### Green Jobs and Health Care Impact Evaluation

## **OMB Clearance Package for Follow-Up Data Collection**

### Part B

August 2013

#### CONTENTS

PART B: COLLECTION OF INFORMATION INVOLVING STATISTICAL METHODS 1

- A. Respondent Universe And Sampling 1
- B. Analysis Methods and Degree of Accuracy 2
  - 1. Statistical Methodology for Stratification and Sample Selection 2
  - 2. Estimation Procedure 2
  - 3. Degree of Accuracy Needed for the Purpose Described in the Justification 4
- C. Methods to Maximize Response Rates and Data Reliability 8
  - 1. Strategic Use of Technology Tools 8
  - 2. Data Reliability 9
- D. Tests of Procedures or Methods 9
- E. Individuals Consulted on Statistical Methods 9

REFERENCES 11

ATTACHMENT IV. PRETEST REPORT/MEMO

#### TABLES

- B.1 Sample Size Requirements 2
- B.2 MDIs for Confirmatory and Exploratory Outcomes of Interest 7

#### PART B: COLLECTION OF INFORMATION INVOLVING STATISTICAL METHODS

The Employment and Training Administration (ETA) in the U.S. Department of Labor (DOL) is undertaking the Green Jobs and Health Care (GJ-HC) Impact Evaluation of the Pathways Out of Poverty and Health Care and Other High Growth and Emerging Industries Training grant initiatives. The goal of this evaluation is to determine the extent to which enrollees achieve increases in employment, earnings, and career advancement as a result of their participation in the training provided by Pathways and Health Care grantees and to identify promising practices and strategies for replication. ETA has contracted with Abt Associates and its subcontractor, Mathematica Policy Research, to conduct this evaluation.

On July 18, 2011, ETA received Office of Management and Budget (OMB) approval<sup>1</sup> for the baseline data collection effort. A separate submission for the process study data collection, which includes site visits and focus group administration, has been submitted and is under review. The request for clearance included in this package is limited to the follow-up interviews to be attempted with all study participants 18 months and 36 months after baseline collection (questionnaire presented in Attachment 1).

The full package for this evaluation needed to be submitted in three parts for several reasons. The main reason is that it was necessary to (1) conduct random assignment and collect baseline data early in the study period in order to obtain a sample size needed for the estimation of program impacts and (2) conduct two rounds of process study visits, including one when the early sample was participating in the training program. In addition, the study structure required that the baseline data inform the development of the follow-up data collection effort. As a result, it was necessary to first obtain clearance for the baseline data collection and gain experience in its implementation before the follow-up instruments could be developed and then submitted for clearance.

#### A. Respondent Universe and Sampling

The evaluation will measure the effectiveness of the training strategies adopted by four grantees selected from among the 93 grantees funded under the Pathways Out of Poverty and the Health Care and Other High Growth and Emerging Industries programs. The evaluation team based selection of these grantees primarily on the strength and scale of the grantees' intervention and their ability to support the requirements of this type of evaluation. The study will not indicate whether the two grant funding vehicles as a whole produce beneficial effects, but rather it will tell ETA

<sup>&</sup>lt;sup>1</sup> OMB assigned 1205-0481 as the OMB Control Number for the baseline data collection effort.

whether any of the specific training approaches used in the four study sites are worth emulating as successful models for improving workforce outcomes in the green jobs and/or health care sectors.

At the four sites that are included in the study there is no sampling to identify study participants; instead, this study is a census of all eligible applicants to the grant-funded program at each study site (who also consent to participate in the study). Using a census is necessary because the population for each site is not large; a site-specific sample size that is much smaller than the population (such as one generated through random sampling of study participants) is less likely than the full site population to generate a statistically significant impact estimate of a magnitude relevant In addition, given the differences in the treatment to policymakers. interventions across sites, it is not appropriate to pool the participants in the four sites to conduct the impact analysis. Site staff use their existing eligibility criteria to identify people who are gualified to receive program All of those individuals are asked to complete an Informed services. Consent form and a Baseline Information Form before they can be considered for grant-funded services and be randomly assigned into either a treatment group that has access to those services or a statistically equivalent control group that does not.

A total of 2,652 sample members (of which 1,427 will have access to grant-funded services) have been randomized across the four sites, with target sample size totals varying by site as shown in Table B.1.

As with the baseline data collection effort, all the individuals randomly assigned to either the treatment or control group will be contacted for inclusion in each of the 18-month and 36-month follow-up telephone surveys; statistical methods will not be used to select a subsample. The treatment: control ratios were determined as part of negotiations within each of the four study sites. The main considerations were the number of potential people that each site expected to be able to serve after random assignment, along with the site's service number targets as agreed upon with DOL.

Number of Participating Sites	4				
	Site (n=4)	Treatmen t	Control	Approximate Treatment- Control Ratio	Total
Finalized number of treatment and control group members/ ratio of treatment to control group members	AIOIC (MN)	272	271	1:1	543
	Grand Rapids (MI)	186	91	2:1	277
	North Central Texas	555	448	12:10	1,003
	Kern (CA)	414	415	1:1	829
	All sites	1,427	1,225		2,652
Anticipated number of	AIOIC (MN)	218	217	1:1	435

Table B.1. Number of Sample Members and Expected Survey Respondents for Each of th	e
Four Study Sites	

Number of Participating Sites	4				
	Site (n=4)	Treatmen t	Control	Approximate Treatment- Control Ratio	Total
	Grand Rapids (MI)	149	73	2:1	222
respondents to 18 month and 36 month follow-up surveys*	North Central Texas	444	358	12:10	802
	Kern (CA)	331	332	1:1	663
	All sites	1,142	980		2,122

\*Assuming an 80 percent response rate at each point in time; does not factor in study withdrawals.

AIOIC = American Indian Opportunities Industrialization Center

#### **B.** Analysis Methods and Degree of Accuracy

#### 1. Statistical Methodology for Stratification and Sample Selection

None of the data collection activities for the GJ-HC Impact Evaluation requires a statistical methodology for stratification or sample selection given that the evaluation is a census of participants within the four study sites and that no sampling of the study sites was conducted.

#### 2. Estimation Procedure

As described in Supporting Statement Part A, Section A.2, the primary objective of the evaluation is to estimate program impacts—that is, observed outcomes for the treatment group relative to what those outcomes would have been in the absence of the program—in each of the four programs studied. Specifically, the study will identify the extent to which grant-funded training and services in a given site improve participant employment, earnings, and career advancement. The study will also attempt to identify promising training practices and potential strategies for replication of successful interventions. This section lays out the research questions for the evaluation, describes our analytic approach to estimate program impacts using the 18- and 36-month survey data that are included in this request for clearance, and examines the statistical precision of the answers we will obtain to determine the smallest true impacts that can be confidently detected given the study design (that is, the minimum detectable impacts).

As noted in Part A, the two follow-up surveys submitted with this package look at outcomes for the treatment and control group members. The evaluation will address the following research questions:

• What is the impact of the selected grantee programs on the receipt of education and training services by treatment group members, in terms of both the number who receive these services and the total hours of training received?

- What is the impact of the programs on the completion of training and educational programs and on the receipt of certificates and credentials from these programs?
- What is the impact of the programs on employment levels and earnings? To what extent do the programs result in earnings progression?
- To what extent do the programs result in any employment (regardless of sector)? To what extent do the programs result in employment in the specified sector in which the training was focused?
- What features of the programs seem to be associated with positive impacts, particularly in terms of target group, curricula and course design, and additional supports?
- What are the lessons for future programs and practices?

The basic impact estimates can be computed using simple subtraction: the difference in average outcomes between the treatment group members and control group members in that site is an unbiased measure of the impact of having access to the intervention. Each of the resulting four estimates for each outcome is unbiased because the individuals who comprise the treatment and control groups in the site were selected at random from a common pool and hence are statistically equivalent on all factors at baseline, As a result, any statistically significant differences in in expectation. outcomes between the groups can be attributed to the effects of the intervention. In other words, the test of an intervention impact on some outcome, y, (for example, earnings) in a site compares the average value of y in the treatment group with the average value of y in the control group. If the difference between these two averages is statistically significantly different from zero, chance is ruled out as the explanation and we can conclude that the grantee's program has an impact on the measured outcome. Thus, random assignment properly carried out eliminates threats to internal validity due to selection into the treatment group and other This is different from a non-experimental comparison group factors.<sup>2</sup> analysis-that is, using naturally occurring program nonparticipants instead of a randomly assigned control group—in which underlying differences between the two groups being compared remain even with statistical adjustment, leading to potential problems with internal validity of the estimates.

While the simple treatment-control differences are unbiased, random differences in the characteristics of treatment and control groups will exist, increasing the variance of impact estimates. Regression analysis that controls for variations in measured background characteristics between individuals will be used to improve the statistical precision of the impact estimates. The specific implementation approach for these controls will vary with the outcome. A standard linear regression will be used for continuous

<sup>&</sup>lt;sup>2</sup> Impact results for a particular site will not be generalized beyond that site.

outcomes like earnings. A logistic model will be used for binary outcomes, such as having a degree or credential.

We will construct weights to be used in the analysis. Because neither the sites nor the study participants are selected with probability methods, we will not construct a sampling weight to account for the probability of selection, nor do we plan to generalize our findings beyond each site and the set of study-eligible individuals who agreed to participate in the study. We will, however, construct randomization weights that account for each participant's probability of selection into the treatment or control group. Each randomization group is essentially a random sample of all participants in each site.

We will then adjust these randomization weights to account for nonresponse within site and randomization group in an effort to minimize the risk of nonresponse bias. Within each site and group we will conduct a nonresponse analysis using baseline and demographic information collected on all study participants in order to determine which characteristics are both associated with a propensity to respond and correlated with the key outcomes being measured. We will then run response propensity models using these predictive variables and use the resulting propensity score to form weighting cells within site and group.

# **3. Degree of Accuracy Needed for the Purpose Described in the** Justification

As described in Section B.1, the 2,652 study participants will result in approximately 2,122 completed 18-month telephone surveys assuming an 80 percent completion rate. Eighteen months later, the 36-month telephone interviewers will attempt to contact and interview the entire group of 2,652 participants. Again, assuming an 80 percent completion rate, approximately 2,122 sample members will complete the 36-month interview. Because all impact analyses will be conducted at the site level, given the existence of important differences between the interventions at the four sites, the sitespecific sample sizes are the sizes that are most important. The site-specific sample sizes will provide adequate precision, expressed in terms of minimum detectable impacts (MDI), to support the evaluation.

MDIs are the smallest true impacts that the study has at least an 80percent probability of detecting as statistically significant; for a given level of power, the greater the sample size, the smaller the MDI that can be detected. It is important to calculate MDIs before beginning an evaluation to ensure that the study will be able to detect impacts of magnitudes that are relevant to policymakers. In this section, MDIs for three representative outcomes of interest are presented, given the projections of likely sample sizes at each grantee.

#### Follow-Up Data Collection: Part B

MDIs are a function of several factors, among them the ratio of treatment to control participants, the standard deviation of the outcome being examined in the absence of the intervention, and, crucially, the sample size on which the analysis is conducted. For the GI-HC evaluation, the relevant sample sizes are the separate sample sizes for each grantee, and not the sum across grantees, so we do not need to account for within-site clustering effects on the variance. We do need to account for the effect of nonresponse-adjusted weights on the variance of estimates. Using specialized procedures designed for analyzing survey data (within SAS or Stata, or using SUDAAN, and utilizing the Taylor Series Linearization method), the calculation of the variance for each estimate will appropriately account for design effect due to unequal weighting. Because we do not expect large variation in response rates within site and randomization group, this design effect should be minimal. The study does not seek to determine whether the two grant funding vehicles as a whole produce beneficial effects for society. Rather, it is motivated by a desire to discover whether any of the specific training approaches used in the four study sites are worth emulating as successful models for improving workforce outcomes in the green jobs and/or health care sectors. Hence, all analyses will be conducted separately by site as four independent tests of specific training interventions.

A litmus test for the effectiveness of each intervention will be its impact on participant earnings in months 25 to 36 of the follow-up period. The evaluation will focus on a single outcome for this litmus test (what is referred to in the literature as a confirmatory outcome), rather than a broader set of outcomes, to reduce the extent of a problem that arises when more than one statistical test is conducted. The problem is that, even when there are no true impacts, the likelihood of finding at least one statistically significant effect (and therefore rejecting the null hypothesis of no impact) increases rapidly with the number of tests conducted. Because the evaluation will conduct four tests on the confirmatory outcome—one for each of the four study sites—a multiple comparisons adjustment will be made to standard hypothesis test procedures.  $^{\scriptscriptstyle 3}$  The MDI calculations take this adjustment into account.

In light of this decision, an overall Type 1 error rate of 10 percent (alpha = .10) has been adopted rather than a 5 percent rate (alpha = .05). This is because a five percent error rate-when combined with the multiple comparisons adjustment to take into account the impact estimation for four sites-would tilt testing of the impact estimates too much in the direction of avoiding false positive results (Type 1 error) while unduly expanding the risk of false negatives (that is, a finding of no significant impact in any site when occurred effect important magnitude fact an of has in Type 2 error).

The first two columns of Tables B.2 and B.3 present the expected treatment and control group sample sizes available for analysis for each of the four study sites. The third column in each table presents the MDIs for the primary confirmatory outcome in each site, total earnings in months 25 to 36 after random assignment. The final columns in Tables B.2 and B.3 present MDIs for two illustrative exploratory outcomes of interest—analyses that seek to explore suggestive evidence of possible impacts rather than conclusive evidence of effects through confirmatory analysis such as will be conducted for earnings. The particular illustrative exploratory outcomes considered are employment in month 36 after random assignment and possession of a degree or credential in that month. We do not plan to apply a multiple comparisons adjustment in the exploratory analyses given the more tentative nature of the conclusions that will be drawn from them.

<sup>&</sup>lt;sup>3</sup> A goal of the evaluation is to have evidence that conclusively *confirms* that earnings impacts have occurred, rather than that—as with the other impact measures to be examined -simply explore whether effects may have taken place. (See Schochet 2009 for a discussion of the difference between confirmatory and exploratory tests of intervention effects, and Abt Associates 2011 for application of these concepts to the GI-HC Impact This requires rigorous control over the Type 1 error probability when Evaluation.) conducting multiple confirmatory tests. Suppose, for example, that each of four tests is set up to have a 10 percent chance of rejecting the null hypothesis that earnings in a particular site were not increased by the intervention (that is, there is an alpha of .10). Then, even if none of the interventions increased earnings, the chance of one or more significant findings from the four tests rises to 34 percent (= 1 minus [.9 to the fourth power], or .34). A large literature exists regarding the best way to protect against this inflated risk of a false positive conclusion when doing multiple tests of potential impacts. Calculations of the MDIs for this submission are based on a conservative assumption that the Bonferroni adjustment will be applied to the four earnings impact tests since any procedure that might eventually be used to test the confirmatory impact hypotheses will achieve at least that small of MDIs for the sites. The Bonferroni method reduces the cutoff for a significant effect in each individual test from a p-value below .10 to a p-value below .025, so that the combined probability of Type 1 error across four tests, bounded above by  $.025 \times 4$ , cannot exceed .10. This adjustment procedure is conservative and has been improved upon in the literature. The adjustment procedure to be applied during the impact analysis will depend on developments in the literature as statisticians continue to find ways to increase statistical power (that is, reduce the attainable MDIs) when testing multiple hypotheses.

All the MDI calculations in the two tables are based on a number of assumptions, some of which vary by site and by the outcome measure involved. These assumptions are as follows:

- The treatment-control ratio (which varies across sites as shown in Table B.1 above) is maintained as constant throughout the sample intake period in any given site.
- The annual earnings and employment rate outcomes may be measured with administrative data,<sup>4</sup> from which we expect to achieve 98% coverage based upon current sample matching results with the National Directory of New Hires (NDNH) data, resulting in the target sample sizes for these outcomes shown in Table B.2.
- The follow-up surveys used to measure outcomes for the impact analysis will achieve an 80 percent response rate,<sup>5</sup> resulting in the target sample sizes shown in Table B.3.
- Two-tailed statistical tests are conducted.
- The standard deviation of annual earnings for males is \$16,000 and for females is \$11,000. (Average annual earnings are expected to be \$14,000 for males and \$10,000 for females.)<sup>6</sup> The standard deviation of annual earnings for the entire sample in any site varies across sites because of different anticipated gender compositions in different sites. Based on information from site staff, the percentages of the sample who are male are assumed to be 20 percent for AlOIC, 40 percent for Grand Rapids, 20 percent for North Central Texas, and 95 percent for Kern.
- The share of the control group employed in the 36th month after random assignment is 65 percent.<sup>7</sup>
- The share of the control group with an educational degree or training credential in the 36th month after random assignment is 30 percent.<sup>8</sup>

5

The 80 percent response rate is calculated based on the entire baseline sample and does not factor in study withdrawals

<sup>6</sup> These assumptions are based on results from similar studies of similar interventions such as the Sectoral Employment Impact Study (Maguire et al. 2010), the National JTPA Study (Bloom et al. 1993), and the Welfare-to-Work Voucher evaluation (Mills et al. 2006).

<sup>7</sup> This employment rate is based on the results of the National JTPA Study.

<sup>8</sup> This rate of degree or credential attainment comes from the baseline sample in the ITA Experiment where 25 percent of individuals who wanted to receive training had a degree or credential. Since this was a baseline measure, a rate of 30 percent by the end of the follow-up period was assumed for these MDI calculations. (Note that the ITA experiment did not have a no-treatment control group, which is why baseline rates are used.)

<sup>&</sup>lt;sup>4</sup> As described in the study's evaluation design report, we will examine the use of administrative data versus the use of survey data for analyses on the annual earnings and employment rate outcomes. Therefore, both sets of MDI calculations are shown here.

 The inclusion of baseline characteristics of sample members as covariates in the impact regressions will account for approximately 20 percent of the total variation in individual outcomes.<sup>9</sup>

For the confirmatory outcome, annual earnings in months 25-36, a Bonferroni adjustment is made to the threshold of statistical significance in the MDI calculations, lowering the p-value threshold for rejecting the null hypothesis of no impact on earnings in a given site from 0.10 to 0.025 to ensure the overall probability of a "false positive" statistically significant impact finding from the four sites combined does not exceed 0.10. This is a conservative approach since, as noted above, the specific procedure used to adjust for multiple confirmatory tests will depend on the best—that is, statistically most powerful—methodology available in the literature when the first impact analysis is conducted; therefore, the true MDIs for annual earnings are likely to be smaller than those shown here.

The MDI formula used for the calculations is as follows:

$$MDI = factor * \sigma \sqrt{(1 - R^2) * \frac{1}{nP(1 - P)}}$$

As explained above, all MDI calculations assume two-tailed tests and 80 percent power. A 10 percent significance level is used when adjusting for multiple tests of impacts on earnings in the four sites and a .05 significance level used individually in each site when testing impacts on employment rate and degree or credential..  $\sigma$  is the standard deviation of the outcome,  $R^2$  is assumed to be 0.20, n is the number of survey respondents and P and 1-P are the proportions of respondents allocated to the treatment and control groups, respectively.<sup>10</sup> . The MDI calculations for annual earnings are adjusted for multiple testing using the Bonferroni approach, whereas the MDI calculations for other outcomes are not. Therefore, the MDI translation factor for the impact estimate standard error equals 3.09 for earnings and 2.80 for the other outcomes.

The standard deviation for the earnings outcome is assumed to vary across sites because (1) the standard deviation of earnings for men is

<sup>&</sup>lt;sup>9</sup> Previous studies of impacts on the earnings of disadvantaged groups using similar baseline characteristics have explained around 20 percent of earnings variance from those characteristics. For example, the recently published Sectoral Employment Impact Study (SEIS), a random assignment study of an intervention for under-skilled, unemployed, and low-income adults, reported explanatory power of 14 to 19 percent, while the National Job Corps Study achieved 20 percent on this measure.

<sup>&</sup>lt;sup>10</sup> The formula above is given in Bloom (2006) <u>"The Core Analytics of Randomized</u> <u>Experiments for Social Research"</u>.

different from that for women and (2) the expected proportions of sample members who are male and female differ across sites.<sup>11</sup> The earnings standard deviation is calculated using the following equations:

$$\sigma = \sqrt{\left(\frac{n_m + n_f}{n_m + n_f - 1}\right) * \left(\left(percent_m * term_m\right) + \left(percent_f * term_f\right)\right)}$$

and

$$term_{m} = \left( \left( \frac{n_{m} - 1}{n_{m}} \right) * \sigma_{m}^{2} \right) + \left( earnings_{m} - earnings_{full} \right)^{2}$$

A comparable equation for  $term_f$  was used for females. In the equations,  $n_m$  and  $n_f$  are the numbers of sample members who are male and female, respectively;  $percent_m$  and  $percent_f$  are the proportion of sample members who are male and female, respectively (such as 0.2 and 0.8 for AIOIC).  $\sigma_m^2$  is the variance of the earnings of men,  $earnings_m$  is the average earnings of men, and  $earnings_{full}$  is the average earnings for the full sample (of men and women).

<sup>&</sup>lt;sup>11</sup> A common standard deviation is assumed in all sites for employment and educational attainment.

	Treatment Administrati ve Data Sample	Control Administrative Data Sample	MDI: Annual Earnings, from Months 25 through 36 of Followup	MDI: Employment Rate
AIOIC (MN)	267	266	\$3,283	11.6%
Grand Rapids (MI)	182	89	\$5,314	17.1%
North Central Texas	544	439	\$2,431	8.6%
Kern (CA)	406	407	\$3,426	9.4%

Table B.2.	MDIs for Confirmatory	and Explorat	ry Outcomes	of Interest,	Measured with
Administrat	tive Data				

Note: The MDIs for annual earnings take into account use of a Bonferroni multiple comparison adjustment, given that annual earnings is the primary confirmatory outcome. The calculations for the MDIs for the employment rate and the possession of a degree or credential do not include a multiple comparison adjustment, given that these outcomes are considered to be exploratory. See the text for additional discussion of the assumptions underlying these MDI calculations.

	Treatmen t Survey Response s	Control Survey Responses	MDI: Annual Earnings, from Months 25 through 36 of Followup	MDI: Employment Rate	MDI: Degree or Credential
AIOIC (MN)	218	217	\$3,634	12.8%	11.1%
Grand Rapids (MI)	149	73	\$5,882	18.9%	16.6%
North Central Texas	444	358	\$2,691	9.5%	8.3%
Kern (CA)	331	332	\$3,792	10.4%	9.0%

Table B.3. MDIs for Confirmatory and Exploratory Outcomes of Interest Measured withSurvey Data, assuming an 80% response rate

Note: The MDIs for annual earnings take into account use of a Bonferroni multiple comparison adjustment, given that annual earnings is the primary confirmatory outcome. The calculations for the MDIs for the employment rate and the possession of a degree or credential do not include a multiple comparison adjustment, given that these outcomes are considered to be exploratory. See the text for additional discussion of the assumptions underlying these MDI calculations.

These MDIs —with the exception of those from GRCC—are roughly in line with the magnitude of impacts found in two recent studies of employment and training programs, though larger than most impact estimates found in other studies of similar programs. For example, the recently published Sectoral Employment Impact Study (SEIS), a random assignment study of an intervention for under-skilled, unemployed, and low-income adults, found impacts on earnings in the second year of followup of \$3,777 for men and \$4,555 for women (Maguire et al. 2010). A nonexperimental study, the Workforce Investment Act Non-Experimental Net Impact Evaluation (Heinrich et al. 2009), which examined the effects of WIA-funded services on dislocated workers and adults who were generally low-income, found a difference of approximately \$450 in quarterly earnings for men who participated in WIA training and \$650 for women at six quarters after program entry; these roughly correspond to annual earnings differences of about \$1,800 for men and \$2,600 for women.<sup>12</sup> Although neither of these studies is the same as the GJ-HC evaluation in terms of the program model, the community and labor market contexts, and the target populations, they are similar enough to be broadly comparable to the current study.<sup>13</sup>

It is important to note that one very prominent—but now very dated evaluation of training programs for disadvantaged adults in the late 1980s, the National JTPA Study, found impacts of only \$102 in quarterly earnings for men and \$141 for women six quarters after random assignment (Bloom et al. 1993); these are roughly equivalent to \$608 in annual earnings for men and \$840 in annual earnings for women in 2010 dollars. Impacts of this magnitude for the current study would be well below the threshold of detection. Indeed, if one were to discount the SEIS results as extraordinarily large relative to historical standards and look instead at how the current MDIs fit into the range between the JTPA and WIA findings—\$600 to \$1,800 for men, \$800 to \$2,600 for women—the current MDIs exceed the upper limit for men and in some sites for women.

#### C. Methods to Maximize Response Rates and Data Reliability

All study participants, including both treatment and control group members, will be contacted to complete the first telephone survey 18 months after their random assignment date and the second survey 36 months after random assignment. The expected response rates are 80 percent for 18-month telephone interview and 80 percent for the 36-month telephone interview. Respondents will have some familiarity with the study, which should increase the likelihood of participation. The subcontractor has also achieved similar response rates on comparable follow-up surveys. In addition, a variety of proven effective approaches will be used to maximize response and minimize nonresponse bias.

One strategy for increasing response rates requires that telephone interviewers selected for the project demonstrate a combination of interviewing experience and high-level training focused on encouraging participation. Project-specific training will address the study's purpose and goal, the data collection instrument, and best practices in data collection,

<sup>&</sup>lt;sup>12</sup> This study was non-experimental and compared individuals who chose to enroll in WIA training to matched comparison individuals who did not enroll in WIA training. There was evidence that those individuals who chose to participate in WIA training were earning more than their matched comparisons even before entering training. Therefore, these estimates are likely inflated relative to what would be found using an experimental approach.

<sup>&</sup>lt;sup>13</sup> For instance, SEIS examined three programs that offered a combination of short-term training and job placement assistance for unemployed and low-income adults. The WIA non-experimental net impact evaluation examined the broad population of adult and dislocated workers seeking WIA Title I training services, which are typically short-term trainings working toward an occupational credential.

while reinforcing concepts for eliminating bias and remaining sensitive to atrisk and special populations. Experienced supervisors will closely monitor all interviewers periodically throughout data collection.

In the sections that follow, we describe studies where the subcontractor has achieved comparable response rates, and we discuss other efforts that we will undertake in order to increase respondent participation.

# **1.** Comparable Follow-Up Survey Response Rates Achieved by Subcontractor

Achieving high response rates to follow-up surveys can require innovative approaches to data collection, including increasing incentives, as well as experience tracking respondents over time. The four examples below highlight Mathematica's ability to successfully attain high response rates in follow-up surveys and boost participation when initial response rates are below targeted levels. In the U.S. Department of Labor's Evaluation of Individual Training Account (ITA) Demonstration, Mathematica conducted a follow-up survey of 4,800 randomly selected WIA customers. The survey was conducted about 15 months after random assignment. The questionnaire was administered via computer-assisted telephone interviewing (CATI). To increase response rates, cases in which the sample member could not be interviewed on the telephone were sent to local field interviewers for followup. After cooperation was obtained, field interviewers called into the Survey Operations Center (SOC) on cell phones, and the ITA customer was interviewed via CATI. Mathematica achieved an 82 percent response rate to the survey, without the use of an incentive.

Mathematica was also able to attain similarly high response rates over time in other studies. In the Social Security Administration's Services to Evaluate Youth Transition Demonstration Projects, Mathematica developed and evaluated youth transition demonstration (YTD) projects, which are intended to help young people with disabilities make the transition from school to work. YTD projects have been fully implemented in 10 sites across the country. In total, 5,273 youth are participating in the evaluation. The one-year follow-up survey has been completed in the three original evaluation sites with a response rate of 89 percent.

Mathematica has also evidence to demonstrate how a higher incentive amount is more effective than lower incentive amounts at yielding higher response rates among nonrespondents and newly released sample members. In the National Evaluation of Trade Adjustment Assistance (TAA) Program, which serves a similar population of unemployed and/or dislocated workers, an incentive experiment was carried out for different categories of sample members. The incentive was changed from \$25 to \$50 and \$75 for nonresponding sample members, while it remained at \$25 for a third subgroup of nonrespondents. The results from this experiment showed that the higher incentive increased the overall response rate for nonrespondents from 41 percent to 55 percent. Among new sample members who were randomly assigned to the \$50 incentive group compared to the \$25 incentive group, the response rate was 53 percent and 49 percent, respectively.

In addition to the projects described above, Mathematica has also been successful in achieving high response rates in a study with follow-up periods similar to the Green Jobs and Health Care Impact Evaluation. In the Rural Welfare-to-Work Strategies Demonstration Evaluation, two rounds of followup surveys were conducted - at 18 and 30 months after random assignment. Mathematica achieved response rates as high as 87 percent in the 18 month survey. In the 30 month survey, interviews were attempted with all sample members, whether or not they had completed an 18-month interview. For the 30-month interview, Mathematica achieved response rates over 82 percent.

In order to achieve high response rates in longitudinal studies, it is critical to complete interviews with respondents who fail to complete an interview in a prior wave. There are a multitude of reasons for nonresponse, ranging from respondents refusing to participate to an inability to locate the respondent. Mathematica prides itself on its ability to overcome these challenges as exemplified in the Evaluation of the Trade Adjustment Assistance Program project where Mathematica successfully conducted follow-up interviews with nearly a third of those who had failed to be interviewed during the initial interview period 15 to 33 months prior.

#### 2. Strategic Use of Technology Tools

Strategic use of technology tools, including CATI, an automated call scheduler, and a survey management system will help to maximize contact with study participants. CATI allows interviewers to move swiftly through the survey instrument, asking only those questions that are relevant to a particular respondent, based on his or her earlier answers. This reduces the length of time respondents spend on the phone, and minimizes the likelihood of respondent fatigue playing into incomplete item responses or surveys.

**Use of respondent payments.** Advance letters signed by a DOL official will be sent by first class postal mail to study participants to convey the importance of the 18-month telephone survey and participation. The initial study plan involved offering a \$25 payment to all respondents to each interview to thank them for the time they spent completing an interview. The study plan now calls for a \$45 incentive payment (see details for rollout of this new amount below), as the current lower-than-expected response rate suggests that \$25 may not be a high enough incentive for the survey, which averages 40 minutes to complete. Although the study is striving for an 80-

percent response rate, the current cumulative response rate for the 18month survey for sample members released between February 2013 and July 2013 is 52 percent as of August 5th, which is lower than expected for this stage of the fielding period. In addition, a small differential in response rates between the treatment and control groups has emerged, with a 56 percent response rate for the treatment group and a 47 percent response rate for the control group. While this differential is not necessarily problematic for the purposes of the planed analyses, the study team will continue monitoring this differential over time to determine if it becomes problematic, at which point the team will investigate solutions to help correct the differential. A large portion of the survey sample released as of the end of July 2013 has yet to be fully worked in the field; thus, it is too early to tell what the ultimate response rate (and the treatment-control differential in response rates) will be, given the study's current plans for the fielding effort. However, it is expected that the final response rates overall and for treatment and control groups will be higher (for example, the response rate for the first completed release—i.e., the first group of respondents eligible for the survey and for whom the contractor has completed outreach about the survey-is 69%). Nevertheless, the lower-than-expected response rates so far suggest that a change to the survey plans is warranted to increase the likelihood that the surveys can achieve the target 80-percent response rate.

To improve response rates, the initial study plan has now been adjusted to offer a higher incentive, of \$45, to the remaining 18-month survey sample members and the entire 36-month survey sample. The survey fielding effort involves the release of sample members in batches, called "releases." So far, the first 7 releases out of the 23 that are planned for the 18-month survey have occurred; these 7 releases represent about 34 percent of the full study sample. For sample members who are currently in the field, we will continue offering the \$25 incentive through August, until the new \$45 incentive is offered to all remaining sample members starting in September 2013 (pending OMB approval). Sample members who are released in September (release number 8) will receive notification of the increased incentive in the advance letter they receive prior to being contacted by phone to complete the interview. At that time, all remaining sample members who have not yet completed an interview (but have previously been "released") will also be informed of the new incentive via the regular follow-up contact mailings and field locator scripts. This approach ensures that all sample members who are still active as of September 2013 will become eligible for the increased incentive at the same time. In addition to enhancing operational efficiency, this approach enables the increased incentive to appeal to both newly released sample members and remaining nonrespondents. Moreover, this incentive amount will be offered to both treatment and control group members, with no distinction between the two groups; thus, there is potential for the higher incentive amount to reduce the likelihood of a problematic treatment-control group differential in responses rates at the end of the survey fielding period (as higher overall response rates lead to less concern about non-response bias).

#### Follow-Up Data Collection: Part B

It is expected that the \$45 incentive payment will motivate sample members to participate in the survey, and it may influence their decision to provide updated contact information during the 18 months between the first and second follow-up surveys; thus this incentive payment offered at the 18month interview is also expected to help reduce the locating effort at 36 months. Furthermore, we expect that offering \$45, rather than the initiallyplanned \$25, for the 36-month survey fielding effort will have a direct, beneficial effect on response rates for that survey as well.

The survey fielding effort will be repeated for the 36-month follow-up interview, except that a \$45 incentive will be offered to all sample members since the 36-month survey fielding effort has not yet begun.

**Extensive locating efforts.** Missing contact information will be obtained either from a private vendor (such as Accurint, a division of LexisNexis) or by the evaluation team's in-house locating staff, who are highly skilled in searching specialized online databases. When necessary, field locating will also be conducted by trained locators. To facilitate efficient contact during the 36-month follow-up interview, a series of questions to obtain additional contact information will be included at the end of the 18-month telephone interview. In addition, study staff will use reminder postcards to obtain updated addresses for sample members who have moved since the 18-month interview.

**Nonresponse analysis.** The analysis will include the construction of weights for each treatment and control group in each site to account for non-response, as described above in the B.2 Estimation Procedures section, in an effort to minimize the risk of nonresponse bias. If the response rate among the eligible sample is lower than the 80 percent that is expected, the nonresponse analysis will include an estimate of potential bias and the extent to which weights correct for the potential bias.

#### 3. Data Reliability

The two telephone surveys are unique to the current evaluation and will be used with all study participants. Using the same data collection instrument across all study participants will ensure consistency in the collected data and no artificial differences arise between treatment and control group responses that would distort our measures of program impacts. The two telephone surveys will have been reviewed extensively by evaluation team staff and staff at ETA and will be thoroughly tested in a pretest involving nine or fewer individuals from nonparticipating sites. Telephone interviewing staff will complete training on each item in both of the surveys to ensure staff understand each item and record the information accurately.

#### **D. Tests of Procedures or Methods**

To assess the clarity of content and wording of the surveys, respondents' burden time, and potential sources of measurement error, study staff conducted a small pretest of the follow-up survey instrument between June 22 and June 28, 2012. A total of 9 pre-test respondents recruited from One-Stop Centers and community training organizations in four metropolitan areas (Washington, DC; Oakland, CA; New Brunswick, NJ; and Chicago, IL). Each pretest respondent was given \$25 for participating in the survey. After each interview was conducted, project staff debriefed the participant using a standard debriefing protocol to determine if any words or questions were difficult to understand and answer. No major problems were uncovered in the pre-test. However, some minor formatting and wording changes were made as a result of the test. A memo detailing the pilot test results is included as Attachment 4.

#### **E.** Individuals Consulted on Statistical Methods

Consultations on the statistical methods used in this study have been undertaken to ensure the technical soundness of the research. The following people were consulted in preparing this submission to OMB:

As noted earlier, consultations on the research design, sample design, and data collection procedures were part of the study design phase of the evaluation. The purposes of these consultations were to ensure the technical soundness of the study and the relevance of its findings and to verify the importance, relevance, and accessibility of the information sought in the study.

#### **Peer Review Panel Members**

- Ms. Maureen Conway, Executive Director, Economic Opportunities Program, Aspen Institute

- Dr. Harry J. Holzer, Professor, Georgetown Public Policy Institute

- Dr. Robert J. LaLonde, Professor, The Harris School, University of Chicago

- Mr. Larry Orr, Larry Orr Consulting

- Dr. Burt S. Barnow, Amsterdam Professor of Public Service, The Trachtenberg School of Public Policy and Public Administration, George Washington University

- Ms. Mindy Feldbaum, Director for Workforce Development Programs, National Institute for Work and Learning

#### F. Contact Information for Abt Associates

Abt Associates Inc., with its partner Mathematica Policy Research, Inc, is conducting the impact evaluation of the Pathways Out of Poverty and Health Care and Other High Growth Training grants. Contact information for the project director at Abt Associates is as follows:

Dr. Stephen Bell 4550 Montgomery Avenue, Suite 800N Bethesda, MD 20815 (301) 634-1721 Stephen\_Bell@abtassoc.com

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