

California Health Interview Survey

Making
California's
Voices
Heard on
Health



10960 Wilshire Blvd.
Suite 1550
Los Angeles, CA
90024
t: 310.794.0909
f: 310.794.2686
chis@ucla.edu

What's New and Notable in CHIS 2021-2022

This document describes new and notable design features and data collected in California Health Interview Survey (CHIS) 2021-2022. CHIS data users should review the information below and detailed online documentation before analyzing or reporting CHIS data. For more details on CHIS methods, please visit the [CHIS Methodology page](#).

Oversamples

As with previous cycles, CHIS 2021-2022 saw an oversample in San Diego County thanks to funds provided by the County of San Diego Health and Human Services Agency.

To provide researchers at Cedars-Sinai with sufficient sample to produce estimates for cancer screening questions, CHIS 2021 oversampled for a total target of 800 Latinos or Asians who are aged 50 or older in LA County Service Planning Areas (SPAs) 1,2,4, and 5.

CHIS 2021-2022 conducted an additional oversample of 250 adults (125 in each year) who identify as American Indian or Alaska Native (AIAN) and live in rural areas.

To better target populations not adequately covered by the primary address-based sample (ABS) frame, CHIS 2021-2022 utilized an additional prepaid cell phone frame and targeted 900 completes for this oversample.

To provide Santa Clara County with sufficient samples to produce estimates for a variety of topics, CHIS 2022 oversampled 1,925 respondents from the county.

CHIS 2022 also oversampled 400 adults from 13 ZIP codes in LA county SPAs 6, 7, 8 that surround the Martin Luther King Community Healthcare hospital.

New and Updated Survey Questions

Survey questions are added, removed, and modified in each two-year cycle of CHIS to meet stakeholders' needs and monitor emerging

public health concerns. Questions are removed from the interview to reduce its length and save data collection costs when topics are no longer relevant for public health surveillance, or when sponsor funding is no longer available. For CHIS 2021-2022 approximately 80% of the content continued from CHIS 2020. Occasionally, changes to question wording are made based on methodological evaluations or when user feedback strongly suggests that changes will produce better data. Otherwise, questions are consistent across years to aid in trending and pooling. Reinstated questions were asked in cycles prior to 2019-2020, and again in 2021-2022.

Continued...

Noteworthy Additions to CHIS 2021-2022

New Adult Questionnaire Topics in 2021-2022

- Climate change, and related impacts on physical health, mental health, and finance^{1,2}
- Presence of firearms in the home and storage practices, concerns about firearm victimization, quick access to firearm^{1,2,3}
- CBD (cannabidiol) use, frequency of use, method of use^{1,2}
- Housing security/stability^{1,2}
- Encounters with police or court system^{1,2,3}
- Adverse childhood experiences (ACEs), past ACEs assessment, importance of ACEs, positive childhood experiences^{1,2,3}
- Paid family leave^{1,2}
- Notice of action from Medi-Cal¹
- COVID-19 vaccination status (2022 only)^{1,2,5}
- COVID-19 information source (2022 only)^{1,2,5}
- COVID-19 risk reduction practices^{1,2,4}
- Reinstated content:
 - Alcohol use, last use, alcohol consumption in past month, binge drinking^{1,2}
 - Intimate partner violence^{2,3}
 - Pre-diabetes/borderline diabetes^{1,2}
 - Discrimination in a healthcare setting, recency of discrimination^{1,2}
 - Length of residency^{1,2}

Continued...

New Adult Questionnaire Topics in 2021-2022 (Cont'd)

- Experienced hate incident (2022 only)^{1,2}
- Detailed White origin³: Middle East and North Africa¹
- Detailed Black origin³: Caribbean; Sub-Saharan African¹

New Child Questionnaire Topics in 2021-2022

- Past adverse childhood experiences (ACEs) assessment^{1,2}
- Book ownership, source of reading materials, challenges to reading to child^{1,2}
- Number of dental visits in past 12 months, dental service source^{1,2}
- Reinstated content: Sugar-sweetened beverages^{1,2}
- Detailed White origin³: Middle East and North Africa³
- Detailed Black origin³: Caribbean; Sub-Saharan African³
- COVID-19 vaccination status (2022 only)^{1,2,5}

New Adolescent Questionnaire Topics in 2021-2022

- Impact of climate change on mental health^{1,2}
- Encounters with police or court system^{1,2,3}
- Adverse childhood experiences (ACEs), past ACEs assessment, importance of ACEs, positive childhood experiences^{1,2,3}
- Reinstated content:
 - Sugar-sweetened beverages^{1,2}
 - Presence of firearms in the home and storage practices, concerns about firearm victimization, quick access to firearm^{1,2,3}
 - Number of school days missed due to dental problem^{1,2}
- Detailed White origin³: Middle East and North Africa³
- Detailed Black origin³: Caribbean; Sub-Saharan African³
- COVID-19 vaccination status (2022 only)^{1,2,5}

¹ Available in Public Use Files (PUFs).

² Available through [AskCHIS™](#).

³ Confidential data only available through the Data Access Center (DAC). For more information, visit the [DAC webpage](#).

⁴ Preliminary 2021 COVID-19 estimates are available on the Center's [2021 CHIS COVID-19 Preliminary Estimates Dashboard](#).

⁵ Preliminary 2022 COVID-19 estimates are available on the Center's [2022 CHIS COVID-19 Preliminary Estimates Dashboard](#).

A full list of topics in CHIS 2021-2022 are available on the [CHIS Survey Topics page](#). The full CHIS 2021-2022 questionnaires are available on the [CHIS Questionnaires page](#).

Targeting Through Predictive Modeling

CHIS 2021-2022 employed Big Data techniques to help target specific, commonly underrepresented demographic groups. Individual sample flags and geographic density indicators of households with certain attributes were applied to predictive models evaluation in CHIS 2021-2022.

For more details on the predictive modeling, see [CHIS 2021-2022 Methodology Report 1 — Sample Design](#).

Data Collection Methodology Innovations

CHIS 2021 conducted an experiment with a visible cash incentive in the initial invitation letters to improve sample yield. Sampled households were evenly split and randomly assigned to envelope conditions: (1) a windowed envelope where a portion of the \$2 bill was visible; (2) a traditional envelope where the \$2 bill was not visible. Households that received the windowed envelope with visible cash were found to be significantly more likely to complete the survey than those with a traditional envelope. The visible cash design was implemented for the remainder of the 2021 survey year and future CHIS survey cycles.

CHIS 2022 launched an experiment to test whether eliminating transition statements in survey questions leads to a reduction in break-offs. Respondents were randomly assigned to two conditions: (1) the transition statements were removed from the selected questions; (2) the original question wording, including transition statements. Results show that eliminating transition statements results in substantive survey break-offs reductions. As a result, all transition statements except an outlier have been removed in CHIS 2022 survey year.

Data Collection Timeline

CHIS 2021-2022 data were collected between March 2021 and November 2022. Approximately 90% of adult interviews were completed over the web with the remainder over the phone.

For small populations or rare conditions and characteristics, pooling two or more single-year datasets may be required to achieve sufficient sample size and statistical stability. Users who need more information about pooling or trending data over time should review the [Analyze CHIS Data website](#) or go to the [CHIS FAQs page](#). You can also email questions to dacchpr@ucla.edu.



The California Health Interview Survey (CHIS) is conducted by the **UCLA Center for Health Policy Research**

Learn more about CHIS at
chis.ucla.edu

August 2023