# 2022 American Community Survey Content Test

# **Cognitive Testing Kickoff Meeting**

# Census Bureau's Materials Inventory Proposals, N = 10

TOPIC
Person Level
1. Household Roster
2. Educational Attainment
3. Health Insurance Coverage
4. Disability
5. Means of Transportation to Work
6. Income
Housing
7. Sewer
8. Electric Vehicles
9. Home Heating Fuel
10. Solar Panels
11. HOA Fees (delivered closer to Round 2)

#### **Subcommittee Lead:**

Elizabeth Poehler, U.S. Census Bureau

#### **Subcommittee Team Members:**

Derek Breese, U.S. Census Bureau
Sandy Clark, U.S. Census Bureau
Mary Davis, U.S. Census Bureau
Sarah Heimel, U.S. Census Bureau
Eric Jensen, U.S. Census Bureau
Grace Kena, Bureau of Justice Statistics
Kathleen Kephart, U.S. Census Bureau
Scott Konicki, U.S. Census Bureau
Dave Raglin, U.S. Census Bureau
Andrew Roberts, U.S. Census Bureau
Mary Frances Zelenak, U.S. Census Bureau

# **Objective:**

The objective is to test a new set of rostering instructions and coverage questions to improve the within household coverage of the American Community Survey (ACS). There are known coverage issues with census and survey data, such as the undercount of young children. In addition, while the complexity of household living arrangements in the United States has increased, the instructions used for the ACS have not changed since the late 1990s. Prior research has demonstrated that respondents find the household roster portion of the survey confusing and hard to understand (see Clark, 2017; DeMaio and Hughes, 2003; Ashenfelter, et al, 2011; Ashenfelter et al, 2013). 1

#### **Cognitive Testing Research Goals:**

- Which version helps respondents understand better that they should include unrelated people on the roster?
- Do respondents notice and comprehend all of the text about who to include or exclude outside of the main question stems? Are they utilizing this text when responding?
- Which version of the paper form yielded the more accurate roster?
- (For paper) Was one format preferred by respondents?

<sup>1</sup> Clark, S. (2017) "Analysis of the Household Roster Questions on the ACS" U.S. Census Bureau. Accessed 5/3/2019 at <a href="https://www.census.gov/library/working-papers/2017/acs/2017">https://www.census.gov/library/working-papers/2017/acs/2017</a> Clark 01.html.

DeMaio, T. and Hughes, K. (2003) "Report of Cognitive Research on the Residence Rules and Seasonality Questions on the American Community Survey (ACS)", U.S. Census Bureau, Survey Methodology #2003-08. Ashenfelter, K., Holland, T., Quach, V., Nicols, E. and Lakhe, S. (2011). "ACS Internet 2011 Project: Report for Rounds 1 and 2 of ACS Wireframe Usability Testing and Round 1 of ACS Internet Experiment Mailing Materials Cognitive Testing." U.S. Census Bureau Survey Methodology #2012-01.

Ashenfelter, K., Holland, T., Quach, V. and Nichols, E. (2013). "Final Report for the Usability Evaluation of ACS 2011 Online Instrument Rounds 4a and 4b" U.S. Census Bureau. Survey Methodology #2013-04

- (For CAPI version 1) What do the terms "short visit," "short time," and "overnight stay" mean to respondents?
- (For CAPI version 2) What does the term "short time" mean to respondents?
- Were respondents hesitant or unsure about including anyone that lives or stays with them?
  - If so, what are the relationships and/or living situations of those people?
  - What was the reason they were hesitant or unsure to include them?
  - Were they unsure how long someone had to live there to be included?
- Do respondents have privacy concerns about reporting certain household members?
  - If so, what are the relationships and/or living situations of those people?
  - What wording increased or decreased their concerns?
- (For CAPI only) Did the respondents express annoyance or confusion about why we were asking the series of coverage questions?
- If the respondent doesn't have a complex living situation now (they didn't add or delete people via the coverage questions), have they ever have had one (lived with someone else or have someone else live with them)? How would they have answered the questions about that situation?

#### **Cognitive Testing Recruiting Requirements:**

- Households with multiple families cohabitating
- Households with related subfamilies
- Households with unrelated subfamilies/individuals
- Households where children are in the subfamily, especially children aged 0-4
- Households with children in custody arrangements
- Households with foster children
- Households with no one related to each other
- Families with someone in the Armed Forces and on deployment (lower priority)
- Families with children who live away at college (lower priority)

# Paper

CURRENT PRODUCTION VERSION	TEST VERSION 1	TEST VERSION 2
How many people are living or staying at this address?  • INCLUDE everyone who is living or staying here for more than 2 months.  • INCLUDE anyone else staying here who does not have another place to stay, even if they are here for 2 months or less.  • DO NOT INCLUDE anyone who is living somewhere else for more than 2 months, such as a college student living away or someone in the Armed Forces on deployment.  Number of people	How many people, including yourself, are living or staying at this address?  • INCLUDE everyone living or staying here, even if they are not related to you.  • INCLUDE children, related or unrelated, such as babies, grandchildren, or foster children.  • INCLUDE anyone else staying here now, such as roommates and other families who have no other place to stay.  • DO NOT INCLUDE anyone who is living somewhere else, such as a college student living away or someone in the Armed Forces on deployment.  Number of people  Fill out pages 2 – 7 for everyone, including yourself, who is living or staying at this address. Then complete the rest of the form.	How many people, including people not related to you, are living or staying at this address?  INCLUDE  / yourself if you live here.  / children, related or unrelated, such as babies, grandchildren, or foster children.  / anyone else staying here now, such as roommates and other families who have no other place to stay.  DO NOT INCLUDE  / anyone who is living somewhere else, such as a college student living away or someone in the Armed Forces on deployment.  Number of people  Fill out pages 2 – 7 for everyone, including yourself, who is living or staying at this address. Then complete the rest of the form.

# **Computer Assisted Interview Script**

CURRENT PRODUCTION VERSION	TEST VERSION 1	TEST VERSION 2	Notes or Comments
Original Roster	Original Roster	Original Roster	<ol> <li>Subcommittee is interested in using a flashcard for V1. Does contractor agree?</li> <li>Overcount Follow-Up will be at the end of the</li> </ol>
I'm going to be asking some questions about everyone who is living or staying at this address. First let's create a list of the people, starting with you.	Let's create a list of everyone, including people not related to you, living or staying at this address.	not related to you, living or staying at this address, even if they are	
	What is your name?	What is your name?	
What is your name? What is the name of the next person living or staying here?  *Enter first name. If there are no additional people to list, enter 999 to continue.	<ul> <li>(What is the name of the next person living or staying here?)</li> <li>❖ Make sure to include the respondent if he/she is staying there.</li> </ul>	<ul> <li>(What is the name of the next person living or staying here?)</li> <li>❖ Make sure to include the respondent if he/she is staying here.</li> </ul>	

#### **Undercount -1**

The following questions are to make sure this list is as complete as possible...Does anyone else live or stay here, such as roommates, foster children, boarders, or live-in employees?

\*Enter first name. If there are no additional people to list, enter 999 to continue.

#### **Undercount -2**

Is there anyone else staying here even for a short time, such as a friend or relative?

- \*Do not include overnight or weekend guests who have a residence somewhere else.
- \*Enter first name. If there are no additional people to list, enter 999 to continue.

#### **Undercount Probe (Single Question)**

The following questions are to make sure everyone is included.

The people you have listed so far are...

Read all names.

Other than these people, is there anyone else staying here such as...

- Babies
- Grandchildren
- Foster children
- Any other children, related or unrelated to you
- Roommates
- People or families who have no other place to stay?
  - Do not include overnight or weekend guests who have a residence somewhere else.
  - ❖ List additional names to the right.

#### **Undercount -1**

The following questions are to make sure everyone is included.

Other than the people you have already mentioned, are there any children living or staying here, such as babies, grandchildren, or foster children? These children could be related or unrelated to you.

#### **Undercount -2**

Other than the people you have already mentioned, is there anyone else staying here, such as roommates and other people or families who have no other place to stay?

❖ <u>Do not include</u> overnight or weekend guests who have a residence somewhere else.

#### Overcount - 1

The next questions are to help refine this list. I have listed.... (read names)

\*Read all bolded names.

Are any of these people away NOW for more than two months, like a college student or someone in the military?

- \*DO NOT select children in boarding school or summer camp.
- \*Select children in shared custody who are not currently staying at the sample address, regardless of the length of stay. \*Select the persons who are away NOW for more than two months.
- \*Enter all that apply, separate with commas.
- \*The two-month period is not anchored by a specific reference date, but can encompass the two months prior to survey contact or the two months following the survey contact date. \*If no one is away, enter 999 to continue.

#### Overcount - 1

Copy names from Original Roster, Undercount Probe.

The following questions are to make sure everyone we have listed should be included in this survey.

#### I have...

\* Read all names.

Do any of these people live somewhere else now, such as a college student or someone in the Armed Forces on deployment?

- MARK "No" for:

   (1) children in boarding school or summer camp
- MARK "Yes" for:

   (1) children in shared custody who are not currently staying at the
  - sample address, regardless of the length of stay;
  - (2) persons who are away NOW for more than two months^
- ^ The two-month period is not anchored by a specific reference date, but can

#### Overcount - 1

❖ Copy names from Original Roster,
 Undercount – 1, and Undercount – 2.

#### I have listed...

\* Read all names.

Do any of these people live somewhere else, such as a college student or someone in the Armed Forces on deployment?

- MARK "No" for:

   (1) children in boarding school or summer camp
- **♦** MARK "Yes" for:
  - (1) children in shared custody who are not currently staying at the sample address, regardless of the length of stay;
  - (2)persons who are away NOW for MORE than two months^
- ^ The two-month period is not anchored by a specific reference date, but can encompass the two months prior to the interview or the two months following the interview date.

#### Overcount – 2

(Do you/Do any of these people)...

\*Read all bolded names.

have some other place where they usually stay?

- \*DO NOT select children in shared custody who are currently staying at the sample address, regardless of where they usually stay.
- \*DO NOT select commuter workers who stay in some other residence closer to work when their family residence is the sample address.
- \*Select commuter workers who stay at the sample address to be closer to work. \*Select the persons who have some other residence.
- \*Enter all that apply, separate with commas.
- \*If no one has another place where they usually stay, enter 999 to continue.

encompass the two months prior to the interview or the two months following the interview date.

#### Overcount - 2

❖ Copy names from Original Roster and Undercount Probe, but OMIT anyone with a "Yes" response to Overcount − 1.

#### I have listed...

\* Read all remaining names.

Are any of these people staying here for a short visit or for an overnight stay?

- **❖** MARK "No" for:
- (1) children in shared custody who are currently staying at the sample address, regardless of where they usually stay; (2) commuter workers who stay in some other residence closer to work when their family residence is the sample address.
- **❖** MARK "Yes" for:
  - (1) Commuter workers who stay at the sample address to be closer to work;(2) Persons who have some other residence.

## Overcount - 2

❖ Copy names from Original Roster, Undercount – 1, and Undercount – 2, but OMIT anyone with a "Yes" response to Overcount – 1.

#### I have listed...

\* Read all remaining names.

Are any of these people staying here for a short time?

- **❖** MARK "No" for:
  - (1) children in shared custody who are currently staying at the sample address, regardless of where they usually stay;
  - (2) commuter workers who stay in some other residence closer to work when their family residence is the sample address.
- **❖** MARK "Yes" for:
  - (1) commuter workers who stay at the sample address to be closer to work;
  - (2) persons who have some other residence.

#### More than 2 Months Question

(Are / Are you/ Is <Name>

\*<Read all bolded names.>

staying here for MORE than two months?

- \*Select the persons who are staying MORE than two months.
- \*Select children in shared custody who are currently staying at the sample address, regardless of where they usually stay.
- \*Select commuter workers who stay at the sample address to be closer to work. \*Enter all that apply, separate with commas.
- \*The two month period is not anchored by a specific reference date, but can encompass the two months prior to survey contact or the two months following the survey contact day. \*If no one is staying more than two months, enter 999 to continue.

#### More than 2 Months Question

❖ Copy names with a "Yes" response to Overcount − 2.

#### I have listed...

❖ Read names with a "Yes" response to Overcount − 2.

# Are you/Is <Name> staying here for MORE than two months^?

- **❖** MARK "Yes":
  - (1) persons who are staying MORE than two months<sup>^</sup>;
  - (2) children in shared custody who are currently staying at the sample address, regardless of where they usually stay;
  - (3) commuter workers who stay at the sample address to be closer to work
  - ^ The two-month period is not anchored by a specific reference date, but can encompass the two months prior to the interview or the two months following the interview date.

# **More than 2 Months Question**

❖ Copy names with a "Yes" response to Overcount − 2.

#### I have listed...

❖ Read names with a "Yes" response to Overcount – 2.

# Are you/Is <Name> staying here for MORE than two months^?

- **❖** MARK "Yes":
  - (1) persons who are staying MORE than two months<sup>^</sup>
  - (2) children in shared custody who are currently staying at the sample address, regardless of where they usually stay commuter workers who stay at the sample address to be closer to work
  - ^ The two-month period is not anchored by a specific reference date, but can encompass the two months prior to the interview or the two months following the interview date.

#### **Roster Check Screen**

\*If you have keyed in a name in error, delete the name by selecting it below. \*Enter all that apply, separate with commas.

\*If you do not need to delete anyone, enter 999 to continue.

- Generate the final roster using the first 1-6 names remaining in the order they were mentioned:
  - Copy names from Original Roster and Undercount Probe
  - OMIT anyone with a "Yes" response to Overcount 1
  - OMIT anyone with a "No" response to More than 2 Months Question

#### **Overcount Follow-up**

We are conducting research to understand why people stay in more than one place. Earlier in the survey you indicated that [Auto fill all names from overcount 1 and 2] sometimes live(s) somewhere else or is (are) only staying here for a short time. Could you briefly explain [Autofill all names from overcount 1 and 2]'s living situation?

- ❖ Generate the final roster using the first 1-6 names remaining in the order they were mentioned.
  - Copy names from Original Roster, Undercount – 1 and Undercount - 2
  - OMIT anyone with a "Yes response to Overcount 1
  - OMIT anyone with a "No" response to More than 2 Months Question

#### **Overcount Follow-up**

We are conducting research to understand why people stay in more than one place. Earlier in the survey you indicated that [Auto fill all names from overcount 1 and 2] sometime(s) live(s) somewhere else or is (are) only staying here for a short time. Could you briefly explain [Autofill all names from overcount 1 and 2]'s living situation?

#### **Subcommittee Lead:**

Kurt Bauman, U.S. Census Bureau

#### **Subcommittee Team Members:**

Maribel Aponte, Department of Veterans Affairs Chris Chapman, Department of Education Tamara Lee, Department of Veterans Affairs Laura Nixon, U.S. Census Bureau Broderick Oliver, U.S. Census Bureau David Raglin, U.S. Census Bureau Erik Schmidt, U.S. Census Bureau Kristi Scott, Social Security Administration Stephen Simoncini, U.S. Census Bureau

#### **Objective:**

A relatively high percentage of people are selecting the response category "No schooling completed" in the self-response modes of the American Community Survey, including adults who have probably completed some level of schooling.

Our goal is to improve respondents' understanding of the category that currently is called "no schooling completed." Our intent is that this category would include only those people who have not completed as much as a single grade of formal schooling. That is, they never completed formal schooling at any level to the point where they would be qualified for the next level of instruction (e.g. going from kindergarten to first grade). "Home school" that follows a curriculum would count as formal schooling in this sense.

#### **Cognitive Testing Research Goals:**

- Do respondents understand this question and the overall meaning?
- Use of the term "grade" (V1) rather than "level" (V2) of school in the base question Is one easier to understand)?
- How do people currently enrolled in school answer this question? Does the instruction help them answer?
- Use of "less than grade 1" (V1) versus expanded three categories "less than 1 year of school completed," "nursery school or preschool," and "kindergarten" (V2) Does one version better help people understand who should select these response options? Specifically, does a broader category (V1) help people respond? How do those with no schooling, schooling in levels below first grade, and others respond? This difference in wording between versions also results in differences in the main headings that the specific categories fall under. Do the heading differences affect respondents' understanding of the categories?

- Unlike the current version, both test versions remove the heading and subheading "No schooling completed." Do those with no schooling know how to respond?
- Do individuals with homeschooled children understand the question and response categories and know where their child should be classified?

#### **Cognitive Testing Recruiting Requirements:**

- Parents/legal guardians of homeschooled children who have not attended regular school
- Individuals aged 25 or over who do not have a high school diploma or a GED or equivalent
- Parents/legal guardians of at least one child aged 3 to 5

# Paper

CURRENT PRODUCTION VERSION	TEST VERSION 1	TEST VERSION 2	Notes or Comments
What is the highest degree or level of school this person has COMPLETED? Mark (X) ONE box. If currently enrolled, mark the previous grade or highest degree received.  NO SCHOOLING COMPLETED  No schooling completed  NURSERY OR PRESCHOOL THROUGH GRADE 12  Nursery school  Kindergarten  Grade 1 through 11 – Specify grade 1 – 11  12th grade – NO DIPLOMA  HIGH SCHOOL GRADUATE  Regular high school diploma  GED or alternative credential  COLLEGE OR SOME COLLEGE  Some college credit, but less than 1 year of college credit  1 or more years of college credit, no degree  Associate's degree (for example: AA, AS)  Bachelor's degree (for example: BA, BS)  AFTER BACHELOR'S DEGREE  Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA)  Professional degree beyond a bachelor's degree (for example: MD, DDS, DVM, LLB, JD)  Doctorate degree (for example: PhD, EdD)	What is the highest grade of school or degree this person has COMPLETED? If currently enrolled, select the previous grade or highest degree received.  Mark (X) ONE box.  LESS THAN GRADE 1  Less than grade 1  GRADE 1 THROUGH GRADE 12  Grade 1 through 11 - Specify grade 1 - 11  12th grade - NO DIPLOMA  HIGH SCHOOL GRADUATE  Regular high school diploma  GED or alternative credential  COLLEGE OR SOME COLLEGE  Some college credit, but less than 1 year of college credit  1 or more years of college credit, no degree  Associate's degree (for example: AA, AS)  Bachelor's degree (for example: BA, BS)  AFTER BACHELOR'S DEGREE  Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA)  Professional degree beyond a bachelor's degree (for example: MD, DDS, DVM, LLB, JD)  Doctorate degree (for example: PhD, EdD)	What is the highest level of school or degree this person has COMPLETED? If currently enrolled, select the previous grade or highest degree received. Mark (X) ONE box.  LESS THAN 1 YEAR OF SCHOOL COMPLETED  Less than 1 year of school completed  NURSERY OR PRESCHOOL THROUGH GRADE 12  Nursery school or preschool  Kindergarten  Grade 1 through 11 – Specify grade 1 – 11  Regular high school diploma  GED or alternative credential  COLLEGE OR SOME COLLEGE  Some college credit, but less than 1 year of college credit  1 or more years of college credit, no degree  Associate's degree (for example: AA, AS)  Bachelor's degree (for example: BA, BS)  AFTER BACHELOR'S DEGREE  Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA)  Professional degree beyond a bachelor's degree (for example: MD, DDS, DVM, LLB, JD)  Doctorate degree (for example: PhD, EdD)	1. Probe to see if respondents read the italicized instruction.  2. Probe to see if respondents understand the "less than grade1" and "less than 1 year of school completed" phrases. Do respondents of Young children in pre school and K check the less than 1 year of school completed?

**Computer Assisted Interview Script** 

CURRENT PRODUCTION VERSION	TEST VERSION 1	TEST VERSION 2	NOTES OR COMMENTS
[Fill 3: Using this list, what/ What] is the highest degree or level of school [Fill 2: (you have/ <name> has)] COMPLETED?  51. No schooling completed</name>	Using this list, what is the highest grade of school or degree you have/ <name> has COMPLETED? If you are/<name> is currently enrolled, select the previous grade or highest degree received.</name></name>	Using this list, what is the highest level of school or degree you have/ <name> has COMPLETED? If you are/<name> is currently enrolled, select the previous grade or highest degree received.</name></name>	1. Flashcards will be used.
52. Nursery school			
53. Kindergarten 54. Grade 1	Less than grade 1 Grade 1	Less than 1 year of school completed	
55. Grade 2	Grade 1 Grade 2	Nursery school or preschool Kindergarten	
56. Grade 3	Grade 3	Grade 1	
57. Grade 4	Grade 4	Grade 2	
58. Grade 5	Grade 5	Grade 3	
59. Grade 6	Grade 6	Grade 4	
60. Grade 7	Grade 7	Grade 5	
61. Grade 8	Grade 8	Grade 6	
62. Grade 9	Grade 9	Grade 7	
63. Grade 10	Grade 10	Grade 8	
64. Grade 11	Grade 11	Grade 9	
65. Grade 12, no diploma	Grade 12, no diploma	Grade 10	
66. Regular high school diploma 67. GED or alternative credential	Regular high school diploma GED or alternative credential	Grade 12 no diplome	
		Grade 12, no diploma	
68. Some college, no degree 69. Associate's degree (for example:	Some college, no degree Associate's degree (for example: AA, AS)	Regular high school diploma GED or alternative credential	
AA, AS)	Bachelor's degree (for example: BA, BS)	Some college, no degree	
70. Bachelor's degree (for example:	Master's degree (for example: MA, MS,	Associate's degree (for example: AA, AS)	
BA, BS)	MEng, MEd, MSW, MBA)	Bachelor's degree (for example: BA, BS)	

71. Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA) 72. Professional degree beyond a bachelor's degree (for example: MD, DDS, DVM, LLB, JD) 73. Doctorate degree (for example: PhD, EdD) 74. Vocational or technical license < <b>DO</b>	Professional degree beyond a bachelor's degree (for example: MD, DDS, DVM, LLB, JD) Doctorate degree (for example: PhD, EdD)  Do not read "Vocational and technical license."	Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA) Professional degree beyond a bachelor's degree (for example: MD, DDS, DVM, LLB, JD) Doctorate degree (for example: PhD, EdD)  Do not read "Vocational and technical"	
NOT READ>		license."	

#### **Subcommittee Lead:**

Sharon Stern, U.S. Census Bureau

#### **Subcommittee Team Members:**

Edward Berchick, U.S. Census Bureau

Richard Chard, Social Security Administration
Robin Cohen, National Center for Health Statistics
Ken Finegold, U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation
Sarah Heimel, U.S. Census Bureau
Paul Jacobs, Agency for Health Research and Quality
Tamara Lee, National Center for Veterans Analysis and Statistics
Toks Oluwole, Social Security Administration
Jonathan Vespa, U.S. Census Bureau
Jessica Vistnes, Agency for Health Research and Quality

# **Objective:**

The objective is to improve the accuracy of the ACS Health Insurance Coverage question, especially Medicaid and direct-purchase coverage.

Revisions to the health insurance question would enhance question reliability and validity. Prior research has found that Medicaid and other means-tested programs are underreported in the ACS and that direct-purchase coverage is overreported (Boudreaux, Ziegenfuss, Graven, Davern, & Blewett, 2011; Boudreaux, Call, Turner, & Fried, 2014; Boudreaux, Call, Turner, Fried, & O'Hara, 2013; Lynch, Kenney, Haley, & Resnick, 2011; O'Hara, 2010). Data are used "to enable the Department of Health and Human Services (HHS) and other federal agencies to more accurately distribute resources and better understand state and local health insurance needs" (U.S. Census Bureau, 2007). The proposed revisions would help to capture changes to the health insurance landscape that occurred with the passage of the Patient Protection and Affordable Care Act (United States Congress, 2010). The primary objectives of revising the health insurance coverage question (Q16) is to do a better job measuring public coverage, to improve accuracy of direct purchase coverage, and to reduce over-count of single-service insurance plans.

Note: Currently we only have one set of text that we will test in both version 1 and version 2.

## **Cognitive Testing Research Goals:**

- How are respondents reporting Medicaid and direct-purchase plans?
- Are the additional instructions ("Do NOT include plans that cover only one type of insurance, such as dental, drug, or vision plans") clear to respondents and are respondents including single-service health insurance plans in their responses?
- How do people with Medicare Advantage plans classify their health insurance coverage?

- How do people with Marketplace coverage classify their coverage?
- How do respondents with household members who have coverage through the state Children's Health Insurance Program (CHIP) classify the child's coverage?
- For respondents who check more than one option, are they double reporting single coverage or do they have more than one type?
- What types of insurance or health plans do respondents associate with "current or former employer, union, or professional association"?

# **Cognitive Testing Recruiting Requirements:**

We are requesting that the cognitive testing has a sufficient sample of:

- Persons aged 65 or older
- Persons enrolled in Medicaid
- Persons with household members enrolled in CHIP
- Marketplace enrollees (state or federal marketplace)

# Paper

CURRENT PRODUCTION VERSION	I		TEST VERSIONS 1 + 2	
Is this person CURRENTLY covered by any of following types of health insurance or health coverage plans? Mark "Yes" or "No" for EACH type of coverage in items a – h.		follow	person CURRENTLY covered by a ving types of health insurance or l age plans?	nealth
a. Insurance through a current or Yes No			T include plans that cover only one ty e, such as dental, drug, or vision plans	
former employer or union (of this person or another family member)			Yes" or "No" for EACH type of coverage	
b. Insurance purchased directly from an insurance company (by this person or another family member)		a. Insu emp	rance through a current or former ployer, union, or professional	Yes No
c. Medicare, for people 65 and older, or people with certain disabilities		asso fami	ociation (of this person or another ily member)	
d. Medicaid. Medical Assistance. or		b. Med or pe	licare, for people 65 and older, eople with certain disabilities	
any kind of government-assistance plan for those with low incomes or a disability		Prog gove	licaid, Children's Health Insurance gram (CHIP), or any kind of ernment-assistance plan for those	
e. TRICARE or other military health care			low incomes or a disability rance purchased directly from an	
f. VA (enrolled for VA health care)		insu	rance company or through a State ederal Marketplace, HealthCare.gov,	
g. Indian Health Service		or a	similar website (by this person or ther family member)	
h. Any other type of health insurance or health coverage plan – Specify —			CARE or other military health care	
¥		f. VA (	enrolled for VA health care)	
		g. India	an Health Service	
			other type of health insurance ealth coverage plan – Specify ∡	

**Computer Assisted Interview Script** 

CURRENT PRODUCTION VERSION	TEST VERSIONS 1 + 2
I am now going to ask you some questions about [Fill 1: your/ <name>'s] health insurance and health coverage.</name>	I am now going to ask you some questions about your/ <name's> health insurance and health coverage. Do NOT include plans that cover only one type of service, such as dental, drug or vision plans.</name's>
[Fill 2: Are you/Is <name>] currently covered by health insurance through a current or</name>	, ,
former employer or union of [Fill 3: yours or another family member/ <him her=""> or</him>	Are you/Is <name> currently covered by health insurance through a current or</name>
another family member]?	former employer, union, or professional association of yours or another family
1. Yes	member/<[him/her] or another family member>?
2. No	Yes No
[Fill 1: Are you/Is <name>] currently covered by health insurance purchased directly from an insurance company by [Fill 2: you or another family member/<him her=""> or another family member]?  1. Yes  2. No</him></name>	Are you/Is <name> currently covered by Medicare, for people age 65 or older or people with certain disabilities? Yes No</name>
[Fill 1: Are you/Is <name>] currently covered by Medicare, for people age 65 or older or people with certain disabilities?</name>	Are you/Is <name> currently covered by Medicaid, the Children's Health Insurance Program (CHIP) or any kind of government-assistance plan for those</name>
1. Yes	with low incomes or a disability?
2. No	Yes
[Fill 1: Are you/Is <name>] currently covered by Medicaid, Medical Assistance, or any</name>	No
kind of government-assistance plan for those with low incomes or a disability?  1. Yes	Are you/Is <name> currently covered by health insurance purchased directly from</name>
2. No	an insurance company, through a State or Federal Marketplace, HealthCare.gov, or
	a similar website by you or another family member/<[him/her] or another family member>?
	Yes
	No

[Fill 1: Are you/Is <name>] currently covered by TRICARE or other military health</name>	Are you/Is <name> currently covered by TRICARE or other military health care?</name>
care?	Yes
	No
1. Yes	
2. No	Are you/Is <name> currently covered through the VA or enrolled for VA health</name>
[Fill 1: Are you/Is <name>] currently covered through the VA or enrolled for VA health</name>	care?
care?	Yes
	No
1. Yes	
2. No	Are you/Is <name> currently covered through the Indian Health Service?</name>
[Fill 1: Are you/Is <name>] currently covered through the Indian Health Service?</name>	Yes
[1 III 1. Are you/is \tanie ] currently covered unough the indian fleatur service:	No
1. Yes	
2. No	Are you/Is <name> currently covered by any other health insurance or health</name>
	coverage plan?
[Fill 1: Are you/Is <name>] currently covered by any other health insurance or health</name>	Yes
coverage plan?	No
1 77	
1. Yes	
2. No	

#### **Subcommittee Lead:**

Sharon Stern, U.S. Census Bureau

#### **Subcommittee Team Members:**

Maribel Aponte, Department of Veterans Affairs Jenny Berkley, U.S. Census Bureau Karen Brummond, Equal Employment Opportunity Commission Fran Chevarley, Agency for Healthcare Research and Quality Douglas Conway, U.S. Census Bureau Romella El Kharzazi, Equal Employment Opportunity Commission Jason Fields, U.S. Census Bureau Erika Harrell, Bureau of Justice Statistics David Kashihara, Agency for Healthcare Research and Quality Lan Liang, Agency for Healthcare Research and Quality Jennifer Madans, National Center for Health Statistics Matt Messel, Social Security Administration Jennifer Ortman, U.S. Census Bureau Amy Steinweg, U.S. Census Bureau Hilary Waldron, Social Security Administration Julie Weeks, National Center for Health Statistics

#### **Objective:**

The objective is to improve accuracy of disability measures and increase comparability across other major surveys.

We want to determine if respondents understand the questions, what is being asked for, and if they can easily determine what response category they should select. It is important to evaluate how the proposed questions perform when a person is responding for themselves and when the person is serving as a proxy reporter. We want to understand how respondents select a response to the proposed four answer response categories and ensure that respondents understand the proposed questions without creating undue burden.

#### **Cognitive Testing Research Goals:**

- Modified response categories in both versions to be more detailed than current "Yes/No" response categories: How do respondents distinguish between categories when selecting a category?
- Introductory text in Computer Assisted Instrument (CAI) before Q18: Does having introductory text, "The next questions ask about difficulties [NAME] may have doing certain activities." help transition from the previous set of questions to the disability section?

- Q19a: Do respondents think there is a difference between "stairs" (*Version 1*) and "steps" (*Version 2*)? Does one term help respondents understand the question better than the other?
- Q19b: Do adults think this question only applies to people with dementia? Do respondents focus on the term "remembering," on the term "concentrating," or both? How do people with a learning disability (or people answering for someone who has one) answer this question? Do respondents associate particular health conditions with difficulty remembering or concentrating?
- Q19c: Do respondents understand the text "washing all over" (*Version 2*) as being a more broad (i.e., inclusive) description of bathing? Do respondents find "washing all over" to be odd or too personal? Do respondents find "bathing" (*Version 1*) to be odd or too personal?
- 19d: What types of disabilities/conditions are being identified for children when the response indicates difficulty with communication? Does the question makes sense for younger children who are not old enough to talk? Do respondents understand that this question is not referring to mastering English as a second language (particularly those who do not speak English very well)?
- Q20: In Version 2, the question preamble, "Because of a physical, mental, or emotional condition,..." is included in the beginning of the question. Does this preamble result in a better understanding that this question is asking about disability limitations regarding doing errands? What types of problems/issues do respondents mention when discussing "difficulty doing errands alone such as visiting a doctor's office or shopping"?
- Do respondents age 50+ interpret the difficulties in this series of questions as part of the normal aging process? If so, do respondents age 50+ underreport?

#### **Cognitive Testing Recruiting Requirements:**

- Parents/legal guardians of children with disabilities
- People with disabilities, especially learning disabilities
- People whose first language is not English and who do not speak English very well
- People 50 years or older

# Paper

CURRENT PRODUCTION VERSION	TEST VERSION 1	TEST VERSION 2	
a. Is this person deaf or does he/she have serious difficulty hearing?  Yes No  b. Is this person blind or does he/she have serious difficulty seeing even when wearing glasses?  Yes No	a. Does this person have difficulty seeing, even if wearing glasses?  No difficulty Some difficulty A lot of difficulty Cannot do at all  b. Does this person have difficulty hearing, even if using a hearing aid?  No difficulty Some difficulty A lot of difficulty Cannot do at all	a. Does this person have difficulty seeing, even if wearing glasses?  No difficulty Some difficulty A lot of difficulty Cannot do at all  b. Does this person have difficulty hearing, even if using a hearing aid?  No difficulty Some difficulty A lot of difficulty Cannot do at all  Cannot do at all	

	Answer question 19a – d if this person is 5 years old or over. Otherwise, SKIP to the questions for Person 2 on page 19.	Answer question 19a – d if this person is 5 years old or over. Otherwise, SKIP to the questions for Person 2 on page 19.
	a. Does this person have difficulty walking or climbing stairs?	a. Does this person have difficulty walking or climbing steps?
Answer questions 19a – c if this person is	☐ No difficulty	☐ No difficulty
5 years old or over. Otherwise, SKIP to	☐ Some difficulty	☐ Some difficulty
the questions for Person 2 on page 12.	☐ A lot of difficulty	☐ A lot of difficulty
a. Because of a physical, mental, or emotional condition, does this person have serious	Cannot do at all	☐ Cannot do at all
difficulty concentrating, remembering, or making decisions?	b. Does this person have difficulty remembering	h Doos this name who we difficulty name who sing
Yes	or concentrating?	b. Does this person have difficulty remembering or concentrating?
□ No	☐ No difficulty	☐ No difficulty
b. Does this person have serious difficulty	☐ Some difficulty	☐ Some difficulty
walking or climbing stairs?	☐ A lot of difficulty	A lot of difficulty
Yes	Cannot do at all	Cannot do at all
□ No	c. Does this person have difficulty bathing or	
<ul> <li>Does this person have difficulty dressing or bathing?</li> </ul>	dressing?	c. Does this person have difficulty washing all over or dressing?
Yes	☐ No difficulty	☐ No difficulty
□ No	☐ Some difficulty	Some difficulty
	☐ A lot of difficulty	☐ A lot of difficulty
	Cannot do at all	Cannot do at all
	d. Using his or her usual language, does this person have difficulty communicating, for example understanding or being understood?	d. Using his or her usual language, does this person have difficulty communicating, for example understanding or being understood?
	☐ No difficulty	☐ No difficulty
	Some difficulty	Some difficulty
	☐ A lot of difficulty	☐ A lot of difficulty
	Cannot do at all	
	outliet do dt di	Cannot do at all

CURRENT PRODUCTION VERSION	TEST VERSION 1	TEST VERSION 2	
Answer question 20 if this person is 15 years old or over. Otherwise, SKIP to the questions for Person 2 on page 12.  Because of a physical, mental, or emotional condition, does this person have difficulty doing errands alone such as visiting a doctor's office or shopping?  Yes No	Answer question 20 if this person is 15 years old or over. Otherwise, SKIP to the questions for Person 2 on page 19.  Does this person have difficulty doing errands alone such as visiting a doctor's office or shopping?  No difficulty  Some difficulty  A lot of difficulty  Cannot do at all	Answer question 20 if this person is 15 years old or over. Otherwise, SKIP to the questions for Person 2 on page 19.  Because of a physical, mental, or emotional condition, does this person have difficulty doing errands alone such as visiting a doctor's office or shopping?  No difficulty  Some difficulty  A lot of difficulty  Cannot do at all	

**Computer Assisted Interview Script** 

CURRENT PRODUCTION VERSION	TEST VERSION 1	TEST VERSION 2	
For all people  I am now going to ask some questions about difficulty you	The next questions ask about difficulties you/ <name></name>	The next questions ask about difficulties you/ <name></name>	
may have with ordinary daily activities.	may have doing certain activities.	may have doing certain activities.	
Is this person deaf or does he/she have serious difficulty hearing?	Do you/does <name> have difficulty seeing, even if wearing glasses?</name>	Do you/does <name> have difficulty seeing, even if wearing glasses?</name>	
□ Yes □ No	No difficulty Some difficulty	No difficulty Some difficulty	
u No	A lot of difficulty	A lot of difficulty	
Is this person blind or does he/she have serious difficulty seeing even when wearing glasses?	Cannot do at all	Cannot do at all	
□ Yes	Do you/does <name> have difficulty hearing, even if using a hearing aid?</name>	Do you/does <name> have difficulty hearing, even if using a hearing aid?</name>	
□ No	No difficulty	No difficulty	
	Some difficulty	Some difficulty	
	A lot of difficulty Cannot do at all	A lot of difficulty Cannot do at all	

For people 5 and over		
Because of a physical, mental, or emotional condition, does	Do you/does <name> have difficulty walking or climbing</name>	Do you/does <name> have difficulty walking or climbing</name>
this person have serious difficulty concentrating,	stairs?	steps?
remembering, or making decisions?		
-+	No difficulty	No difficulty
□ Yes	Some difficulty	Some difficulty
□ No	A lot of difficulty	A lot of difficulty
	Cannot do at all	Cannot do at all
Does this person have serious difficulty walking or		
climbing stairs?	Do you/does <name> have difficulty remembering or</name>	Do you/does <name> have difficulty remembering or</name>
	concentrating?	concentrating?
□ Yes		
□ No	No difficulty	No difficulty
	Some difficulty	Some difficulty
	A lot of difficulty	A lot of difficulty
Does this person have difficulty dressing or bathing?	Cannot do at all	Cannot do at all
		7
□ Yes	Do you/does <name> have difficulty bathing or dressing?</name>	Do you/does <name> have difficulty washing all over or</name>
□ No		dressing?
	No difficulty	NT 1960 1/
	Some difficulty	No difficulty
	A lot of difficulty	Some difficulty
	Cannot do at all	A lot of difficulty
		Cannot do at all
	Using your/ <his her=""> usual language, do you/does <name></name></his>	TT
	have difficulty communicating, for example understanding	Using your/ <his her=""> usual language, do you/does <name></name></his>
	or being understood?	have difficulty communicating, for example understanding
		or being understood?
	No difficulty	NI - 120014
	Some difficulty	No difficulty
	A lot of difficulty	Some difficulty
	Cannot do at all	A lot of difficulty
		Cannot do at all

For people 15 and over		
Because of a physical, mental, or emotional condition, does [NAME] have difficulty doing errands alone such as visiting a doctor's office or shopping?  Pes No	Do you/does <name> have difficulty doing errands alone such as visiting a doctor's office or shopping?  No difficulty Some difficulty A lot of difficulty Cannot do at all</name>	Because of a physical, mental, or emotional condition, do you/does <name> have difficulty doing errands alone such as visiting a doctor's office or shopping?  No difficulty Some difficulty A lot of difficulty Cannot do at all</name>

#### **Subcommittee Lead:**

Brian McKenzie, U.S. Census Bureau

#### **Subcommittee Team Members:**

Dorothy Barth, U.S. Census Bureau Charlynn Burd, U.S. Census Bureau Michael Burrows, U.S. Census Bureau Ken Cervenka, Bureau of Transportation Statistics Slagan Locklear, U.S. Census Bureau Jasmy Methipara, Bureau of Transportation Statistics Clara Reschovsky, Bureau of Transportation Statistics

#### **Objective:**

The prevalence of and usage of ride-hailing services has increased considerably in recent years, and these services are expected to become more prevalent in the coming years. Our objective is to capture these services in our ACS means of transportation question in a direct and unambiguous way. The current ACS travel mode question includes several categories ("taxicab," "carpooling," and "other") that may potentially accommodate this mode of transportation, but none of these categories explicitly reference ride hailing. We would like to concentrate ridehailing responses into one category, combining it with traditional taxi services.

We also would like to take the opportunity to probe respondents and gain information that could be useful in helping improve the transportation to work question in the future. The question currently only allows for one response; however, respondents may use multiple modes and we may want to capture them. Additionally, in a rapidly changing transportation landscape, we may be missing some modes that we could consider adding (for example, electric scooters).

#### **Cognitive Testing Research Goals:**

- For all respondents, is the meaning of the "taxi or ride-hailing services" category clear? If not, what descriptive words would have made the meaning clearer? Are there descriptive words missing?
- Among those who chose ride-hailing as their primary means of transportation to work, what is their second most common mode of work travel?
- Among those who did not choose ride-hailing as their primary means of transportation to work, do they ever use ride-hailing services to travel to or from work? How often? In what context?
- Do respondents have any travel modes they use to get to work that are not represented in the ACS travel mode question? What are they?

#### **Cognitive Testing Recruiting Requirements:**

Our recruiting requirement goal is to target workers who are likely to either use a ride-hailing service or consider using one. Respondents should satisfy the following criteria:

- Individuals who use Lyft or Uber to get to work
- Individuals who rely on alternative means of transportation to get to work, but do not use public transportation, such as rides from other individuals (i.e., people who do not typically work at home, but use a carpool, vanpool, slug line, etc.)

# Paper

CURRENT PRODUCTION VERSION	TEST VERSION 1	TEST VERSION 2	
How did this person usually get to work LAST WEEK? Mark (X) ONE box for the method of transportation used for most of the distance.  Car, truck, or van	How did this person usually get to work LAST WEEK? Mark (X) ONE box for the method of transportation used for most of the distance.  Car, truck, or van	How did this person usually get to work LAST WEEK? Mark (X) ONE box for the method of transportation used for most of the distance.  Car, truck, or van Ride-hailing services (including taxi)  Bus Motorcycle  Subway or elevated rail Bicycle  Long-distance train or commuter rail Walked  Light rail, streetcar, or trolley Worked from home → SKIP to question 39b  Ferryboat Other method	

**Computer Assisted Interview Script** 

CURRENT PRODUCTION VERSION	TEST VERSION 1	TEST VERSION 2	NOTES OR COMMENTS
"{Fill 2: Using this list,} LAST WEEK, how did {Fill 3: <name>/you} USUALLY get to work?</name>	Using this list, LAST WEEK, how did you/ <name> USUALLY get to work?</name>	Using this list, LAST WEEK, how did you/ <name> USUALLY get to work?</name>	Flashcards will be used.
(If {Fill 4: he/she/ <name>)/you} usually used more than one method of transportation during the trip, report the one used for most of the distance.)</name>	(If ^you/ <name>^ usually used more than one method of transportation during the trip, report the one used for most of the distance.)</name>	(If ^you/ <name>^ usually used more than one method of transportation during the trip, report the one used for most of the distance.)</name>	
<ol> <li>Car, truck, or van</li> <li>Bus</li> <li>Subway or elevated rail</li> <li>Long-distance train or commuter rail</li> <li>Light rail, streetcar, or trolley</li> <li>Ferryboat</li> <li>Taxicab</li> <li>Motorcycle</li> <li>Bicycle</li> <li>Walked</li> <li>Worked from home</li> <li>Other Method</li> </ol>	Car, truck, or van Bus Subway or elevated rail Long-distance train or commuter rail Light rail, streetcar, or trolley Ferryboat Taxi or ride-hailing services Motorcycle Bicycle Walked Worked from home Other Method	Car, truck, or van Bus Subway or elevated rail Long-distance train or commuter rail Light rail, streetcar, or trolley Ferryboat Ride-hailing services (including taxi) Motorcycle Bicycle Walked Worked from home Other Method	

#### **Subcommittee Lead:**

Jonathan Rothbaum, U.S. Census Bureau

#### **Subcommittee Team Members:**

Maribel Aponte, National Center for Veterans Analysis and Statistics Dorothy Barth, U.S. Census Bureau
Lynn Fisher, Social Security Administration
Gloria Guzman, U.S. Census Bureau
Tamara Lee, National Center for Veterans Analysis and Statistics
Carey Patrick, Bureau of Labor Statistics
Kirby Posey, U.S. Census Bureau
Mark Prell, Economic Research Service
Dave Shoffner, Social Security Administration
Adam Smith, U.S. Census Bureau

#### **Objective:**

The Census Bureau has been investigating the use of administrative records to reduce respondent burden and improve data quality in the American Community Survey (ACS) (see <a href="https://www.census.gov/programs-surveys/acs/operations-and-administration/agility-in-action.html">https://www.census.gov/programs-surveys/acs/operations-and-administration/agility-in-action.html</a>). As a part of using administrative records, potential changes to the ACS income section have been evaluated with cognitive testing. We believe this process should continue, with additional changes evaluated in the 2022 ACS Content Test.

What we are testing in this study is a continuation of prior testing that was done with Westat (see the report at: <a href="https://www.census.gov/content/dam/Census/library/working-papers/2017/acs/2017\_Westat\_01.pdf">https://www.census.gov/content/dam/Census/library/working-papers/2017/acs/2017\_Westat\_01.pdf</a>). We will build off the findings from the Westat study, and test an alternative form that incorporates Westat's recommendations and aims to address their concerns. To align better with administrative data, we will also test changing the reference period from the last 12 months to the previous calendar year.

In addition to changes to the income question, we also would like to test changing the reference period for the SNAP benefit question to last year (from "last 12 months"). Because the questions near the SNAP question have a different reference period than last year, we propose testing the question in two different places – its current location (version 1) and at the end of the housing section (version 2).

Finally, we want to test some changes to the questions in the weeks worked series. The version we will test, like income, builds off findings from the Westat test, and includes the same change to the reference period.

#### **Cognitive Testing Research Goals:**

#### **Income**

- Do the respondents report income for the appropriate reference period (prior year)?
- Are the respondents reporting income accurately, especially keeping in mind the following changes being made to question or instructional wording:
  - Total Income Amount Adding "include all sources"
    - Does the respondent report "all sources" or do they leave out some?
  - Self-Employment Income Adding "including work paid for in cash"
    - Does the respondent report all self-employment income (including side jobs that they may not report as income for tax purposes)?
  - Net Rental Income splitting up category as its own question (paper)
    - Does splitting up the categories make it easier for the respondent to recall the amounts and report accurately?
    - Does having Net Rental Income as its own category (on Paper) make respondents who are reading quickly misreport their monthly rent to a landlord (instead of rental income)?
    - If a respondent indicates that they did not make any rental income, we want to learn more.
    - How would respondents who did make rental income answer if they had lost money or broke even on a rental property?
  - Public Assistance Income new wording and instructions
    - Does the new wording (and additional instructions) help the respondent to report the amounts and the type of income that we intend to be reported with this question, or do they include or exclude certain types?

#### **Weeks Worked**

- Do the changes to the WEEKS WORKED series (in addition to the year change) obtain the appropriate information for that year?
- Does question 39 set up the universe for the WEEKS WORKED questions properly? (Or conversely, do respondents get confused by the additional question (39b) and SKIP patterns to 39?)
- Adding "for at least one day" to 41b is supposed to let the respondent know that we consider a week being worked even if they just worked one day in that week. Does the respondent seem to understand this concept?

#### **SNAP**

- Which placement of the SNAP question was better for respondents (current location in version 1, or end of housing section in version 2)?
- Is one better than the other at getting respondents to understand the reference period and how it differs from other questions?
- Does the placement of the question at the end of the housing section result in it getting overlooked?

#### **Cognitive Testing Recruiting Requirements:**

- Individuals who were irregular workers (such as partial year workers, irregular schedules, multiple jobs) in the prior year
- Individuals with regular work schedules in the prior year
- Individuals who did not work in the prior year
- Individuals who earned retirement income, self-employment income, net rental income, or a commission/bonus/tips in the prior year
- Individuals who received SNAP benefits or public assistance in the prior year

Paper → Income

CURRENT PRODUCTION VERSION	TEST VERSION 1	TEST VERSION 2	NOTES OR COMMENTS
IN THE PAST 12 MONTHS, did you or any member of this household receive benefits from the Food Stamp Program or SNAP (the Supplemental Nutrition Assistance Program)? Do NOT include WIC, the School Lunch Program, or assistance from food banks.  Yes No	In 2018, did you or any member of this household receive benefits from the Food Stamp Program or SNAP (the Supplemental Nutrition Assistance Program)? Do NOT include WIC, the School Lunch Program, or assistance from food banks.  Yes  No	In 2018, did you or any member of this household receive benefits from the Food Stamp Program or SNAP (the Supplemental Nutrition Assistance Program)? Do NOT include WIC, the School Lunch Program, or assistance from food banks.  Yes No	Note: The reference period for SNAP Test V1 + V2 is "2019" in the final paper questionnaires, not "2018."  Re: SNAP questions:  1. Test V1 = Keep SNAP question where it currently is in the survey. It corresponds to question 18 in the
			V1 of the paper questionnaire.  2. Test V2 = Move SNAP question to end of housing section to reduce impact of change in reference period for the respondent. It corresponds to question 27 in the V2 of the paper questionnaire.

# 2022 ACS Content Test – Cognitive Testing TOPIC – Income

#### Wednesday, February 19, 2020

INC		
	OME IN	THE PAST 12 MONTHS
pers TOT	son receiv	"Yes" box for each type of income this red, and give your best estimate of the UNT during the PAST 12 MONTHS. past 12 months" is the period from one year ago up through today.)
	rk (X) the Treceived	"No" box to show types of income f.
If ne the	et income right of ti	was a loss, mark the "Loss" box to he dollar amount.
shai repo	re for eac ort the wh	eceived jointly, report the appropriate h person – or, if that's not possible, nole amount for only one person and " box for the other person.
0	r tips fro	alary, commissions, bonuses, om all jobs. Report amount before s for taxes, bonds, dues, or other items.
	Yes →	\$ 0,000,000.00
Ш	No	TOTAL AMOUNT for past 12 months
		loyment income from own nonfarm
p	roprieto	rships and partnerships. Report ne after business expenses.
p	roprieto	rships and partnerships. Report
p	roprieto NET incom	rships and partnerships. Report ne after business expenses.
c. Ir	Yes → No nterest, coyalty in	ships and partnerships. Report ne after business expenses.  Solution 100
c. Ir	roprieto NET incom Yes → No nterest, o oyalty in and trusts	ships and partnerships. Report ne after business expenses.  Solution 100

### **INCOME IN 2018** Report all types of income received, taxable and non-taxable, from January 1, 2018 to December 31, Mark (X) the "Yes" box for each type of income this person received, and give your best estimate of the TOTAL AMOUNT. Mark (X) the "No" box for each type of income NOT received. For income received jointly, report the appropriate share for each person - or, if that's not possible. report the whole amount for only one person and mark the "No" box for the other person. a. Wages, salary, commissions, bonuses, or tips from all jobs. Report amount before deductions for taxes, bonds, dues, or other items. Yes → No TOTAL AMOUNT for 2018 b. Self-employment income from own nonfarm businesses or farm businesses, including proprietorships and partnerships. Report NET income after business expenses. If net income was a loss, mark (X) the "Loss" box next to the dollar amount. Yes → No Loss TOTAL AMOUNT for 2018 c. Interest, dividends, net rental income, royalty income, or income from estates and trusts. Report even small amounts credited to an account. If net income was a loss, mark (X) the "Loss" box next to the dollar amount. Yes →

TOTAL AMOUNT for 2018

No

### **INCOME IN 2018** Report all types of income received, taxable and non-taxable, from January 1, 2018 to December 31, Mark (X) the "Yes" box for each type of income this person received, and give your best estimate of the TOTAL AMOUNT. Mark (X) the "No" box for each type of income NOT received. For income received jointly, report the appropriate share for each person - or, if that's not possible, report the whole amount for only one person and mark the "No" box for the other person. a. Wages, salary, commissions, bonuses, or tips from all jobs. Report amount before deductions for taxes, bonds, dues, or other items. Yes → No TOTAL AMOUNT for 2018 b. Self-employment income, including work paid

for in cash. Report income from own businesse

(farm or non-farm), including proprietorships

business expenses. If net income was a loss, mark

TOTAL AMOUNT for 2018

**TOTAL AMOUNT for 2018** 

c. Interest, dividends, royalty income, or income

from estates and trusts. Report even small

amounts credited to an account.

Loss

and partnerships. Report NET income after

(X) the "Loss" box next to the dollar amount.

Yes →

Yes →

No

**Note:** The reference periods for INCOME Test V1 + V2 is "2019" in the final paper questionnaires, not "2018."

Loss

# 2022 ACS Content Test - Cognitive Testing TOPIC - Income

# Wednesday, February 19, 2020

d. Social Security or Railroad Retirement.  Yes → \$ .00  TOTAL AMOUNT for past 12 months	d. Social Security or Railroad Retirement.  ☐ Yes → \$ .00 ☐ No TOTAL AMOUNT for 2018	d. Net rental income. Report income after expenses.  If net rental income was a loss, mark (X) the "Loss" box next to the dollar amount.   Yes → \$	
e. Supplemental Security Income (SSI).    Yes → \$ , .00   No TOTAL AMOUNT for past 12 months  f. Any public assistance or welfare payments from the state or local welfare office.    Yes → \$ , .00   No TOTAL AMOUNT for past 12 months  g. Retirement income, pensions, survivor or disability income. Include income from a previous employer or union, or any regular withdrawals or distributions from IRA, Roth IRA, 401(k), 403(b), or other accounts specifically designed for retirement. Do not include Social Security.    Yes → \$ , .00   No TOTAL AMOUNT for past 12 months	e. Supplemental Security Income (SSI).    Yes → \$	e. Social Security or Railroad Retirement.  Yes → \$ .00  NO TOTAL AMOUNT for 2018  f. Supplemental Security Income (SSI).  Yes → \$ .00  NO TOTAL AMOUNT for 2018  g. Any financial assistance from the state or local welfare office. Do NOT include non-cash benefits, such as energy or housing assistance, the Food Stamp Program, or SNAP.  Yes → \$ .00  NO TOTAL AMOUNT for 2018  h. Retirement income, pensions, survivor or disability income. Include income from a previous employer or union, or any regular withdrawals or distributions from IRA, Roth IRA, 401(k), 403(b), or other accounts specifically designed for retirement. Do NOT include Social Security.	
h. Any other sources of income received regularly such as Veterans' (VA) payments, unemployment compensation, child support or alimony. Do NOT include lump sum payments such as money from an inheritance or the sale of a home.  □ Yes → \$ .00  TOTAL AMOUNT for past 12 months	h. Any other sources of income received regularly such as Veterans' (VA) payments, unemployment compensation, child support or alimony.  Do NOT include lump sum payments such as money from an inheritance or the sale of a home.  Yes → \$ .00  NO TOTAL AMOUNT for 2018	No TOTAL AMOUNT for 2018  i. Any other sources of income received regularly such as Veterans' (VA) payments, unemployment compensation, child support or alimony.  Do NOT include lump sum payments such as money from an inheritance or the sale of a home.  Yes → \$ .00  NO TOTAL AMOUNT for 2018	

What was this person's total income during the PAST 12 MONTHS? Add entries in questions 43a to 43h; subtract any losses. If net income was a loss, enter the amount and mark (X) the "Loss" box next to the dollar amount.	What was this person's total income in 2018? Add entries in questions 43a to 43h; subtract any losses. If net income was a loss, enter the amount and mark (X) the "Loss" box next to the dollar amount.	Including all types of income, what was this person's total income in 2018? Add entries in questions 43a to 43i; subtract any losses. If net income was a loss, enter the amount and mark (X) the "Loss"
OR \$ .00 Loss  TOTAL AMOUNT for past 12 months	None STOTAL AMOUNT for 2018	box next to the dollar amount.  OR \$ .00 Loss

**Computer Assisted Interview Script** → **Income** 

CURRENT PRODUCTION VERSION	TEST VERSION 1	TEST VERSION 2	NOTES OR COMMENTS
IN THE PAST 12 MONTHS, did you or any member of this household receive benefits from the Food Stamp Program or SNAP (the Supplemental Nutrition Assistance Program)? Do NOT include WIC, the School Lunch Program, or assistance from food banks.  [Instruction to be read] The next few questions are about income DURING THE PAST 12 MONTHS, that is from <current 1="" month,="" year-=""> to <month -1,="" current="" year=""></month></current>	IN THE PAST 12 MONTHS, did you or any member of this household receive benefits from the Food Stamp Program or SNAP, the Supplemental Nutrition Assistance Program? Do NOT include WIC, the School Lunch Program, or assistance from food banks.  Yes No  ★ Complete Questions A − M for each person before moving onto the next person.  The next few question are about all types of income, taxable and non-taxable, received in 2018 (from January 1, 2018 to December 31, 2018).	IN THE PAST 12 MONTHS, did you or any member of this household receive benefits from the Food Stamp Program or SNAP, the Supplemental Nutrition Assistance Program? Do NOT include WIC, the School Lunch Program, or assistance from food banks.  Yes No  ★ Complete Questions A − M for each person before moving onto the next person.  The next few question are about all types of income, taxable and non-taxable, received in 2018 (from January 1, 2018 to December 31, 2018).	<ul> <li>Note: The reference period for SNAP and INCOME Test V1 + V2 is "2019" in the final CAI scripts, not "2018."</li> <li>Re: SNAP questions: <ol> <li>Test V1 = Keep SNAP question where it currently is in the survey. It corresponds to question 18 in the V1 of the paper questionnaire.</li> <li>Test V2 = Move SNAP question to end of housing section to reduce impact of change in reference period for the respondent. It corresponds to question 27 in the V2 of the paper questionnaire.</li> </ol> </li> </ul>
1. Did [ <name>/you] receive any wages or salary?  &lt;1&gt; Yes  &lt;2&gt; No  If yes:</name>	For income received jointly, report the appropriate share for each person – or, if that's not possible, report the whole amount for only one person and do not report the income for the other person.	For income received jointly, report the appropriate share for each person – or, if that's not possible, report the whole amount for only one person and do not report the income for the other person.	

How much did [<Name>/you] receive in wages and salary from all jobs before taxes and other deductions?

2. Did you receive any tips, bonuses or commissions DURING THE PAST 12 MONTHS?

<1> Yes

<2> No

If yes:

How much did [<Name>/you] receive in tips, bonuses, or commissions from all jobs before taxes and other deductions?

3. Did [<Name>/you] receive any selfemployment income DURING THE PAST 12 MONTHS? Report income from own businesses (farm or non-farm) including proprietorships and partnerships.

<1> Yes

<2> No If yes:

What was the amount? Report net income after operating expenses. Include earnings as a tenant farmer or sharecropper.

4. Did [<Name>/you] receive any interest or dividends DURING THE PAST 12 MONTHS? Report even small amounts credited to an account.

<1> Yes

<2> No

A. Did you/<NAME> receive any wages or salary in 2018?

If yes: How much did you/<NAME> receive in wages and salary from all jobs before deductions for taxes, bonds, dues or other items?

B. Did you/<NAME> receive any commissions, bonuses, or tips in 2018?

If yes: How much did you/<NAME> receive in tips, bonuses, or commissions from all jobs before deductions for taxes, bonds, dues, or other items?

C. Did you/<NAME> receive any selfemployment income in 2018? Report income from own businesses (farm or non-farm) including proprietorships and partnerships.

If yes: What was the amount? Report NET income after business expenses.

D. Did you/<NAME> receive any interest or dividends in 2018? Report even small amounts credited to an account.

If yes: What was the amount?

A. Did you/<NAME> receive any wages or salary in 2018?

If yes: How much did you receive in wages and salary from all jobs before deductions for taxes, bonds, dues or other items?

B. Did you/<NAME> receive any commissions, bonuses, or tips in 2018?

If yes: How much did you/<NAME> receive in tips, bonuses, or commissions from all jobs before deductions for taxes, bonds, dues or other items?

C. Did you/<NAME> regularly receive any self-employment income in 2018, including work paid for in cash? Report income from own businesses (farm or non-farm) including proprietorships and partnerships.

If yes: What was the amount? Report NET income after business expenses.

D. Did you/<NAME> receive any interest or dividends in 2018? Report even small amounts credited to an account.

If yes: What was the amount?

If yes:			
What was the amount?	E. Did you/ <name> receive any net</name>	E. Did you/ <name> receive any net rental</name>	
5 70 11 11	rental income in 2018? Net rental income	income in 2018? Net rental income is the	
5. Did [ <name>/you] receive any net</name>	is the total amount after expenses.	total amount after expenses.	
rental income DURING THE PAST 12			
MONTHS? Net rental income is the	If yes: What was the net amount?	If yes: What was the net amount?	
total amount after expenses.			
<1> Yes <2> No	F. Did you/ <name> receive any royalty</name>	F. Did you/ <name> receive any royalty</name>	
If yes:	income or income from estates and trusts	income or income from estates and trusts	
What was the net amount?	in 2018?	in 2018?	
The state of the s			
6. Did [ <name>/you] receive any</name>	If yes: What was the amount?	If yes: What was the amount?	
royalty income or income from estates and			
trusts DURING THE PAST 12 MONTHS?	G. Did you/ <name> receive any Social</name>	G. Did you/ <name> receive any Social</name>	
<1> Yes	Security or Railroad Retirement benefits	Security or Railroad Retirement benefits in	
<2> No	in 2018?	2018?	
If yes:			
What was the amount?	If yes: What was the amount?	If yes: What was the amount?	
7 Did [ Nomes /you] receive ony			
7. Did [ <name>/you] receive any Social Security or Railroad Retirement</name>	H. Did you/ <name> receive any</name>	H. Did you/ <name> receive any</name>	
benefits DURING THE PAST 12	Supplemental Security Income (SSI)	Supplemental Security Income (SSI)	
MONTHS?	payments in 2018?	payments in 2018?	
<1> Yes	F	F7	
<2> No	If yes: What was the amount?	If yes: What was the amount?	
If yes:	22 J 201 11 HERE THEN DIE WHITCHIEF	22 Just 11 200 1100 0110 01110 01110	
What was the amount?	I. Did you/ <name> receive public</name>	I. Did you/ <name> receive any financial</name>	
	assistance or public welfare payments	assistance from the state or local welfare	
	from the state or local welfare office in	office in 2018?	
8. Did [ <name>/you] receive any</name>	2018?	Office in 2010.	
Supplemental Security Income (SSI)	2010.		
payments DURING THE PAST 12			
MONTHS?			

<1> Yes <2> No

If yes:

What was the amount?

9. Did [<Name>/you] receive public assistance or public welfare payments from the state or local welfare office DURING THE PAST 12 MONTHS?

<1> Yes <2> No

If yes:

What was the amount? (Do not include SSI.)

10. Did [<Name>/you] receive any survivor or disability income DURING THE PAST 12 MONTHS?

<1> Yes <2> No

If yes:

What was the amount? (Do not include Social Security.)

11. Did [<Name>/you] receive a pension or any retirement income from a previous employer or union, or any regular withdrawals or distributions from retirement accounts such as 401(k), 403(b), IRA, Roth IRA, or other accounts designed specifically for retirement DURING THE PAST 12 MONTHS?

<1> Yes <2> No

If yes: What was the amount? Do not include SSI.

J. Did you/<NAME> receive any survivor or disability income in 2018?

If yes: What was the amount? Do not include Social Security.

K. Did you/<NAME> receive a pension or any retirement income from a previous employer or union, or any regular withdrawals or distributions from retirement accounts such as 401(k), 403(b), IRA, Roth IRA, or other accounts designed specifically for retirement in 2018?

If yes: What was the amount? Do not include Social Security.

L. Did you/<NAME> receive income on a REGULAR basis from any other sources such as Department of Veterans Affairs (VA) payments, unemployment compensation, child support, or alimony in 2018?

If yes: What was the amount? Do NOT include non-cash benefits, such as energy or housing assistance, The Food Stamp Program, or SNAP.

J. Did you/<NAME> receive any survivor or disability income in 2018?

If yes: What was the amount? Do not include Social Security.

K. Did you/<NAME> receive a pension or any retirement income from a previous employer or union, or any regular withdrawals or distributions from retirement accounts such as 401(k), 403(b), IRA, Roth IRA, or other accounts designed specifically for retirement in 2018?

If yes: What was the amount? Do not include Social Security.

L. Did you/<NAME> receive income on a REGULAR basis from any other sources such as Department of Veterans Affairs (VA) payments, unemployment compensation, child support, or alimony in 2018?

If yes: What was the amount? (Do not include Social Security.)	If yes: What was the amount from all sources? Do not include lump sum payments such as money from an inheritance or sale of a home.	If yes: What was the amount from all sources? Do not include lump sum payments such as money from an inheritance or sale of a home.	
12. Did [ <name>/you] receive income on a REGULAR basis from any other sources such as Department of Veterans Affairs (VA) payments, unemployment compensation, child support or alimony DURING THE PAST 12 MONTHS?  &lt;1&gt; Yes &lt;2&gt; No  If yes: What was the amount from all sources? (Do not include lump sum payments such as money from an inheritance or sale of a home.)  13. What is your best estimate of the TOTAL income [FILL1: <name>'s/your] received from all sources DURING THE PAST 12 MONTHS?</name></name>	M. What is the best estimate of the TOTAL income you/ <name> received from all sources in 2018?</name>	M. What is your best estimate of the TOTAL income you/ <name> received from all sources in 2018?</name>	

Paper → Weeks Worked

CURRENT PRODUCTION VERSION	TEST VERSIONS 1 + 2	NOTES OR COMMENTS
When did this person last work, even for a few days?    Within the past 12 months   1 to 5 years ago → SKIP to M   Over 5 years ago or never worked → SKIP to question 43    During the PAST 12 MONTHS (52 weeks), did this person work EVERY week? Count paid vacation, paid sick leave, and military service as work.   Yes → SKIP to question 41   No   No   During the PAST 12 MONTHS (52 weeks), how many WEEKS did this person work? Include paid time off and include weeks when the person only worked for a few hours.   Weeks   During the PAST 12 MONTHS, in the WEEKS WORKED, how many hours did this person usually work each WEEK?   Usual hours worked each WEEK	During the weeks that this person WORKED in 2018, how many HOURS did this person usually work each WEEK?  Usual hours worked each WEEK	2016.

# Computer Assisted Interview Script → Weeks Worked

CURRENT PRODUCTION VERSION	TEST VERSIONS 1 + 2	NOTES OR COMMENTS
When did {Fill 1: <name>/ you} last work, even for a few days?  Within the past 12 months [goto WKWX]  Between 1 to 5 years ago [goto COWCP]  Over 5 years ago or never worked -&gt; [goto INTRX]  During the PAST 12 MONTHS or 52 weeks, did {Fill 1: <name>/ you} work EVERY week? Count paid vacation, paid sick leave, and military service as work.  Yes [goto WKH]  No [goto WKWN]</name></name>	<ul> <li>A. When did you/<name> last work, even for a few days?</name></li> <li>Within the past 12 months 1 to 5 years ago Over 5 years ago or never worked</li> <li>If response is "Over 5 years ago or never worked," SKIP to INCOME.</li> <li>Otherwise, go to B.</li> <li>B. In 2018, did you/<name> work at a job or business at any time, even for a few days?</name></li> </ul>	Note: The reference period for Weeks Worked Test V1 + V2 is "2019" in the final CAI scripts, not "2018."
During the PAST 12 MONTHS or 52 weeks, how many WEEKS did {Fill 1: <name>/ you} work? Include paid time off and include weeks when {Fill 1: <name>/ you} only worked for a few hours.  During the weeks worked IN THE PAST 12 MONTHS, how many hours did {Fill 1: <name>/ you} usually work each week?</name></name></name>	Yes No   ❖ If response is "No," SKIP C – E.  ❖ Otherwise, go to C.  C. During the weeks that you/ <name> WORKED in 2018, how many hours did you/<name> usually work each week?</name></name>	

D. In 2018, did you/<NAME> work EVERY week?
Include all jobs and count paid vacation, paid sick
leave, and military service as work.

Yes
No

If response is "Yes," SKIP E.
Otherwise, go to E.

E. Of the 52 weeks in 2018, how many WEEKS did you/<NAME> work for at least one day? Include all jobs, paid time off, and weeks when you/<NAME> only worked for a few hours.

If person worked in the past 5 years, go to TYPE OF EMPLOYMENT.

❖ Otherwise, SKIP to INCOME.

#### **Subcommittee Lead:**

Evan Brassell, U.S. Census Bureau

#### **Subcommittee Team Members:**

Shawn Bucholtz, Department of Housing and Urban Development Molly Cromwell, U.S. Census Bureau
Alexander Daily, Energy Information Administration
Zach Lowenstein, Environmental Protection Agency
Gaida Mahgoub, Environmental Protection Agency
Broderick Oliver, U.S. Census Bureau
Mark Prell, Economic Research Service
Barry Ramsey, U.S. Department of Agriculture
Max Zarate-Bermudez, Centers for Disease Control and Prevention

#### **Objective:**

Consistent data on the decentralized wastewater infrastructure status in rural and other communities is needed to protect public health, water quality, and to understand and meet the country's growing infrastructure needs.

Regular data updates are required to address changes in housing development and to support regular planning and funding cycles at the local, state, and national level. An annual survey such as the ACS would accurately capture new construction rates of septic systems.

Existing data sources do not provide current, reliable, location-specific data on the use of septic systems. The ACS is the only available survey that can provide this data in a timely, consistent, standardized, and a location-specific manner.

When testing the questions, recruiting from areas known to not have public sewer, such as small towns, may give insight into reporting error. Recruiting in dense urban areas, not likely to have septic systems, would provide similar insight.

#### **Cognitive Testing Research Goals:**

- Do people know the difference between a septic system or cesspool versus one connected to public sewer?
- Do people have more than one type of disposal system? If so, how do they decide to answer?
- What type of system do those who choose "Other type of sewage disposal" (version 1) or "No, use other type of system" (version 2) have?

### **Cognitive Testing Recruiting Requirements:**

- Individuals living in housing units with septic tanks only
- Individuals with homes connected to public sewer

# Paper

TEST VERSION 1	TEST VERSION 2	NOTES OR COMMENTS
What is the MAIN type of sewage disposal for this house, apartment, or mobile home?  Public sewer Septic system or cesspool Other type of sewage disposal	Is this house, apartment, or mobile home connected to a public sewer?  Yes, connected to public sewer  No, connected to septic system or cesspool  No, use other type of system	1. The word "cesspool" will not be translated in Spanish version (Rounds 2 and 3).

# **Computer Assisted Interview Script**

TEST VERSION 1	TEST VERSION 2	NOTES OR COMMENTS
What is the MAIN type of sewage disposal for this <fill building="" type="">?</fill>	A. Is this <fill building="" type=""> connected to a public sewer?</fill>	1. The word "cesspool" will not be translated in Spanish version (Rounds 2 and 3).
Public sewer Septic system or cesspool, or Another type of sewage disposal	Yes No  ❖ If response is "Yes," SKIP B. ❖ Otherwise, go to B.  B. Is it connected to a septic system or	
	cesspool? Yes No	

#### **Subcommittee Lead:**

Evan Brassell, U. S. Census Bureau

#### **Subcommittee Team Members:**

Molly Cromwell, U.S. Census Bureau
Carolyn Hronis, Energy Information Administration
Kristin Kerns, U.S. Census Bureau
Larry Locklear, U.S. Census Bureau
Lindsay Longsine, U.S. Census Bureau
Danni Mayclin, Energy Information Administration
Brian McKenzie, U.S. Census Bureau
Clara Reschovsky, Bureau of Transportation Statistics

### **Objective:**

The U.S. Energy Information Administration (EIA) is singularly tasked under PL93-275 and PL95-91 with carrying out independent analysis of energy supply, demand, and technology relevant to the adequacy of energy resources to meet demands in the near and long term for the Nation's social and economic needs. Energy technology, sources, and uses are projected to change as much in the next 10-20 years as they have in the last 100.

A diverging and growing number of state and local governments' energy and tax policies, and energy sector and other incentives to meet renewable energy and other goals, influence the quality of EIA's energy projections. EIA can observe the result of policies and programs in the aggregate but lacks sufficient information to understand drivers and impact from consuming units, e.g., households, buildings, and industry.

The technology change and capital necessary to modernize the interconnected U.S. electric power grid is poorly observed at the local level through the energy consumer. In particular, the differential adoption of energy *producing* technologies such as rooftop solar (i.e., photovoltaic generating capacity, PV) as well as energy *consuming* technologies such as electric or hybrid-electric plug-in vehicles (EVs) creates new, more variable demands and more potential (e.g., mobile storage provided by battery-enabled vehicles) for energy infrastructure for and in U.S. households.

The American Community Survey would be the only data source at the level of granularity necessary for EIA to adequately project future energy sources, infrastructure, and consumer needs during this era of rapid change.

### **Cognitive Testing Research Goals:**

- Are respondents reporting hybrid vehicles that do not require connecting to an electrical source for charging?
- Are respondents going to consider every household member that might own an eligible vehicle?
- Are respondents reporting vehicles that they are currently leasing?
- (Version1) What other type of electric vehicles do people have when they respond "Yes" to 14b?

#### **Cognitive Testing Recruiting Requirements:**

- Individuals who have purchased vehicles in the last 10 years
- Owners/leasers of electric vehicles that require plugging in to an electrical source for charging
- Owners/leasers of any other type of electric vehicles (including hybrid) that do not require plugging in to an electric source for charging

# Paper

TEST VERSION 1		TEST VERSION 2	
Are any of the following types of electric vehicles kept at home for use by members of this household?  a. A plug-in electric vehicle?  Yes  No  b. Another type of electric vehicle?	you o lease vehic a. A p	is house, apartment, or mobile home, do or any member of this household own or any of the following types of electric eles? olug-in electric vehicle? Yes No hybrid electric vehicle?	
□ No		No	

### **Computer Assisted Interview Script**

TEST VERSION 1	TEST VERSION 2
Are any of the following types of electric vehicles kept at home for use by members of this household?	At this <fill building="" type="">, do you or any member of this household own or lease any of the following types of electric vehicles?</fill>
❖ Read one at a time:	❖ Read one at a time:
A plug-in electric vehicle?	A plug-in electric vehicle?
Yes No	Yes No
Another type of electric vehicle?	A hybrid electric vehicle?
Yes No	Yes No

### 2022 ACS Content Test – Cognitive Testing TOPIC – Home Heating Fuel Wednesday, February 19, 2020

#### **Subcommittee Lead:**

Evan Brassell, U.S. Census Bureau

#### **Subcommittee Team Members:**

William Chapin, U.S. Census Bureau Cha-Chi Fan, Federal Communications Commission Carolyn Hronis, Energy Information Administration Lindsay Longsine, U.S. Census Bureau Danni Mayclin, Energy Information Administration

#### **Objective:**

We are trying to make responding easier by amending two of the response options in the "gas" categories. In the first response option, we change "gas" to "natural gas" since the term natural gas is commonly used. In the second response option, we add "butane" to the list of other gas examples. We think this will help respondents be more accurate in listing their main heating fuel type for gas.

### **Cognitive Testing Research Goals:**

- Do respondents understand what "natural gas" (response category 1) is as opposed to "gas" (response category 2)?
- Do the words "butane" or "propane" help respondents find the correct heating fuel category?
- (Version 1) What is the impact of removing "bottled or tank" from the second response option?
- Are respondents only reporting the fuel they use the "MOST"?

### **Cognitive Testing Recruiting Requirements:**

- People living in occupied housing units using natural gas as fuel MOST used
- People living in occupied housing units using butane/propane as fuel MOST used
- People who use some other type of heating fuel

# 2022 ACS Content Test – Cognitive Testing TOPIC – Home Heating Fuel Wednesday, February 19, 2020

# Paper

CURRENT VERSION	TEST VERSION 1	TEST VERSION 2
Which FUEL is used MOST for heating this house, apartment, or mobile home?  Gas: from underground pipes serving the neighborhood Gas: bottled, tank, or LP  Electricity Fuel oil, kerosene, etc. Coal or coke Wood Solar energy Other fuel No fuel used	Which fuel is used MOST for heating this house, apartment, or mobile home?  Natural gas: from underground pipes serving the neighborhood  Gas: propane, butane, etc.  Electricity  Fuel oil, kerosene, etc.  Coal or coke  Wood  Solar energy  Other fuel  No fuel used	Which fuel is used MOST for heating this house, apartment, or mobile home?  Gas: Natural gas from underground pipes serving the neighborhood  Gas: Bottled or tank (propane, butane, etc.)  Electricity  Fuel oil, kerosene, etc.  Coal or coke  Wood  Solar energy  Other fuel  No fuel used

# 2022 ACS Content Test – Cognitive Testing TOPIC – Home Heating Fuel Wednesday, February 19, 2020

# **Computer Assisted Interview Script**

CURRENT PRODUCTION VERSION	TEST VERSION 1	TEST VERSION 2
HFLA:	HFLA. To heat this <fill building="" type="">,</fill>	HFLA. To heat this <fill building="" type="">,</fill>
To heat this [FILL BUILDING TYPE] which fuel	which fuel do you use MOST—	which fuel do you use MOST—
do you use MOST—		
Gas, electricity, fuel oil or kerosene, coal or coke,	Gas,	Gas,
wood, solar energy or some other fuel?	Electricity,	Electricity,
<1> Gas (go to HFLB)	Fuel oil or kerosene,	Fuel oil or kerosene,
<2> Electricity	Coal or coke,	Coal or coke,
<3> Fuel oil or kerosene	Wood,	Wood,
<4> Coal or coke	Solar energy,	Solar energy,
<5> Wood	or Some other fuel?	or Some other fuel?
<6> Solar energy		
<7> Some other fuel	❖ If response to HFLA is "Gas," go to HFLB.	❖ If response to HFLA is "Gas," go to HFLB.
<8> No fuel used	Otherwise, SKIP to Question HFLC.	Otherwise, SKIP HFLB and HFLC.
HFLB:	HFLB. Is it natural gas from underground pipes	HFLB. Is it natural gas used from underground
Is the assumed from underground nines convine the	serving the neighborhood?	pipes serving the neighborhood? Yes
Is the gas used from underground pipes serving the neighborhood?	Yes	No
<1> Yes	No	NO
<2> No (go to HFLC)	140	❖ If response to HFLB is "Yes," SKIP HFLC.
(2) No (go to III LC)	❖ If response to HFLB is "Yes," SKIP HFLC.	<ul> <li>Otherwise, go to HFLC.</li> </ul>
HFLC:	<ul> <li>Otherwise, go to HFLC.</li> </ul>	• Guidi wise, go to ili Le.
Is it bottled, tank, or LP gas?	V Calcivisc, go to III LC.	HFLC. Is it bottled or tank gas, such as propane
<1>Yes	HFLC. Is it a gas such as propane or butane?	or butane?
<2> No	222 2 2 2 2 4 gas such as propane or buttine.	
	Yes	Yes
	No	No

#### **Subcommittee Lead:**

Evan Brassell, U.S. Census Bureau

#### **Subcommittee Team Members:**

Chip Berry, Energy Information Administration William Chapin, U.S. Census Bureau Jeremy Engelberg, U.S. Census Bureau Carolyn Hronis, Energy Information Administration Michael Risley, U.S. Census Bureau

#### **Objective:**

Renewable energy as a source for home heating fuel is a growing industry. Currently the only way to track it is through limited data on solar panel sales. By asking this question, we will be able to obtain data for operational solar panels on a housing unit level across the country. This information will help the Energy Information Administration match energy consumption to energy production across the United States.

The technology change and capital necessary to modernize the U.S. electrical power grid is poorly observed at the local level and through the energy consumer. The differential adaptation of energy *producing* technologies such as rooftop solar (i.e. photovoltaic generating capacity, PV) creates new, more variable demands and new potential for energy infrastructure for and in U.S. households.

#### **Cognitive Testing Research Goals:**

- How do people understand the terms, "solar panel" (version 1) and "solar power" (version 2)? Do they view them as meaning the same thing or something different? How do they decide if they have solar power/panels?
- Do people understand the term "photovoltaic"?

### **Cognitive Testing Recruiting Requirements:**

- Individuals in housing units with solar/photovoltaic panels
- Individuals in single family home without solar panels

# Paper

TEST VERSION 1	TEST VERSION 2
Does this house, apartment, or mobile home use solar panels that generate electricity?  Yes No	Does this house, apartment, or mobile home use solar power or photovoltaic panels that generate electricity?  Yes No

# **Computer Assisted Interview Script**

TEST VERSION 1	TEST VERSION 2
Does this <fill building="" type=""> use solar panels that generate electricity?  Yes No</fill>	Does this <fill building="" type=""> use solar power or photovoltaic panels that generate electricity?  Yes No</fill>