 29.2 percent. California as a whole and the state's urban areas in particular, are among the most difficult parts of the nation in which to conduct telephone interviews. Survey response rates tend to be lower in California than nationally, and over the past decade response rates have been declining both nationally and in California.

One way to judge the representativeness of a population survey is to "benchmark" its results against those of other reliable data sources. The CHIS 2001 and 2003 samples yielded unweighted and weighted population distributions and rates that are comparable to those obtained from other sources. The demographic characteristics of the CHIS 2001 sample (such as race, ethnicity, and income) were very similar to those obtained from 2000 Census data. CHIS 2001 respondents also had health characteristics and behaviors that were very similar to those found in other extensively used surveys, such as the California BRFSS. The UCLA Center for Health Policy Research is conducting an extensive benchmarking project for CHIS data.

Adults who completed at least approximately 80 percent of the questionnaire (i.e., through Section J on Health Care Utilization and Access), after all follow-up attempts were exhausted to complete the full questionnaire, were counted as "complete." At least some items in the employment and income series or public program eligibility and food insecurity series are missing from those cases that did not complete the entire interview.

Proxy interviews were allowed for frail and ill persons over the age of 65 who were unable to complete the extended adult interview in order to avoid biases for health estimates of elderly persons that might otherwise result. Eligible selected persons were recontacted and offered a proxy option. For 139 elderly adults, a proxy interview was completed by either a spouse/partner or adult child. A reduced questionnaire, with questions identified as appropriate for a proxy respondent, was administered. (Note: questions not administered in proxy interviews are given a value of "-2" in the data files.)

# 1.5 Weighting the Sample

To produce population estimates from the CHIS data, weights are applied to the sample data to compensate for the probability of selection and a variety of other factors, some directly resulting from the design and administration of the survey. The sample is weighted to represent the non-institutionalized population for each sampling stratum and statewide. The weighting procedure used for CHIS 2005 accomplishes the following objectives:

Compensate for differential probabilities of selection for households and persons;

Reduce biases occurring because nonrespondents may have different characteristics than respondents;

Adjust, to the extent possible, for undercoverage in the sampling frames and in the conduct of the survey; and

Reduce the variance of the estimates by using auxiliary information.

As part of the weighting process, a household weight was created for all households that completed the screener interview. This household weight is the product of the "base weight" (the inverse of the probability of selection of the telephone number) and a variety of adjustment factors. The household weight is used to compute a person-level weight, which includes adjustments for the within-household sampling of persons and nonresponse. The final step is to adjust the person-level weight using a raking method so that the CHIS estimates are consistent with population control totals. Raking is an iterative procedure that forces the CHIS weights to sum to known totals from an independent data source. The procedure requires iteration to make sure all the control totals, or raking dimensions, are simultaneously satisfied within a specified tolerance.

Population control totals of the number of persons by age, race, and sex at the stratum level for CHIS 2005 were created primarily from the California Department of Finance's 2004 Population Estimates and 2005 Provisional Population Estimates. The raking procedure used 11 raking dimensions, which are combinations of demographic variables (age, sex, race, and ethnicity), geographic variables (county, Service Planning Area in Los Angeles County, and Health Region in San Diego County), household composition (presence of children and adolescents in the household), and socio-economic variables (home ownership and education). The socio-economic variables are included to reduce biases associated with excluding households without landline telephones from the sample frame. One limitation

of using Department of Finance data is that it includes about 2.4 percent of the population of California who live in "group quarters" (i.e., persons living with nine or more unrelated persons). These persons were excluded from the CHIS sample and as a result, the number of persons living in group quarters was estimated and removed from the Department of Finance control totals prior to raking.

#### 1.6 Imputation Methods

Missing values in the CHIS data files were replaced through imputation for nearly every variable. This was a massive task designed to enhance the analytic utility of the files. Westat imputed missing values for a handful of variables used in the weighting process and UCLA staff imputed values for nearly all other variables.

Two different imputation procedures were used by Westat to fill in missing responses for items essential for weighting the data. The first imputation technique was a completely random selection from the observed distribution of respondents. This method was used only for a few variables when the percentage of the items missing was very small. The second technique was hot deck imputation without replacement. The hot deck approach is probably the most commonly used method for assigning values for missing responses. With a hot deck, a value reported by a respondent for a particular item is assigned or donated to a "similar" person who did not respond to that item. The characteristics defining "similar" vary for different variables. To carry out hot deck imputation, the respondents to an item form a pool of donors, while the nonrespondents are a group of recipients. A recipient is matched to the subset pool of donors based on household and individual characteristics. A value for the recipient is then randomly imputed from one of the donors in the pool. Once a donor is used, it is removed from the pool of donors for that variable. Hot deck imputation was used to impute the same items in CHIS 2003 and CHIS 2005 (i.e., race, ethnicity, home ownership, and education).

The UCLA Center for Health Policy Research imputed missing values for nearly every variable in the data files other than those handled by Westat and some sensitive variables in which nonresponse had its own meaning. Overall, item nonresponse rates in CHIS 2005 were modest, with most variables missing valid responses for less than 2% of the sample. However, there were a few exceptions where item nonresponse rate was greater than 20%, such as household income.

The imputation process conducted by UCLA started with data editing, sometimes referred to as logical or relational imputation: for any missing value, a valid replacement value was sought based on known values of other variables of the same respondent or other sample(s) from the same household. For the remaining missing values, hierarchical sequential hot-deck imputation with donor replacement was used. This method replaces a missing value for one respondent using a valid response from another respondent with similar characteristics as defined by a set of control variables. The control variables were ranked in order from the most to the least important. This procedure allowed control variables to be dropped if certain conditions (such as the minimum number of donors) were not met. The control variables were dropped sequentially, starting from the variable ranked least important. Once a responding case was used as a donor, it was dropped from the donor pool preventing using one donor multiple times.

Control variables always included the following: gender, age group, race/ethnicity, poverty level (based on household income), educational attainment, and region. Other control variables were also used depending on the nature of the imputed variables. Among the control variables, gender, age, race/ethnicity and regions were imputed by Westat. Household income and educational attainment were imputed first in order to impute other variables. Household income, for example, was imputed using the hot-deck method within ranges from a set of auxiliary variables such as income range and/or poverty level.

The imputation order of the other variables followed the questionnaire. After all imputation was done, logical checks and edits were performed once again to ensure consistency between the imputed and nonimputed values on a case-by-case basis.

#### 1.7 Methodology Report Series

A series of five methodology reports is available with more detail about the methods used in CHIS 2005:

Report 1 – Sample Design;

Report 2 – Data Collection Methods;

Report 3 – Data Processing Procedures;

Report 4 – Response Rates; and

Report 5 – Weighting and Variance Estimation.

For further information on CHIS data and the methods used in the survey, visit the California Health Interview Survey Web site at <a href="https://www.CHIS.ucla.edu">www.CHIS.ucla.edu</a> or contact CHIS at <a href="https://chis.ucla.edu">CHIS@ucla.edu</a>.

#### 2. DATA EDITING PROCEDURES

Survey data for CHIS 2005 were collected using a computer-assisted telephone interview (CATI) system. In a CATI environment, the data collection and interview process is controlled using a series of computer programs designed to ensure consistency and quality. (CHIS 2005 Methodology Series: Report 2 - Data Collection Methods provides a thorough discussion of the interview process and a description of how the survey data were collected.) The CATI system programming determines which questions are asked based on household composition, respondent characteristics or preceding answers, and the order in which the questions are presented to interviewers. The system also presents the response options that are available for recording respondents' answers.

CATI range and logic edits do much to help ensure the integrity of the data during collection. This editing at the time of the interview greatly reduces the need to recontact respondents to verify responses and allows questionable entries to be reviewed in real time with the respondent as part of the collection process. Although the CATI system virtually eliminates out-of-range responses and many other anomalies, some consistency and edit issues may arise. For example, interviewers may note concerns or problems that must be handled by data preparation staff after the interview is complete. Updating activities require that both manual and machine editing procedures be developed to correct interviewer, respondent, and CATI program errors and to check that updates made by data preparation staff were input correctly. Because data editing resulted in changes to the survey data, specific quality control procedures were implemented. CHIS 2005 survey data were carefully examined and edited before delivering final data files to UCLA. Quality control procedures involved limiting the number of staff who made updates, using the CATI specifications to resolve issues in complex questionnaire sections, carefully checking updates, and performing computer runs to identify inconsistencies or illogical patterns in the data.

The data editing procedures for CHIS 2005 consisted of four main tasks: (1) managing and resolving problem cases, (2) reading and using interviewer comments to make data updates, (3) coding questions with text strings (i.e., "other specify" responses), and (4) verifying data editing updates. The final step was to convert the edited data from the CATI system to the SAS data delivery files. The sections below describe each of these processes in turn.

# 2.1 Resolving Problem Cases

One of the important tasks for ensuring high-quality data was managing and resolving problem cases. The data preparation staff, as well as project staff and staff from the Telephone Research Centers (TRCs), worked collectively to resolve problem cases. In this section, the method interviewers used to communicate problems is described, along with the system used by data editing and preparation staff to update or modify the data.

An interviewer who experienced a problem while working a case during data collection could alert the project team in one of two ways. One method was to fill out a hard copy problem sheet for the case. Problem sheets from all the TRCs were sent to a single staff member who distributed them to the appropriate department or project staff person. Data preparation staff often used these problem sheets as a guide to review cases and to make certain that any required updates were made accurately.

The second method of communicating problems was to assign a specific result code to cases within the CATI system, obviating the need for a hard copy problem sheet. The problem result code category had three sub-categories for special queues to which these problem cases could be assigned for review. These sub-categories were used to indicate the person responsible for investigating the case further—TRC staff, project staff, or data processing staff. Problem cases were reviewed electronically by a TRC supervisor and either re-fielded to the interviewing staff or distributed to the appropriate TRC, data processing, or project staff.

Database updates were unnecessary for some problems and these cases could simply be released for general interviewing accompanied by an appropriate message. If, for example, an adult extended interview was stopped during the middle of Section D, the interviewer would enter a detailed comment explaining why the case could not proceed (e.g., "Respondent wanted to change several answers. I was unable to back up properly"). The solution for these types of cases was to re-field the interview with a message stating, "Case will restart in Section D. Re-ask beginning with screen AE31." Note that questions from CHIS 2003 or CHIS 2001 that were also asked in CHIS 2005 retained their original CATI screen numbering. In this example, the first question in Section D for CHIS 2005 is screen AE31. In addition to the retaining historical CATI screen names, a secondary item numbering system was implemented by UCLA for their internal needs.

Most restart cases were made available to the general interviewing staff. For unusual or complex problems, the case could be assigned to a specific interviewer with experience in handling these types of problems.

Some examples of cases reviewed by project staff were those in which an error was made in enumerating a household member or when a change in the person named as most knowledgeable about the sampled child was needed. Other types of problems required special interviewer handling, even after changes were made to the database.

One specific category of problems—enumeration errors where some household members were either incorrectly identified or their characteristics were entered in error—was somewhat more challenging than other types of errors to resolve. These problems touched upon sampling issues and, therefore, required careful review and treatment in order to preserve the integrity of the study's sampling procedures. These problem cases were resolved by reviewing the specific issues and case details with a project sampling statistician and making the appropriate changes to the data or by re-fielding the case. It is important to note, however, that very few cases had enumeration errors.

#### 2.2 Interviewer Comments

Another important data editing task was reading and using interviewer comments. Comments are text phrases typed in special entry windows in CATI by interviewers when they want to record respondents' statements but are unable to enter as a standard response in the instrument. For CHIS 2005, sometimes these phrases were merely an elaboration of a previously recorded response, an expression of opinion, or comments unrelated to the survey, which did not necessarily require modifying or updating survey responses. Other times, comments were substantive to data quality and indicated that an update was needed.

Comments were also used to identify specific responses that could not be coded using the existing response option set. Although project staff resolved the vast majority of these situations, several out-of-range and unanticipated responses required clarification. Throughout data collection, Westat maintained a comprehensive log of unexpected responses and interviewer comments which was forwarded to UCLA on a periodic basis for review and subsequent adjudication. These issues were discussed and resolved by the Westat and UCLA CHIS project teams.

Based on the experience from the first two CHIS cycles, the response option set for some 2005 items was amended or updated. For example, question AK2 (item AK2 from CHIS 2003 and CHIS 2001) in the adult extended interview asked, "What is the MAIN REASON you did not work last week?" Two response codes; "9 – on family or maternity leave" and "10 – off season" were added to the list of categories displayed to interviewers in 2005. In addition, some response option sets did not change, but the question wording reverted to the text used in a previous administration. An example is item AF33 from the adult extended interview which asked male respondents "How long ago did you have your most recent PSA test?" This wording was used in both CHIS 2005 and CHIS 2001, but was worded slightly differently in CHIS 2003 ("When did you have your most recent PSA test?"). Updates to the response options helped to reduce the number of interviewer comments and lessen the amount of data preparation work. These modifications proved to be successful because only a small number of items asked in either of the two prior CHIS cycles elicited unexpected responses again in 2005. The overall volume and diversity of unanticipated responses and interviewer comments in CHIS 2005 was somewhat less than in the 2003 cycle.

Additional response options were added to several survey items in CHIS 2005 during data collection and also as part of the data delivery process. For example, question AE22 from the adult extended interview asked working respondents what they normally did at work; "Thinking about what you normally do at work, not counting your free time, would you say that you sit most of the day, stand most of the day, or walk around a lot?" The initial response option set did not include categories for individuals who divided their time among walking, sitting or standing. Three new response option categories were subsequently added to the instrument during data collection to address these circumstances; sit/and stand equally, sit/and walk equally, and stand and/walk equally. (See Table 2-2 for a summary of items for which one or more response code/values were added.)

In addition to AE22, several other items yielded substantial numbers of responses outside the standard response set. An example is AB34 from the adult extended interview, "Has a doctor ever told you that you have any kind of heart disease?" Interviewers recorded responses in the comment field for this item such as "I have an irregular heart beat," "my doctor said I have a heart murmur," and "heart arrhythmia." Table 2-1 provides examples of items and responses that interviewers initially had difficulty coding. In consultation with UCLA staff, Westat data preparation staff were given direction how to properly code many of these responses using existing categories. In some instances, the unexpected responses resulted in adding new response categories to the instrument. The interviewing staff subsequently received instructions for accurately coding these responses to minimize the number of comments and improve data quality.

Weekly meetings between data preparation and project staff during data collection covered data-related issues, reviewed comments, and established case-specific procedures for handling pending or interim problem cases. Comments and cases under review included both complete and incomplete (interim status) interviews. Lists of out-of-range responses and responses that Westat staff could not unambiguously code were forwarded to the UCLA CHIS staff for review. The listings included suggestions and recommendations for new response options and for potential wording changes in an effort to clarify some survey items.

Table 2-1. Examples of difficult responses to code in CHIS 2005

Table 2-1	<u> </u>	
CATI	Question and response options	Respondents' answers
Screen		
ID		
AK23	Do you live in a house, a duplex, a building with 3 or more units, or in a mobile home?	"Studio"
		"Currently live in an RV as we wait
	1. HOUSE	for house to be constructed"
	2. DUPLEX	
	3. BUILDING WITH 3 OR MORE UNITS	"RV"
	4. MOBILE HOME	
	-7. REFUSED	
	-8. DON'T KNOW	
AK1	Which of the following were you doing last week?	"Working as a volunteer"
	1. Working at a job or business,	C
	2. With a job or business but not at work,	
	3. Looking for work, or	
	4. Not working at a job or business?	
	-7.REFUSED	
	-8. DON'T KNOW	
AD12A	Were your ovaries removed?	"One ovary was removed"*
	1. YES]	-
	2. NO	
	-7. REFUSED	
	-8. DON'T KNOW	* A new response category was
		added to the adult extended
		interview to account for this
		response
AB36	The last time your cholesterol was checked, did a doctor tell	"Said it was borderline"
	you your blood cholesterol was high?	
	1. YES	
	2. NO	
	-7. REFUSED	
	-8. DON'T KNOW	
AL9	Are you legally blind?	"I am blind in one eye"
	1. YES	
	2. NO	
	-7. REFUSED	

## 2.3 Coding with Text Strings

Most items in the CHIS 2005 had only closed-ended response options, so coding of openended responses was not needed. The survey had a number of other-specify questions, however, that required coding of narrative text strings recorded by interviewers. Other-specify questions had specific response categories but also allowed for text or values to be typed into an "other" category. For example, question AA5 in the adult extended interview asked respondents "And what is your Latino or Hispanic ancestry or origin? Such as Mexican, Salvadoran, Cuban, Honduran — and if you have more than one, tell me all of them." An "other" category was available for responses that fell outside the list of categories that were read as a part of the question. Additional questions with an "other" category from the CHIS 2005 adult extended interview included;

- racial/ethnic ancestry (AA5, AA5A, AA5E, AA5E1),
- tribal names (AA5B, AA5D),
- how breast cancer was found (AB60),
- sexual orientation (AD46),
- country of birth (AH33, AH34, AH35),
- languages spoken at home (AH36),
- place visited for health care (AH3),
- health insurance coverage items (AI15, AI15A, AI17A, AI45, AI45A, AI36, AI24),
- women's health (AR13), and
- child/adolescent health insurance coverage items (CF7, CF18, IA18, CF29, IA29).

Westat data preparation staff reviewed these responses and up-coded them to the existing categories whenever possible. A limited number of survey items were augmented with additional response codes to accommodate answers recorded in the other-specify category and from comments. The updated response codes for these items are given in Table 2-2.

With the exception of the industry and occupation items in the adult extended interview, CHIS 2005 did not collect open-ended responses that required a specially developed coding scheme or structure. Many survey items, however, collected amounts or values such as the respondent's age, weight at age 18, etc. For such items, the CATI system utilized "soft-" and "hard-range" edit specifications.

Table 2-2. Response codes added to CHIS 2005

Questionnaire version	Variable Name	Question Name	New code	Response description
Adult	AB57	QA03_48	7	Place of worship
Adult	AD12A	QA05_E6	3	One ovary removed
			5	Sit/stand equally
Adult	AE22	QA05_G27	6	Sit/walk equally
			7	Stand/walk equally
			4	Does not work
Adult	AOAL11	QA05_G28	5	Sit/stand equally
		_	6	Sit/walk equally
			7	Stand/walk equally
Adult	AH55	QA05_H14	9	Healthy Kids
Adult	AH56	QA05_H22	10	Healthy Kids
Adult	АН3	QA05_H3	6	Alternative Medical Care
Adult	AIIS	QA03_II3	7	Family/friend is health provider
Adult	AI19	QA05_H31	9	Healthy Kids
Adult	AI47	QA05_H43	9	Healthy Kids
Adult	AI49	QA05_H45	9	Healthy Kids
Adult	AI33	QA05_H56	4	Healthy Kids
Adult	AI30	QA05_H64	4	Healthy Kids
Adult	AI51	QA05_I11	9	Healthy Kids
Adult	CF9	QA05_I15	9	Healthy Kids
Adult	CF23	QA05_I23	4	Healthy Kids
Adult	CF26	QA05_I26	4	Healthy Kids
Adult	AI53	QA05_I41	9	Healthy Kids
Adult	IA9	QA05_I45	9	Healthy Kids
Adult	IA23	QA05_I41	4	Healthy Kids
Adult	IA26	QA05_I45	4	Healthy Kids
Adult	AR12	QA05_R12	4	Currently/recently pregnant.
Adult	AR13	QA05_R13	2	Hysterectomy
Teen	AD20	QT05_D12	4	On the way to school (car/walking)
			5	Does not eat breakfast

 $Source: UCLA\ Center\ for\ Health\ Policy\ Research,\ 2005\ California\ Health\ Interview\ Survey.$ 

CATI edit specifications were initially prepared by Westat staff and then forwarded to UCLA for review, comment, and approval. The specifications were then implemented to improve data

quality by informing interviewers when an out-of-acceptable-range or seemingly improbable response was recorded. Edit specifications enabled interviewers to identify and correct potential errors with the respondent during the interview and eliminated the need for a call back.

Soft-range edits were activated during the interview when the respondent gave an unlikely response (a value outside the specified range). The CATI system responded by placing a message on the screen and required the interviewer to re-enter the response. This system feature gives the interviewer an opportunity to verify that the response is recorded accurately or re-ask the question to be certain the respondent understood what was being asked as needed. Hard-range edits prevented recording unacceptable values. For example, for a question on how many rooms were in the adult respondent's home, the soft range is 1-15, the hard range 1-99. During data collection, a small number of soft- and hard-range edit specifications were revised to accept the actual range of responses being collected.

In circumstances when the respondent insisted on giving a response that violated the soft- or hard-edit specifications, interviewers recorded the respondent's answer in the comment field and data preparation staff reviewed and updated the case as needed.

## 2.4 Verifying Data Updates

Updates to the original interview data were required due to a variety of circumstances as described above. Generally speaking, data updates and corrections were made to account for these situations including interviewer and respondent error, information captured in comments and "otherspecify" fields, and problem sheets so that the final survey data reflected the most accurate information possible.

A series of techniques verified that survey updates were made accurately. First, the intended updates were recorded on a hard-copy printout or on an associated problem sheet. The CATI case identification number was also recorded to ensure that updates were associated with the appropriate case. This printout was checked for accuracy and for logical effects on any other questions or skip patterns in the questionnaire. Next, the updates were entered into the computer and verified again – matching the resulting information against the print-out. For more complicated circumstances, the data preparation staff carefully reviewed interviewer comments, messages, and problem descriptions to verify data updates.

An entry in an electronic transaction journal was created for each data update. Transaction journal entries maintained information such as the CATI case identification number, initial data value(s), the updated value(s), and the date that the update was made. The editing and verification process was performed throughout the data collection period; approximately 19,500 database values were updated and verified for CHIS 2005.

Cases with similar problems were reviewed together and then updated at one time in manageable batches. This process ensured consistency in the handling of discrete data problems. Following the series of updates, a program checked for the full set of errors that had been identified to date to ensure that data editing had not created any new errors. Frequency distributions and crosstabulations of survey variables were used extensively by data preparation staff to verify data updates.

Structural edits designed to assess the integrity of the CATI database (i.e., verifying that all database records that should exist actually do exist, and those that should not exist do not), and, as necessary, edits that evaluated complex skip patterns were run periodically during data collection.

When discrepancies were discovered, problem cases were identified and reviewed, and updates were made as necessary. If data were incorrectly keyed in the database, the audit trail for the interview (a keystroke-by-keystroke record of all responses entered during the CATI interview) could be retrieved to determine the appropriate response. The interview audit trail is especially useful for reconstructing interviews that were interrupted unexpectedly by a power failure or system crash. The precise number of CHIS 2005 cases restored using audit trail information is not known, but recovery was needed for a limited number of cases due to power failure during inclement weather.

# 2.5 Data Conversion and Delivery

The final survey data were delivered to UCLA formatted as SAS data sets. The SAS data sets were created by converting the CATI database using a series of SAS macro programs. Initially, the CATI survey data were stored in a hierarchical database to improve data efficiency and enhance performance while interviewing. This conversion was accomplished using Westat's CATISAS macro program that extracts information stored in the CATI data dictionary (e.g., variable names, variable labels, allowable values, and formats) and then converts each of the CATI database segments into a "flat" SAS data set. Using the CATI data dictionary to define the SAS data set variables is advantageous because variables are stored in questionnaire order, allowing for meaningful presentation of the variables

in frequency output and file listings without additional programming. SAS data sets created by the macro were later combined to facilitate processing and file delivery. After the survey data were converted from the CATI system, all further processing relied on the SAS system.

During the conversion process from CATI database elements to SAS files, diagnostic edit checks were run on the entire database. Frequencies for categorical data were also run and examined. These reviews were made to ensure that errors had not been inadvertently introduced into the data (i.e., no data were lost, no unexpected shifts in variable distributions occurred). In going from the CATI to SAS file organization, for example, frequency runs from the CATI database and the post-CATI SAS files were compared.

Data deliveries made to UCLA by Westat are summarized below.

- Screener/household membership variables;
- Questionnaire variables;
- Administrative/derived variables, such as classification, counter, and composite variables; and North American Industry Classification System/Standard Occupational Codes;
- Weights (final sample weight and replicate weights);
- Imputation flags, and
- Data from the adult, teen, and child-first interviews needed for geocoding.

#### 3. GEOGRAPHIC AND INDUSTRY AND OCCUPATION CODING

For CHIS 2005, Westat was responsible for delivering coded survey data for items from the adult extended interview related to industry and occupation (coded by the Census Bureau) and to geographic location of residence (coded by UCLA). This report section summarizes these two coding processes.

## 3.1 Geographic Coding

The CHIS 2005 adult extended interview asked all respondents the name of the county where they lived: "To be sure we are covering the entire state, what county do you live in?" (AH42). In addition, for cases in which an address had been matched to the sampled telephone number<sup>1</sup>, interviewers verified the street address and Zip code with the adult respondent (AO1) and then collected the name of a nearby cross-street (AM9). These same questions were asked of adults who completed the child interview under the "child first" protocol. The child-first protocol allowed completion of the child interview before the adult extended interview was conducted. (See *CHIS 2005 Methodology Series: Report 2 – Data Collection Methods* for details regarding the child-first protocol),

If there was no matched address for a given case, respondents were asked to provide their Zip code (AM7), their street address (AO2) and then the name of a nearby cross-street (AM9). Adult respondents who refused to provide a complete street address with house number were asked just for the name of the street they lived on (AM8) and the nearest cross street.

Because telephone numbers were assigned to sampling strata based on the telephone area code and exchange (see *CHIS 2005 Methodology Series: Report 1 - Sample Design*), and some exchanges serve more than one county or city, the actual stratum where the respondent resides may differ from the sampling stratum. Both to monitor the sample yield during data collection and to ensure that the analysis file reflects the sampled person's actual residence, it was important to assign each adult who completed the extended survey to the correct self-reported stratum.

<sup>1</sup> The verification was not done if the telephone number was unlisted or if the sample vendor indicated that the number was on the "do not call" list.

3-1

Two questions from the adult extended interview were used to make the stratum assignment during data collection. The two survey questions are:

AH42. To be sure we are covering the entire state, what county do you live in?"

and

AM7. "What is your Zip code?"

The self-reported stratum for monitoring sample yield was derived from the self-reported county values (AH42) for all strata. Table 3-1 shows a listing of Zip codes within each stratum. The final self-reported stratum for the analysis file was determined by applying the geocodes developed by UCLA CHIS staff. See *CHIS 2003 Methodology Series: Report 5 - Weighting and Variance Estimation*, Section 8.5, for a fuller discussion of this process.

The final distribution of adult extended completed cases by self-reported and original sampling stratum is presented in Table 3-2. Generally, the frequency counts show that there is good correspondence between the original sampling stratum and the self-reported stratum. The self-reported stratum may differ from the original sampling stratum, however, because the sampling stratum may have been incorrect or the respondent may have incorrectly reported the county of residence.

Table 3-1. Zip codes within sampling stratum

Stratum Zip code 1.0 90001, 90002, 90003, 90004, 90005, 90006, 90007, 90008, 90009, 90010, 90011, 90012, Los Angeles 90013, 90014, 90015, 90016, 90017, 90018, 90019, 90020, 90021, 90022, 90023, 90024, 90025, 90026, 90027, 90028, 90029, 90030, 90031, 90032, 90033, 90034, 90035, 90036, 90037, 90038, 90039, 90040, 90041, 90042, 90043, 90044, 90045, 90046, 90047, 90048, 90049, 90050, 90051, 90052, 90053, 90054, 90055, 90056, 90057, 90058, 90059, 90060, 90061, 90062, 90063, 90064, 90065, 90066, 90067, 90068, 90069, 90070, 90071, 90072, 90073, 90074, 90075, 90076, 90077, 90078, 90079, 90080, 90081, 90082, 90083, 90084, 90086, 90087, 90088, 90089, 90091, 90093, 90094, 90095, 90096, 90099, 90101, 90102, 90103, 90189, 90201, 90202, 90209, 90210, 90211, 90212, 90213, 90220, 90221, 90222, 90223, 90224, 90230, 90231, 90232, 90233, 90239, 90240, 90241, 90242, 90245, 90247, 90248, 90249, 90250, 90251, 90254, 90255, 90260, 90261, 90262, 90263, 90264, 90265, 90266, 90267, 90270, 90272, 90274, 90275, 90277, 90278, 90280, 90290, 90291, 90292, 90293, 90294, 90295, 90296, 90301, 90302, 90303, 90304, 90305, 90306, 90307, 90308, 90309, 90310, 90311, 90312, 90313, 90397, 90398, 90401, 90402, 90403, 90404, 90405, 90406, 90407, 90408, 90409, 90410, 90411, 90501, 90502, 90503, 90504, 90505, 90506, 90507, 90508, 90509, 90510, 90601, 90602, 90603, 90604, 90605, 90606, 90607, 90608, 90609, 90610, 90612, 90631, 90633, 90637, 90638, 90639, 90640, 90650, 90651, 90652, 90659, 90660, 90661, 90662, 90670, 90671, 90701, 90702, 90703, 90704, 90706, 90707, 90710, 90711, 90712, 90713, 90714, 90715, 90716, 90717, 90723, 90731, 90732, 90733, 90734, 90744, 90745, 90746, 90747, 90748, 90749, 90755, 90801, 90802, 90803, 90804, 90805, 90806, 90807, 90808, 90809, 90810, 90813, 90814, 90815, 90822, 90831, 90832, 90833, 90834, 90835, 90840, 90842, 90844, 90845, 90846, 90847, 90848, 90853, 90888, 90895, 90899, 91001, 91003, 91006, 91007, 91009, 91010, 91011, 91012, 91016, 91017, 91020, 91021, 91023, 91024, 91025, 91030, 91031, 91040, 91041, 91042, 91043, 91046, 91066, 91077, 91101, 91102, 91103, 91104, 91105, 91106, 91107, 91108, 91109, 91110, 91114, 91115, 91116, 91117, 91118, 91121, 91123, 91124, 91125, 91126, 91129, 91131, 91182, 91184, 91185, 91188, 91189, 91191, 91199, 91201, 91202, 91203, 91204, 91205, 91206, 91207, 91208, 91209, 91210, 91214, 91221, 91222, 91224, 91225, 91226, 91301, 91302, 91303, 91304, 91305, 91306, 91307, 91308, 91309, 91310, 91311, 91313, 91316, 91321, 91322, 91324, 91325, 91326, 91327, 91328, 91329, 91330, 91331, 91333, 91334, 91335, 91337, 91340, 91341, 91342, 91343, 91344, 91345, 91346, 91350, 91351, 91352, 91353, 91354, 91355, 91356, 91357, 91361, 91362, 91363, 91364, 91365, 91367, 91371, 91372, 91376, 91380, 91381, 91382, 91383, 91384, 91385, 91386, 91387, 91388, 91390, 91392, 91393, 91394, 91395, 91396, 91399, 91401, 91402, 91403, 91404, 91405, 91406, 91407, 91408, 91409, 91410, 91411, 91412, 91413, 91416, 91423, 91426, 91436, 91470, 91482, 91495, 91496, 91497, 91499, 91501, 91502, 91503, 91504, 91505, 91506, 91507, 91508, 91510, 91521, 91522, 91523, 91526, 91601, 91602, 91603, 91604, 91605, 91606, 91607, 91608, 91609, 91610, 91611, 91612, 91614, 91615, 91616, 91617, 91618, 91702, 91706, 91711, 91714, 91715, 91716, 91722, 91723, 91724, 91731, 91732, 91733, 91734, 91735, 91740, 91741, 91744, 91745, 91746, 91747, 91748, 91749, 91750, 91754, 91755, 91756, 91759, 91765, 91766, 91767, 91768, 91769, 91770, 91771, 91772, 91773, 91775, 91776, 91778, 91780, 91788, 91789, 91790, 91791, 91792, 91793, 91795, 91797, 91799, 91801, 91802, 91803, 91804, 91841, 91896, 91899, 93243, 93510, 93532, 93534, 93535, 93536, 93539, 93543, 93544, 93550, 93551, 93552, 93553, 93563, 93584, 93586, 93590, 93591, 93599

Table 3-1. Zip codes within sampling stratum (continued)

	Stratum	Zip code
2	San Diego	91901, 91902, 91903, 91905, 91906, 91908, 91909, 91910, 91911, 91912, 91913, 91914,
		91915, 91916, 91917, 91921, 91931, 91932, 91933, 91934, 91935, 91941, 91942, 91943,
		91944, 91945, 91946, 91947, 91948, 91950, 91951, 91962, 91963, 91976, 91977, 91978,
		91979, 91980, 91987, 91990, 92003, 92004, 92007, 92008, 92009, 92010, 92011, 92013,
		92014, 92018, 92019, 92020, 92021, 92022, 92023, 92024, 92025, 92026, 92027, 92028,
		92029, 92030, 92033, 92036, 92038, 92039, 92040, 92046, 92049, 92051, 92052, 92054,
		92055, 92056, 92057, 92059, 92060, 92061, 92064, 92065, 92066, 92067, 92068, 92069,
		92070, 92071, 92072, 92074, 92075, 92078, 92079, 92081, 92082, 92083, 92084, 92085,
		92086, 92088, 92090, 92091, 92092, 92093, 92096, 92101, 92102, 92103, 92104, 92105,
		92106, 92107, 92108, 92109, 92110, 92111, 92112, 92113, 92114, 92115, 92116, 92117,
		92118, 92119, 92120, 92121, 92122, 92123, 92124, 92126, 92127, 92128, 92129, 92130,
		92131, 92132, 92133, 92134, 92135, 92136, 92137, 92138, 92139, 92140, 92142, 92143,
		92145, 92147, 92149, 92150, 92152, 92153, 92154, 92155, 92158, 92159, 92160, 92161,
		92162, 92163, 92164, 92165, 92166, 92167, 92168, 92169, 92170, 92171, 92172, 92173,
		92174, 92175, 92176, 92177, 92178, 92179, 92182, 92184, 92186, 92187, 92190, 92191,
		92192, 92193, 92194, 92195, 92196, 92197, 92198, 92199, 92259, 92536, 92672
3	Orange	90620, 90621, 90622, 90623, 90624, 90630, 90632, 90680, 90720, 90721, 90740, 90742,
		90743, 92602, 92603, 92604, 92605, 92606, 92607, 92609, 92610, 92612, 92614, 92615,
		92616, 92617, 92618, 92619, 92620, 92623, 92624, 92625, 92626, 92627, 92628, 92629,
		92630, 92637, 92646, 92647, 92648, 92649, 92650, 92651, 92652, 92653, 92654, 92655,
		92656, 92657, 92658, 92659, 92660, 92661, 92662, 92663, 92673, 92674, 92675, 92676,
		92677, 92678, 92679, 92683, 92684, 92685, 92688, 92690, 92691, 92692, 92693, 92694,
		92697, 92698, 92701, 92702, 92703, 92704, 92705, 92706, 92707, 92708, 92709, 92710,
		92711, 92712, 92725, 92728, 92735, 92780, 92781, 92782, 92799, 92801, 92802, 92803,
		92804, 92805, 92806, 92807, 92808, 92809, 92811, 92812, 92814, 92815, 92816, 92817,
		92821, 92822, 92823, 92825, 92831, 92832, 92833, 92834, 92835, 92836, 92837, 92838,
		92840, 92841, 92842, 92843, 92844, 92845, 92846, 92850, 92856, 92857, 92859, 92861,
		92862, 92863, 92864, 92865, 92866, 92867, 92868, 92869, 92870, 92871, 92885, 92886,
		92887, 92899
4	Santa Clara	94022, 94023, 94024, 94035, 94039, 94040, 94041, 94042, 94043, 94085, 94086, 94087,
		94088, 94089, 94301, 94302, 94303, 94304, 94305, 94306, 94309, 95002, 95008, 95009,
		95011, 95013, 95014, 95015, 95020, 95021, 95026, 95030, 95031, 95032, 95035, 95036,
		95037, 95038, 95042, 95044, 95046, 95050, 95051, 95052, 95053, 95054, 95055, 95056,
		95070, 95071, 95101, 95103, 95106, 95108, 95109, 95110, 95111, 95112, 95113, 95115,
		95116, 95117, 95118, 95119, 95120, 95121, 95122, 95123, 95124, 95125, 95126, 95127,
		95128, 95129, 95130, 95131, 95132, 95133, 95134, 95135, 95136, 95138, 95139, 95140,
		95141, 95148, 95150, 95151, 95152, 95153, 95154, 95155, 95156, 95157, 95158, 95159,
		95160, 95161, 95164, 95170, 95172, 95173, 95190, 95191, 95192, 95193, 95194, 95196,

Table 3-1. Zip codes within sampling stratum (continued)

	Stratum	Zip code
5	San Bernardino	91701, 91708, 91709, 91710, 91729, 91730, 91737, 91739, 91743, 91758, 91761, 91762,
		91763, 91764, 91784, 91785, 91786, 91798, 92242, 92252, 92256, 92267, 92268, 92277,
		92278, 92280, 92284, 92285, 92286, 92301, 92304, 92305, 92307, 92308, 92309, 92310,
		92311, 92312, 92313, 92314, 92315, 92316, 92317, 92318, 92321, 92322, 92323, 92324,
		92325, 92326, 92327, 92329, 92331, 92332, 92333, 92334, 92335, 92336, 92337, 92338,
		92339, 92340, 92341, 92342, 92344, 92345, 92346, 92347, 92350, 92352, 92354, 92356,
		92357, 92358, 92359, 92363, 92364, 92365, 92366, 92368, 92369, 92371, 92372, 92373,
		92374, 92375, 92376, 92377, 92378, 92382, 92385, 92386, 92391, 92392, 92393, 92394,
		92395, 92397, 92398, 92399, 92401, 92402, 92403, 92404, 92405, 92406, 92407, 92408,
		92410, 92411, 92412, 92413, 92414, 92415, 92418, 92423, 92424, 92427, 93562, 93592
6	Riverside	91752, 92201, 92202, 92203, 92210, 92211, 92220, 92223, 92225, 92226, 92230, 92234,
		92235, 92236, 92239, 92240, 92241, 92247, 92248, 92253, 92254, 92255, 92258, 92260,
		92261, 92262, 92263, 92264, 92270, 92274, 92276, 92282, 92292, 92320, 92501, 92502,
		92503, 92504, 92505, 92506, 92507, 92508, 92509, 92513, 92514, 92515, 92516, 92517,
		92518, 92519, 92521, 92522, 92530, 92531, 92532, 92539, 92543, 92544, 92545, 92546,
		92548, 92549, 92551, 92552, 92553, 92554, 92555, 92556, 92557, 92561, 92562, 92563,
		92564, 92567, 92570, 92571, 92572, 92581, 92582, 92583, 92584, 92585, 92586, 92587,
		92589, 92590, 92591, 92592, 92593, 92595, 92596, 92599, 92860, 92877, 92878, 92879,
		92880, 92881, 92882, 92883
7	Alameda	94501, 94502, 94536, 94537, 94538, 94539, 94540, 94541, 94542, 94543, 94544, 94545,
		94546, 94550, 94551, 94552, 94555, 94557, 94560, 94566, 94568, 94577, 94578, 94579,
		94580, 94586, 94587, 94588, 94601, 94602, 94603, 94604, 94605, 94606, 94607, 94608,
		94609, 94610, 94611, 94612, 94613, 94614, 94615, 94617, 94618, 94619, 94620, 94621,
		94622, 94623, 94624, 94625, 94649, 94659, 94660, 94661, 94662, 94666, 94701, 94702,
		94703, 94704, 94705, 94706, 94707, 94708, 94709, 94710, 94712, 94720
8	Sacramento	94203, 94204, 94205, 94206, 94207, 94208, 94209, 94211, 94229, 94230, 94232, 94234,
		94235, 94236, 94237, 94239, 94240, 94244, 94245, 94246, 94247, 94248, 94249, 94250,
		94252, 94254, 94256, 94257, 94258, 94259, 94261, 94262, 94263, 94267, 94268, 94269,
		94271, 94273, 94274, 94277, 94278, 94279, 94280, 94282, 94283, 94284, 94285, 94286,
		94287, 94288, 94289, 94290, 94291, 94293, 94294, 94295, 94296, 94297, 94298, 94299,
		95608, 95609, 95610, 95611, 95615, 95621, 95624, 95626, 95628, 95630, 95632, 95638,
		95639, 95641, 95652, 95655, 95660, 95662, 95670, 95671, 95673, 95680, 95683, 95690,
		95693, 95741, 95742, 95757, 95758, 95759, 95763, 95812, 95813, 95814, 95815, 95816,
		95817, 95818, 95819, 95820, 95821, 95822, 95823, 95824, 95825, 95826, 95827, 95828,
		95829, 95830, 95831, 95832, 95833, 95834, 95835, 95836, 95837, 95838, 95840, 95841,
		95842, 95843, 95851, 95852, 95853, 95860, 95864, 95865, 95866, 95867, 95887, 95894,
		95899
9	Contra Costa	94506, 94507, 94509, 94511, 94513, 94514, 94516, 94517, 94518, 94519, 94520, 94521,
		94522, 94523, 94524, 94525, 94526, 94527, 94528, 94529, 94530, 94531, 94547, 94548,
		94549, 94553, 94556, 94561, 94563, 94564, 94565, 94569, 94570, 94572, 94575, 94582,
		94583, 94595, 94596, 94597, 94598, 94801, 94802, 94803, 94804, 94805, 94806, 94807,
		94808, 94820, 94850

Table 3-1. Zip codes within sampling stratum (continued)

	Stratum	Zip code
10	Fresno	93210, 93234, 93242, 93602, 93605, 93606, 93607, 93608, 93609, 93611, 93612, 93613, 93616, 93619, 93621, 93622, 93624, 93625, 93626, 93627, 93628, 93630, 93631, 93634, 93640, 93641, 93642, 93646, 93648, 93649, 93650, 93651, 93652, 93654, 93656, 93657, 93660, 93662, 93664, 93667, 93668, 93675, 93701, 93702, 93703, 93704, 93705, 93706, 93707, 93708, 93709, 93710, 93711, 93712, 93714, 93715, 93716, 93717, 93718, 93720, 93721, 93722, 93723, 93724, 93725, 93726, 93727, 93728, 93729, 93730, 93740, 93741, 93744, 93745, 93747, 93750, 93755, 93760, 93761, 93764, 93765, 93771, 93772, 93773, 93774, 93775, 93776, 93777, 93778, 93779, 93780, 93784, 93786, 93790, 93791, 93792, 93793, 93794, 93844, 93888
11	San Francisco	94101, 94102, 94103, 94104, 94105, 94106, 94107, 94108, 94109, 94110, 94111, 94112, 94114, 94115, 94116, 94117, 94118, 94119, 94120, 94121, 94122, 94123, 94124, 94125, 94126, 94127, 94129, 94130, 94131, 94132, 94133, 94134, 94135, 94136, 94137, 94138, 94139, 94140, 94141, 94142, 94143, 94144, 94145, 94146, 94147, 94150, 94151, 94152, 94153, 94154, 94155, 94156, 94157, 94158, 94159, 94160, 94161, 94162, 94163, 94164, 94165, 94166, 94167, 94168, 94169, 94170, 94171, 94172, 94175, 94177, 94188, 94199
12	Ventura	91319, 91320, 91358, 91359, 91360, 91377, 93001, 93002, 93003, 93004, 93005, 93006, 93007, 93009, 93010, 93011, 93012, 93015, 93016, 93020, 93021, 93022, 93023, 93024, 93030, 93031, 93032, 93033, 93034, 93035, 93036, 93040, 93041, 93042, 93043, 93044, 93060, 93061, 93062, 93063, 93064, 93065, 93066, 93093, 93094, 93099
13	San Mateo	94002, 94005, 94010, 94011, 94013, 94014, 94015, 94016, 94017, 94018, 94019, 94020, 94021, 94025, 94026, 94027, 94028, 94030, 94037, 94038, 94044, 94060, 94061, 94062, 94063, 94064, 94065, 94066, 94070, 94074, 94080, 94083, 94096, 94098, 94128, 94401, 94402, 94403, 94404, 94497
14	Kern	93203, 93205, 93206, 93215, 93216, 93220, 93222, 93224, 93225, 93226, 93238, 93240, 93241, 93249, 93250, 93251, 93252, 93255, 93263, 93268, 93276, 93280, 93283, 93285, 93287, 93301, 93302, 93303, 93304, 93305, 93306, 93307, 93308, 93309, 93311, 93312, 93313, 93314, 93380, 93381, 93382, 93383, 93384, 93385, 93386, 93387, 93388, 93389, 93390, 93501, 93502, 93504, 93505, 93516, 93518, 93519, 93523, 93524, 93527, 93528, 93531, 93554, 93555, 93556, 93558, 93560, 93561, 93581, 93596
15	San Joaquin	95201, 95202, 95203, 95204, 95205, 95206, 95207, 95208, 95209, 95210, 95211, 95212, 95213, 95215, 95219, 95220, 95227, 95231, 95234, 95236, 95237, 95240, 95241, 95242, 95253, 95258, 95267, 95269, 95296, 95297, 95304, 95320, 95330, 95336, 95337, 95366, 95376, 95377, 95378, 95391, 95686
16	Sonoma	94922, 94923, 94926, 94927, 94928, 94931, 94951, 94952, 94953, 94954, 94955, 94972, 94975, 94999, 95401, 95402, 95403, 95404, 95405, 95406, 95407, 95408, 95409, 95412, 95416, 95419, 95421, 95425, 95430, 95431, 95433, 95436, 95439, 95441, 95442, 95444, 95446, 95448, 95450, 95452, 95462, 95465, 95471, 95472, 95473, 95476, 95480, 95487, 95492, 95497
17	Stanislaus	95230, 95307, 95313, 95316, 95319, 95323, 95326, 95328, 95350, 95351, 95352, 95353, 95354, 95355, 95356, 95357, 95358, 95360, 95361, 95363, 95367, 95368, 95380, 95381, 95382, 95385, 95386, 95387, 95397

Table 3-1. Zip codes within sampling stratum (continued)

Stratum		Zip code			
18	Santa Barbara	93013, 93014, 93067, 93101, 93102, 93103, 93105, 93106, 93107, 93108, 93109, 93110, 93111, 93116, 93117, 93118, 93120, 93121, 93130, 93140, 93150, 93160, 93190, 93199, 93254, 93427, 93429, 93434, 93436, 93437, 93438, 93440, 93441, 93454, 93455, 93456, 93457, 93458, 93460, 93463, 93464			
19	Solano	94510, 94512, 94533, 94534, 94535, 94571, 94585, 94589, 94590, 94591, 94592, 95620, 95625, 95687, 95688, 95696			
20	Tulare	93201, 93207, 93208, 93218, 93219, 93221, 93223, 93227, 93235, 93237, 93244, 93247, 93256, 93257, 93258, 93260, 93261, 93262, 93265, 93267, 93270, 93271, 93272, 93274, 93275, 93277, 93278, 93279, 93282, 93286, 93290, 93291, 93292, 93603, 93615, 93618, 93633, 93647, 93666, 93670, 93673			
21	Santa Cruz	95001, 95003, 95005, 95006, 95007, 95010, 95017, 95018, 95019, 95033, 95041, 95060, 95061, 95062, 95063, 95064, 95065, 95066, 95067, 95073, 95076, 95077			
22	Marin	94901, 94903, 94904, 94912, 94913, 94914, 94915, 94920, 94924, 94925, 94929, 94930, 94933, 94937, 94938, 94939, 94940, 94941, 94942, 94945, 94946, 94947, 94948, 94949, 94950, 94956, 94957, 94960, 94963, 94964, 94965, 94966, 94970, 94971, 94973, 94974, 94976, 94977, 94978, 94979, 94998			
23	San Luis Obispo	93401, 93402, 93403, 93405, 93406, 93407, 93408, 93409, 93410, 93412, 93420, 93421, 93422, 93423, 93424, 93428, 93430, 93432, 93433, 93435, 93442, 93443, 93444, 93445, 93446, 93447, 93448, 93449, 93451, 93452, 93453, 93461, 93465, 93475, 93483			
24	Placer	95602, 95603, 95604, 95631, 95648, 95650, 95658, 95661, 95663, 95677, 95678, 95681, 95701, 95703, 95713, 95714, 95715, 95717, 95722, 95736, 95746, 95747, 95765, 96140, 96141, 96143, 96145, 96146, 96148			
25	Merced	93620, 93635, 93661, 93665, 95301, 95303, 95312, 95315, 95317, 95322, 95324, 95333, 95334, 95340, 95341, 95343, 95344, 95348, 95365, 95369, 95374, 95388			
26	Butte	95914, 95916, 95917, 95925, 95926, 95927, 95928, 95929, 95930, 95938, 95940, 95941, 95942, 95948, 95954, 95958, 95965, 95966, 95967, 95968, 95969, 95973, 95974, 95976, 95978			
27	Shasta	96001, 96002, 96003, 96007, 96008, 96011, 96013, 96016, 96017, 96019, 96028, 96033, 96040, 96047, 96049, 96051, 96062, 96065, 96069, 96070, 96071, 96073, 96079, 96084, 96087, 96088, 96089, 96095, 96096, 96099			
28	Yolo	95605, 95606, 95607, 95612, 95616, 95617, 95618, 95627, 95637, 95653, 95679, 95691, 95694, 95695, 95697, 95698, 95776, 95798, 95799, 95937			
29	El Dorado	95613, 95614, 95619, 95623, 95629, 95633, 95634, 95635, 95636, 95651, 95656, 95664, 95667, 95672, 95682, 95684, 95709, 95720, 95721, 95726, 95735, 95762, 96142, 96150, 96151, 96152, 96154, 96155, 96156, 96157, 96158			
30	Imperial	92222, 92227, 92231, 92232, 92233, 92243, 92244, 92249, 92250, 92251, 92257, 92266, 92273, 92275, 92281, 92283			
31	Napa	94503, 94508, 94515, 94558, 94559, 94562, 94567, 94573, 94574, 94576, 94581, 94599			
32	Kings	93202, 93204, 93212, 93230, 93232, 93239, 93245, 93246, 93266			

Table 3-1. Zip codes within sampling stratum (continued)

Stratum		Zip code			
33	Madera	93601, 93604, 93610, 93614, 93636, 93637, 93638, 93639, 93643, 93644, 93645, 93653, 93669			
34	Monterey	93426, 93450, 93901, 93902, 93905, 93906, 93907, 93908, 93912, 93915, 93920, 93921, 93922, 93923, 93924, 93925, 93926, 93927, 93928, 93930, 93932, 93933, 93940, 93942, 93943, 93944, 93950, 93953, 93954, 93955, 93960, 93962, 95004, 95012, 95039			
35	Humboldt	95501, 95502, 95503, 95511, 95514, 95518, 95519, 95521, 95524, 95525, 95526, 95528, 95534, 95536, 95537, 95540, 95542, 95545, 95546, 95547, 95549, 95550, 95551, 95553, 95554, 95555, 95556, 95558, 95559, 95560, 95562, 95564, 95565, 95569, 95570, 95571, 95573, 95589			
36	Nevada	95712, 95724, 95728, 95924, 95945, 95946, 95949, 95959, 95960, 95975, 95977, 95986, 96111, 96160, 96161, 96162			
37	Mendocino	95410, 95415, 95417, 95418, 95420, 95427, 95428, 95429, 95432, 95437, 95445, 95449, 95454, 95456, 95459, 95460, 95463, 95466, 95468, 95469, 95470, 95481, 95482, 95488, 95490, 95494, 95585, 95587			
38	Sutter	95645, 95659, 95668, 95674, 95676, 95953, 95957, 95982, 95991, 95992, 95993			
39	Yuba	95692, 95901, 95903, 95918, 95919, 95922, 95935, 95961, 95962, 95972, 95981			
40	Lake	95422, 95423, 95424, 95426, 95435, 95443, 95451, 95453, 95457, 95458, 95461, 95464, 95467, 95485, 95493			
41	San Benito	95023, 95024, 95043, 95045, 95075			
42	Colusa, Glenn, Tehama,	95912, 95913, 95920, 95932, 95939, 95943, 95950, 95951, 95955, 95963, 95970, 95979, 95987, 95988, 96021, 96022, 96029, 96035, 96055, 96059, 96061, 96063, 96074, 96075, 96076, 96078, 96080, 96090, 96092			
43	Del Norte, Lassen, Modoc, Plumas, Sierra, Siskiyou, Trinity	95527, 95531, 95532, 95538, 95543, 95548, 95552, 95563, 95567, 95568, 95595, 95910, 95915, 95923, 95934, 95936, 95944, 95947, 95956, 95971, 95980, 95983, 95984, 96006, 96009, 96010, 96014, 96015, 96020, 96023, 96024, 96025, 96027, 96031, 96032, 96034, 96037, 96038, 96039, 96041, 96044, 96046, 96048, 96050, 96052, 96054, 96056, 96057, 96058, 96064, 96067, 96068, 96085, 96086, 96091, 96093, 96094, 96097, 96101, 96103, 96104, 96105, 96106, 96108, 96109, 96110, 96112, 96113, 96114, 96115, 96116, 96117, 96118, 96119, 96121, 96122, 96123, 96124, 96125, 96126, 96127, 96128, 96129, 96130, 96132, 96134, 96135, 96136, 96137			
44	Alpine, Amador, Calaveras, Inyo, Mariposa, Mono, Tuolumne	92328, 92384, 92389, 93512, 93513, 93514, 93515, 93517, 93522, 93526, 93529, 93530, 93541, 93542, 93545, 93546, 93549, 93623, 95221, 95222, 95223, 95224, 95225, 95226, 95228, 95229, 95232, 95233, 95245, 95246, 95247, 95248, 95249, 95250, 95251, 95252, 95254, 95255, 95257, 95305, 95306, 95309, 95310, 95311, 95314, 95318, 95321, 95325, 95327, 95329, 95335, 95338, 95345, 95346, 95347, 95364, 95370, 95372, 95373, 95375, 95379, 95383, 95389, 95601, 95640, 95642, 95644, 95646, 95654, 95665, 95666, 95669, 95675, 95685, 95689, 95699, 96107, 96120, 96133			

Source: UCLA Center for Health Policy Research, 2005 California Health Interview Survey.

Table 3-2. Final distribution of adult extended completed cases by self-reported and original sampling stratum

	Sampling stratum			Final self-reported
Stratum name	count	Removed	Added	stratum count
1 – Los Angeles	8,712	76	86	8,722
2 – San Diego	3,828	8	8	3,828
3 – Orange	2,493	70	24	2,447
4 – Santa Clara	1,443	30	32	1,445
5 – San Bernardino	1,325	26	32	1,331
6 – Riverside	1,322	6	21	1,337
7 – Alameda	1,318	54	21	1,285
8 – Sacramento	1,166	9	14	1,171
9 – Contra Costa	843	11	62	894
10 – Fresno	598	15	12	595
11 – San Francisco	777	25	11	763
12 – Ventura	632	5	27	654
13 – San Mateo	661	13	47	695
14 – Kern	606	10	5	601
15 – San Joaquin	469	3	5	471
16 – Sonoma	488	7	15	496
17 – Stanislaus	467	26	3	444
18 – Santa Barbara	472	4	1	469
19 – Solano	1,216	34	7	1,189
20 – Tulare	473	3	15	485
21 – Santa Cruz	517	17	2	502
22 – Marin	3,111	21	7	3,097
23 – San Luis Obispo	491	7	6	490
24 – Placer	474	25	22	471
25 – Merced	490	1	24	513
26 – Butte	467	2	11	476
27 – Shasta	502	23	3	482
28 – Yolo	479	10	17	486
29 – El Dorado	459	7	9	461
30 – Imperial	426	1	0	425
31 – Napa	477	10	23	490
32 – Kings	469	5	2	466
33 – Madera	478	11	6	473
34 – Monterey	539	6	21	554
35 – Humboldt	822	12	8	818
36 – Nevada	403	13	12	402
37 – Mendocino	417	10	4	411
38 – Sutter	385	12	7	380
39 – Yuba	378	28	7	357
40 – Lake	384	7	1	378
41 – San Benito	351	3	3	351
42 – Colusa, Glenn, Tehama	412	1	19	430
43 – Del Norte, Lassen, Modoc, Plumas,	712	1	17	430
Sierra, Siskiyou, Trinity	383	6	19	396
44 – Alpine, Amador, Calaveras, Inyo,	503	J	17	370
Mariposa, Mono, Tuolumne	397	16	8	389
Total	43,020	689	689	43,020
	15,020	007	007	13,020

Source: UCLA Center for Health Policy Research, 2005 California Health Interview Survey.

# 3.1.1 School Name and Geographic Coding

In CHIS 2005, the child and adolescent interviews included a new item that collected the name of the school attended by the selected child or adolescent (CB22 and TA4B, respectively). The sampled adult or the most knowledgeable adult (MKA) reported the child's school name and adolescents answered for themselves during their interview. Interviewers recorded the respondent's answers as a verbatim text entry in the CATI system. School latitude and longitude were then assigned to each schoolaged child and adolescent case for which a school name was reported in open text.

A review of the child interview data showed a number of spelling problems associated with item CB22 ("What is the name of the school {CHILD NAME /AGE/SEX} goes to or last attended"?). In many cases, the adult respondent was English-speaking (and was speaking to an English speaking interviewer) but was reporting a Spanish school name. Asian and some Latino (or Hispanic) respondents, whose first language is not English, had similar difficulties in accurately reporting or spelling the school name.

Westat data preparation staff used the California School Directory, Microsoft Street and Trips, and <a href="www.publicschooolreview.com">www.publicschooolreview.com</a> in conjunction with the respondent's Zip code as resources to improve the quality of school names and their location before release to UCLA for geocoding. CHIS staff used a California school directory to identify both public and private schools that were mentioned in the child or adolescent interview. SAS statistical programming was used to merge in open text from CB22 and TA4B as well as county of residence with relevant data fields in the school list database. Full matches were assigned a successful matching code. For cases that could not be automatically matched using statistical programming (e.g. spelling errors, county mismatch), additional CHIS variables were used to accurately identify and manually assign the name of the school. These included age of respondent, zip code, city, and county of home residence. Additional information in the state school database was used to verify the child or teen's school, including school district, school county, school city, school zip, and school grade range. Web-based searches were also used to assign geographic school information not found in the California school directory.

For all matched public schools, latitude and longitude were provided in the state-issued school database of California. Private schools were sent out for geocoding to a private vendor. Cases for which the child or teen attended a home school or non-traditional program or where a school could not be

identified were assigned an undetermined value. Children under the age of 5 years were assigned an inapplicable value

# 3.2 Industry and Occupation Coding

The adult extended interview for CHIS 2005 included three questions about occupation and industry. These same items were asked in both CHIS 2001 and CHIS 2003. The three questions are:

AK4, "On your MAIN job, are you employed by: a private company, the government, OR are you self-employed, OR are you working without pay in a family business or farm?"

AK5, "What kind of business or industry is this?"

AK6, "What is the main kind of work YOU do?"

In CHIS 2005 and CHIS 2003, all respondents who indicated they were working were asked about their business or industry (AK5). In CHIS 2001, respondents who reported working for the Federal, state, or local government in question AK4, were not asked the business or industry question (AK5). All adult respondents who indicated that they were working were then asked about the main kind of work that they do (AK6).

The goal of the coding of occupation and industry was to produce codes consistent with other published industry and occupation coded surveys. Westat subcontracted with the Census Bureau for the coding effort to ensure consistency. Census Bureau staff coded the data provided by Westat using "Concepts and Methods used in Labor Force Statistics Derived from the Current Population Survey," a joint publication of the Bureau of Labor Statistics and the Bureau of the Census (1976).

CHIS 2005 responses were coded (with 100 percent verification) by the Census Bureau using the 2000 Standard Occupational Classification System (SOC) and the 2002 North American Industry Classification System (NAICS). The 2002 NAICS is an updated and expanded version of the 4-digit Standard Industrial Classification (SIC) coding systems that was used to code CHIS 2001 responses. The newer NAICS uses a 6-digit coding system that improves the level of coding detail and expands the 9 divisions found in the SIC to more than 20 sectors in the NAICS. We stat reviewed the cases coded by the Census Bureau and posted them to the CHIS database.

Of all the random digit dialing (RDD) adult extended respondents (including both completed and partially completed interviews contained in the data delivery file), about 61 percent answered the industry (AK5) and/or the occupation item (AK6). The Census Bureau staff coded 99.2 percent of the cases submitted for the industry question and 98.6 percent of the occupation question. The few remaining cases were either blank or were reported as uncodeable.

#### 4. RACE AND ETHNICITY CODING

The procedures for coding the information collected in CHIS 2005 about respondent race and ethnicity remained virtually unchanged from the prior CHIS cycles. The core survey items about race and ethnicity remained consistent with those in the 2000 Decennial Census, except for the required interviewer probe "any other race" added for all CHIS cycles. This section describes how we handled situations when the respondent reported a race or ethnicity that was not classified into one of the pre-existing categories. These responses were recorded in the "other specify" category as a text string. The procedures for coding these "other specify" responses into existing codes (up-coding) or leaving them in the other category are presented here.

The first question in the series of items related to race and ethnicity (question AA4 in the adult extended interview) asked if the respondent was Latino or Hispanic. If the response to this item was "yes," then a question (AA5) was asked about the specific origin (Mexican, etc.) and this includes an "other" category with responses entered by interviewers as text in question AA5OS. Item AA5A from CHIS 2005 asked respondents for their race: "Please tell me which one or more of the following you would use to describe yourself. Would you describe yourself as Native Hawaiian, Other Pacific Islander, American Indian, Alaska Native, Asian, Black, African American, or White?" The race question allowed the respondent to indicate that they belonged to any or all of the coded races (Native Hawaiian, Other Pacific Islander, American Indian or Alaska Native, Asian, African American, or White) and also to say "other" race. The "other specify" race was recorded in text (AA5AOS). Another item followed if the respondent indicated they identified with more than one race or ethnicity. That item asked which race or ethnicity the respondent most identified with (AA5F). This item did not allow interviewers to collect an "other-specify," but responses to this item could be used in the coding decisions for other items.

# 4.1 Coding Procedures

The procedures for the race and ethnicity coding Westat performed were designed specifically to support the data needs for weighting the CHIS sample. If codes could not be assigned for race or ethnicity they were left as missing and were later imputed. The imputation procedures are described in CHIS 2005 Methodology Series: Report 5 - Weighting and Variance Estimation.

The procedures we used were consistent with the ones used to code the 2000 Census data and with those used in both CHIS 2003 and CHIS 2001. The methods used in the 2000 Census are documented in *Census 2000 Redistricting Data (Public Law 94-171) Summary File – Technical Documentation* (U.S. Census Bureau, 2001) available at http://www.census.gov/prod/www/abs/pl94-171.pdf. The specific sections of interest are in Appendix B, pages B-2 and B-3. When we refer to the Census procedures, we mean our interpretation of the information in this document.

An initial review of cases showed that the largest group of cases with "other race" categories were ones in which the respondent identified as being Hispanic or Latino and did not identify with any pre-coded race categories. The typical response to the "other race" was "Hispanic." Following the Census procedures, the person was left in the "other race" category and the "other specify" text remained as it was.

The specific procedures and guidelines we used are detailed below and are unchanged from those used in the past administrations of the survey. Responses captured in the other specify text field were retained and included in the final data set delivery to UCLA to accommodate other research and analytic needs.

- If the "other specify" text clearly should have been included in an existing code (following the Census procedures), then it was up-coded and removed from the "other" category. For example, if the respondent was coded only as other race and the "other specify" was "Irish," then the code for "white" was upcoded to "yes," other race was revised to "no" and the other specify text eliminated.
- If the "other specify" text did not fit into an existing code (following the Census procedures), then it was left in the "other" category with the existing text in the "other specify." For example, if the "other specify" text for race was "Indian" and no other race category was identified, then no changes were made in the responses.
- If the respondent was coded as being Hispanic or Latino, we never revised this code based upon information in the other specify comments of the other variables. For example, if the person was coded as "Hispanic" and the specific Hispanic origin item was only coded as "other" with the text "Jewish," then the Hispanic code was not altered.

- If the respondent was coded as not being Hispanic or Latino but the text in the "other specify" field for race indicated they were Hispanic or Latino, then the Hispanic or Latino coding was revised to "yes." In addition, the specific Hispanic origin code was made consistent with text in the "other specify" text from the race variable, if it was possible to do so. In the case where this was not possible, the "other" Hispanic origin category was coded and the text copied from the race variable to the "other specify" for Hispanic origin. (This procedure is an elaboration of the ones above to deal with the cross-variable coding.) For example, if the race "other specify" code was "Mexican," then the Hispanic or Latino category was revised to be "yes" and the Hispanic origin code was coded as "yes" for Mexican.
- If the "other race" text was similar to "none of above," we left the response as it was.
- If the "other race" text was similar to "human race," we coded this as a refusal. The race was then imputed along with other cases that were more direct refusals.

The Census procedures clearly state that persons who say they have European, Middle Eastern, or North African origin are to be classified as "White" race. This rule has many implications. For example, suppose a person says they are not Hispanic and only identify the "other race" as being Spain. We would upcode Hispanic origin to "yes" (to be consistent with the Census procedures for Hispanic origin) and then upcode "race" to "White" (since the person is of European origin).

#### REFERENCES

- U.S. Census Bureau. (2001). Census 2000 Redistricting Data (Public Law 94-171) Summary File Technical Documentation.
- U.S. Department of Commerce, Bureau of the Census, and U.S. Department of Labor, Bureau of Labor Statistics. (1976). *Concepts and Methods Used in Labor Force Statistics Derived From the Current Population Survey*, Current Population Reports. Special Studies Ser. P23, No. 62. Washington, D.C.: Government Printing Office.
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