**SUPPORTING STATEMENT B**

**U.S. Department of Commerce**

**U.S. Census Bureau**

**National Survey of Children's Health**

**OMB Control No. 0607-0990**

# B. Collections of Information Employing Statistical Methods

## Universe and Respondent Selection

Sponsored primarily by the U.S. Department of Health and Human Services’ (HHS) Health Resources and Services Administration’s Maternal and Child Health Bureau (HRSA MCHB), the National Survey of Children’s Health (NSCH) is designed to produce data on the physical, emotional, and behavioral health of children under 18 years of age in the United States. Since its beginning, the NSCH has been a critical component in the estimation of the national and state-level prevalence for a variety of child health indicators in combination with information on the child’s family context and neighborhood environment.

Prior to the U.S. Census Bureau administering the survey, the National Survey of Children with Special Health Care Needs (NS-CSHCN) was a complementary survey designed to estimate the prevalence and impact of children with special health care needs (CSHCN) at both the state and national levels and to estimate the percent of households with children having one or more CSHCN under 18 years of age. Decreasing response rates prompted the HRSA MCHB to initiate a redesign of the NSCH and NS-CSHCN. This redesign included combining the original NSCH and NS-CSHCN into a single annual survey that is now known solely as the NSCH. In addition to combining content, the redesign also involved changing the sampling frame from a list-assisted Random Digit Dial (RDD) to an Address-Based Sample (ABS) frame. Results from each cycle, beginning with the 2015 NSCH Pretest and 2016 production NSCH, inform the multimode design for subsequent iterations of the survey.

Most addresses receive an initial attempt to collect information by Web (self-administered) and a non-response follow-up with a paper instrument sent by mail (self-administered). The remaining addresses, identified as most likely to respond by paper questionnaire, receive a paper instrument and a Web invitation in the initial mailing. Both modes are accompanied by Telephone Questionnaire Assistance (TQA) and Email Questionnaire Assistance (EQA).

The NSCH will use an address-based sample derived from the Census Master Address File (MAF)[[1]](#footnote-2) covering the 50 states and the District of Columbia. The 2022 NSCH will be conducted from June 2022 through January 2023. Households will be randomly sampled as described in section B.1.1. An invitation to participate in the NSCH with unique login information for the online survey instrument will be sent to each sampled household, and “High Paper” (or those more likely to respond by mail) addresses will also receive a paper instrument in the initial contact. The first section of the online instrument and the first paper instrument are screening instruments. Information on the presence of children within the household, child demographic information, as well as basic questions about each child’s health provided in these screeners will be used to determine whether the household is eligible for one of the three age-based surveys: 0 to 5 year old children, 6 to 11 year old children, or 12 to 17 year old children. This screener information is also used for the subsampling selection of a specific child within the household based on an oversampling of CSHCN and a subsequent oversample of young children (ages 0-5). In order to limit respondent burden, regardless of the number of eligible children, no more than one child per household will be sampled for the age-based topical surveys. Accordingly, only one topical survey will be administered to any given household. When responding via the online instrument, subsampling is instantaneous, and respondents are able to continue seamlessly from the screener items to the topical section. When responding via the paper instrument, the screener is returned to Census by mail, and the topical instrument is sent back to the household for the subsampled child. The target population for the NSCH survey consists of children aged 17 or younger living in mailable residential housing units in the United States.

## Sampling Households

For the 2022 NSCH, up to 360,000 household addresses will be selected to participate in the survey. The main production sample will be comprised of approximately 200,000 addresses, while the oversamples, if approved, make up an additional 160,000 addresses. The sample file is selected from the Census Master Address File (MAF) and supplemented with an administrative records-based flag, which serves to identify households with children. The Census Bureau’s Center for Economic Studies (CES) division has further developed an indicator based on multiple sources of administrative data which was adopted to identify households with children to improve sampling efficiency in the NSCH. As background, CES is an interdisciplinary group in the Research and Methodology Directorate, charged with the strategic re-use of administrative data from federal, state, and commercial providers. Information is combined from multiple sources to create new data products that are not possible to produce using single data sets.

Through combining data sources with the MAF, two flags will be available during sampling and survey data collection management. The two flags are described in detail in **Appendix B**:

* Flag 1: Child record linked to address (stratum 1); no child record linked to address, medium probability of children present (stratum 2a); no child record linked to address, low probability of children present (stratum 2b).[[2]](#footnote-3)
* Flag 2: Poverty; non-poverty (block, block-group, or tract level geographic definition).

Flag 1 defines sampling strata. Flag 2 is used to sort addresses for sample selection.

The Flag 1 based sampling strata are mutually exclusive. Stratum 1 consists of addresses to which a specific child is linked using administrative records; other addresses are placed in Stratum 2. A statistical model using a variety of administrative data and small-area geographic characteristics assigns a probability of child presence to each address. These probabilities are used to further divide Stratum 2 into Stratum 2a and Stratum 2b; Stratum 2a addresses have a higher probability of child presence than Stratum 2b addresses. The probability threshold between 2a and 2b is selected in each state to maximize the number of addresses in Stratum 2b while maintaining an approximated 95% coverage rate of households with children in Strata 1 and 2a.

Addresses in Stratum 2b will not be included in sampling. Stratum 2b represents approximately 5% of households with children in each state (including all invalid mailing addresses); children are present in approximately 4% of addresses in Stratum 2b versus 17% of addresses in 2a and 79% in Stratum 1.[[3]](#footnote-4) We evaluated the impact of excluding Stratum 2b using ACS responses across 16 variables representing 76 response categories. We compared relative frequencies for those categories when Stratum 2b was included against frequencies without 2b addresses (using a 15% threshold), applying an offsetting weight to 2a responses. The average difference in the relative frequencies across the 76 response categories was less than 0.3 percentage points and less than the average margin of error. In practice, we have used a 5% threshold for assigning 2b addresses and we apply demographic controls in weighting (not just base weights), so this evaluation substantially overestimates the potential for bias in our frame when Stratum 2b is excluded. Evaluation of the characteristics of households in Strata 1, 2a and 2b demonstrate that excluding Stratum 2b significantly increases the efficiency of the sample (the percent of households with children present) and, in turn, the number of completed interviews. The impact on frame bias is negligible, and gains in sample efficiency allow us to better compensate for nonresponse bias (with nonresponse follow-up and weighting controls), improving both estimate precision and accuracy. Stratum 1 will make up approximately 67% of sampled addresses.

**Table B.1.1.A: Addressed-Based Sample by Stratum for the 2022 NSCH**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Stratum 1 | Stratum 2a | Total |
| **Sample Size** | 241,200 | 118,800 | 360,000 |
| **% of Sample** | 67% | 33% |  |
| **% Households w/ children** | 79% | 17% | 60% |

Table B.1.1.A NOTE: All figures are considered preliminary estimates.

State-level samples will be allocated to achieve an equal number of completed interviews in each state and the District of Columbia for the main production sample, while the ten states that are pursuing an oversample will have additional requirements to meet the needs of their state. The sampling is designed for a base production sample size of approximately 200,000 addresses nationwide to yield roughly 850 completed interviews from households with children per state. The state oversamples for California, Colorado, Georgia (Atlanta), Nebraska, New York, Ohio, Oregon, Pennsylvania, Tennessee, and Wyoming are designed for a sample of approximately 100,000 addresses and expected to yield approximately 17,000 completed interviews.

Finally, the CDC is funding a national oversample of young children. This oversample will build on the administrative record-matching process used to create Stratum 1 in the production sample to flag and oversample households with young children. The CDC-funded oversample will include approximately 60,000 addresses and yield approximately 15,00 interviews.

Variable sampling rates for the screener will be used in both Stratum 1 and Stratum 2a for each state. Within these strata, Flag 2 will be used to sort addresses for sampling. See **Appendix C** for tables of estimated sample sizes per state for the production and state oversamples.

The 2021 NSCH included a topical incentive experiment. In previous cycles of the NSCH, the paper topical follow-up efforts have included a $5 unconditional cash incentive with the initial mailing. The incentive has proven to be a cost-effective intervention to increase survey response. The 2021 topical incentive experiment introduced a $10 topical incentive with the goal of reducing nonresponse bias.

Households that return a paper screener with rostered children are organized into topical mail groups. Households that respond in the earliest stages of data collection are collected into Group A, later households into Groups B through I based on the timing of their response. Groups A through D can receive up to 3 topical nonresponse follow-up mailings, but data collection closes before Groups E through I can receive all 3 nonresponse mailings. This scheduling constraint contributes to lower topical conversion rates for Groups E through I. The 2021 topical incentive experiment evaluated the efficacy of using a larger topical incentive to increase topical conversion for these later groups. The National Household Education Survey tested a larger incentive for late screener responders ($15 instead of $5) in 2012 to address the same challenge. The larger incentive increased topical response from 64.6% to 70.5%.[[4]](#footnote-5)

For the purposes of the experiment, 70% of households in Group E through I received the $10 incentive. The remaining 30% will receive the traditional $5 incentive. The distribution was reversed for Groups A through D, with 70% of households receiving the traditional $5 incentive and 30% receiving the $10 incentive (see Table B.1.1.B). This design allowed us to evaluate the impact of the larger incentive on topical conversion with a specific focus on the later topical groups (E through I).

Initial results from the 2021 topical incentive test match our expectations; the $10 topical incentive was associated with significantly higher response among the later topical mailing groups, potentially reducing survey nonresponse bias. The effect of the larger incentive on earlier mailing groups was predictably smaller. NSCH 2021 data collection continued into January 2022, so these results are preliminary, but given the positive indication of the 2021 test, the NSCH 2022 will continue the use of the $10 topical incentive and, again, distribute a larger share of the $10 incentive to the later mailing groups.

**Table B.1.1.B:**  **Redesigned Survey Contact Materials Experiment - Production**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Topical Group | Estimated Case Count by Topical Group | Incentive Amount | Estimated Case Count by Incentive | Anticipated Response |
| A through D | 4,500 | $5 | 3,150 (70%) | 59.5% |
| $10 | 1,350 (30%) | 61.5% |
| E through I | 6,680 | $5 | 2,004 (30%) | 41.8% |
| $10 | 4,676 (70%) | 45.8% |
| Total |  | | 11,180 | 50.8% |

The 2022 NSCH production sample will also include two key, non-experimental design elements. First, a $5 screener cash incentive will be mailed to 90% of sampled addresses. The remaining 10% of households function as a control group and will receive no incentive in order to monitor the effectiveness of the cash incentive. The addresses that receive the cash incentive will be selected randomly from the sampled addresses. This incentive strategy is designed to increase response and reduce nonresponse bias within the constraints of the budget. The $5 incentive has been used in NSCH data collection in previous cycles and has proven to be an effective strategy at encouraging participation.

Additionally, data collection procedures will be modified based on the block group-level paper-only response probability. Since 2012, the American Community Survey (ACS) respondents have been able to submit survey forms over the Internet in addition to completing and mailing back a paper questionnaire. Modeled Web and paper response mode probabilities by block group were initially estimated using ACS response mode choices summarized at the block group. These estimates are adjusted and updated using NSCH response mode choices modeled on block group-level characteristics. Sample households will be located within block groups and assigned a paper-only response probability – the probability the household would not respond to a web invite but would respond to a paper questionnaire. Paper-only response probabilities can vary within block groups by stratum (Flag 1). The 30% of households with the highest paper-only response probabilities will be flagged as ‘High Paper’ and will receive a paper questionnaire with the initial web invitation. The other 70% of households will be flagged as “Low Paper” and receive their first paper questionnaires in the second nonresponse follow-up mailing. See **Appendix B** for additional details.

The following **Table B.1.1.C** is a summary of the comparisons that will be performed between the incentive and control groups, and between ‘High Paper’ and ‘Low Paper’ households, based on the maximum eligible sample. It is anticipated the $5 incentive will increase response by 6.3 percentage points.

The Fisher Exact Test is used to derive power in **Table B.1.1.D** based on the sample sizes and anticipated response differentials of the comparison groups detailed in Table **B.1.1.C** and the topical incentive experiment. The high statistical power for the various comparisons (power≈1) indicates that there is a near zero probability of concluding there is no difference in response when, in fact, there is one.

**Table B.1.1.C: Incentive and Mailing Treatment Group Comparisons**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Incentive | Initial Cases | Mode Collection Group | Maximum Sample by Mode Collection | Treatment Groups  (TG) |
| $5 | 324,000  (45.1%) | Low Paper | 226,800  (45.1%) | 1 |
| High Paper | 97,200  (45.1%) | 2 |
| Control | 36,000  (38.8%) | Low Paper | 25,200  (38.8%) | 3 |
| High Paper | 10,900  (38.8%) | 4 |

**Table B.1.1.D: Production Treatment Group Comparisons**

|  |  |  |
| --- | --- | --- |
| Incentive  Comparisons | Design  Comparisons by Mode | Topical Incentive Experiment |
| **$5 v. Control**  TG(1+2) v. TG(3+4)  p=0.05, power≈1  p=0.10, power≈1 | **$5 v. Control**  **in Low Paper**  TG(1) v. TG(3)  p=0.05, power≈1  p=0.10, power≈1 | **$5 v. $10**  p=0.05, power≈0.936  p=0.10, power=0.967 |
|  | **$5 v. Control**  **in High Paper**  TG(2) v. TG(4)  p=0.05, power≈1  p=0.10, power≈1 |  |

## Within-Household Sampling

Eligible children within households that have a completed screener will be sampled for one of the three age-based topical surveys: 0 to 5-year-old children (T1), 6 to 11-year-old children (T2), or 12 to 17-year-old children (T3). As previously mentioned only one child per household will be selected for a topical questionnaire to minimize respondent burden.

In order to select the sample child from a household, it must first be determined whether each eligible child is a Child with Special Health Care Needs (CSHCN) or a Child without Special Health Care Needs (Non-CSHCN). Children are considered to have special health care needs if the respondent answers “Yes” to at least one question in one of three categories listed below. These questions are part of the screener questionnaire, which was developed by researchers, practitioners, family advocates, and policy makers to identify CSHCN in household surveys[[5]](#footnote-6).

CSHCN are identified by asking respondents if each child rostered in the screening instrument: 1) needs or uses more medical care, mental health services, or educational services than is usual for most children of the same age; 2) if the child needs or uses specialized therapies, mental health counseling, or prescription medications; and/or 3) if the child is limited or prevented in any way in their ability to do things that most children of the same age can do because of a medical, behavioral, or other health condition that is expected to last at least one year.

Household Types (HHTYP) are mutually exclusive and exhaustive (See **Table B.1.2.A)**. An 80 percent oversampling is applied for those households having both CSHCN and Non-CSHCN present; i.e., household types 4, 6, and 7. An additional 60 percent oversampling of children aged 0-5 years occurs in household types 3 and 5. This second oversample is designed to offset the age bias of the CSHCN oversample; younger children are less likely to be identified with special health care needs.

**Table B.1.2.A: Strategies for Selecting the NSCH Sample Child**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| House-hold Type | Number of Eligible Children in Household | Number of Eligible  Non-CSHCN,CSHCN | % Probability of Selection for  Non-CSHCN |  | % Probability of Selection for CSHCN | | Notes |
| 1 | 0 or ‘blank’ | 0,0 | 0 | | | | No eligible children in household. |
| 2 | 1 | 1,0 or 0,1 | 100% | | | | Single child is always selected. |
| 3 | 2 | 2,0 or 0,2 | If only 1 child is aged 0-5 years, that child’s probability of selection is 62% and the other child’s probability of selection is 38%.  Otherwise, each child has an equal chance of selection (50%). | | | | Includes 60% oversampling of children aged 0-5 years. |
| 4 | 2 | 1,1 | 36% |  | | 64% | Includes 80% oversampling of CSHCN. |
| 5 | 3 | 3,0 or 0,3 | If only 1 child is aged 0-5 years, that child’s probability of selection is 44% and each of the other two children have an equal chance of selection (28%).  If 2 children are aged 0-5 years, each has a probability of selection of 38% and the other child has a probability of selection (24%).  If all 3 children are aged 0-5 or aged 6-17 years, then each child has an equal chance of selection (33.3%). | | | | Includes 60% oversampling of children aged 0-5 years. |
| 6 | 3 | 2,1 | 53% |  | | 47% | Includes 80% oversampling of CSHCN. |
| 7 | 3 | 1,2 | 22% |  | | 78% | Includes 80% oversampling of CSHCN. |
| 8 | 4 or more | Any combination | Before the sort, each of the first 4 children has an equal probability of selection (25%). | | | | Simple random selection of 1 of the first 4 (sorted) children, regardless of Non-CSHCN or CSHCN. |

Each household will be pre-assigned a value for each of the eight Household Types that corresponds with the oversampling criteria in the Probability of Selection column in the table above. This value denotes the order of the child (0, 1, 2, 3, or 4) that should be selected after the proper sorting of eligible children has occurred. For HHTYP 1 and HHTYP 2, no sorting occurs because there are either no eligible children or one eligible child who will always be selected. For HHTYP 3 through HHTYP 8, children will be sorted by their special needs status (CSHCN children first followed by Non-CSHCN) and then sorted by age (youngest to oldest). Finally, HHTYP 8 children will be sorted by their special needs status (CSHCN children first followed by Non-CSHCN), then sorted by name, and then sorted by age (youngest to oldest).

## Expected Yield

The respondent universe for the NSCH is adults ages 18 or older who live in the U.S., have a valid household address, and who are parents or caregivers of at least one child who is under 18 years of age living in the same household. Those households that do not have any infants or children mark “No” to the first question on the screener which asks, “Are there any children 0 - 17 years old who usually live or stay at this address?” and screen-out of the remaining survey questions.

The initial sample may include up to 360,000 unique addresses nationwide. These addresses are then split by strata. Response probabilities are estimated using response patterns from the 2019 and 2020 NSCH. The expected analytic sample sizes are listed in **Table B.1.3.A.**

**Table B.1.3.A: Expected Base Sample Sizes of NSCH Production Incentive Treatment Groups**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Initial Sample** | **Stratum** Stratum 1: 69% Stratum 2a: 31% | | **Incentive Group** $0: 10%  $5: 90% | | **Valid Addresses** S1: 90%  S2: 68% | **Completed Screeners**  $5: +6.3% | | **Households  With Kids** Stratum 1: 79% Stratum 2a: 17% | | **Completed  Topicals** 74% |
| 360,000 | 1 | 241, 200 | $0 | 24, 120 | 21.622 | 8,389 | | 6,627 | | 4,888 |
|  |  | $5 | 217,0800 | 194,596 | 87,763 | | 69,332 | | 51,135 |
| 2a | 118,800 | $0 | 11,880 | 8,035 | 3,118 | | 530 | | 391 |
| $5 | 106,920 | 72,317 | 32,615 | | 5,545 | | 4,089 |
| Totals | | | | |  |  | 131,884 |  |  | 60,504 |
| per State | | | | |  |  | 2,586 |  |  | 1,186 |

## Estimation Procedures

There will be written specifications for weighting the data that will have been collected in the 2022 NSCH for people in households selected from the Census Master Address File (MAF). The data from the MAF are supplemented with administrative records-based flags to indicate the presence of children in the household. Instructions for computing adjustments (e.g., under coverage and nonresponse) and several final household and person-level weights will be provided.

## Nonresponse Bias Analysis

Standard 1.3 of the OMB Standards and Guidelines for Statistical Surveys (2006) states that “Agencies must design the survey to achieve the highest practical rates of response, commensurate with the importance of survey uses, respondent burden, and data collection costs, to ensure that survey results are representative of the target population so that they can be used with confidence to inform decisions.” Implicit in this standard is the assumption that the frame variables used at the design stage are sufficiently predictive of the collection variables for this to be feasible. Under this assumption, standard nonresponse bias analyses techniques can and will be applied to frame data variables to study potential areas of nonresponse bias (both item and unit) in the survey estimates.

## Survey Collection Procedures

This section describes the data collection procedures that will be used in the NSCH. The Census Bureau will request survey participation from approximately 360,000 households via one of two modes: Web survey or paper questionnaire. The primary mode for the majority of respondents is a letter invitation with the Web URL and a unique login ID included in the letter. The secondary mode will be a mailed paper screener questionnaire with the Web URL and login ID included in the package. Addresses identified as most likely to respond only by paper questionnaire are provided a paper screener questionnaire in the initial mailing. See **Appendix E** for the traditional production sample letters.

The first section of the production survey instrument is a screener. The household will be screened to determine if there are any children under 18 years of age who usually live or stay at that address. Those households that meet the eligibility criteria roster all children living at that address and answer questions to determine the special needs status of each child. Detailed information will be collected for all children living in the household. Those households that are deemed to have eligible children will be directed to complete the survey about one specific child living at that address.

“High Paper” addresses and “Low Paper” non-respondents will receive a two-phase self-administered paper questionnaire. In the first phase, similar to the Web, households will be screened to determine if there are any children under 18 years of age who usually live or stay at that address. Those households that meet the eligibility criteria go on to roster the children living at that address and answer questions to determine the special needs status of each child (up to 4 children). Detailed information will be collected for Child 1 – Child 4, while basic information (name, age, and sex) will be collected for Child 5 – Child 10. In the second phase, households that are deemed to have eligible children will be mailed one of the three age-based Topical questionnaires that request more information about one specific child living at that address. See **Appendix A** for a list of new and removed content for the 2022 NSCH, and **Appendix D** for draft versions of the 2022 NSCH Screener and Topical instruments.

The Topical survey (for both Web and paper) will cover the following content areas: child’s health and functional status; the child as an infant; health care services; experience with child’s health care providers; child’s health insurance coverage and experience of uninsured children in low income families; providing for the child’s health; the child’s learning, schooling, and activities; family functioning; parental health; neighborhood and community characteristics; and adult demographics.

The NSCH employs multiple contacts with households to maximize response. These include up to four web invitation letters, two pressure sealed reminder postcards, and two (‘Low Paper’) or four (‘High Paper’) paper questionnaires.

The U.S. Census Bureau conducts the NSCH on the behalf of the HRSA MCHB under Title 13, United States Code (U.S.C.), Section 8(b) (13 U.S.C. § 8(b)), which allows the Census Bureau to conduct surveys on behalf of other agencies. Section 501(a)(2) of the Social Security Act (42 U.S.C. § 701) allows HRSA MCHB to collect information for the purpose of understanding the health and well-being of children in the United States. There are also three separate partner agreements that are outlined in **Table 1A** of Supporting Statement A. The data collected under this agreement are confidential under 13 U.S.C. Section 9. All access to Title 13 data from this survey is restricted to Census Bureau employees and those holding Census Bureau Special Sworn Status pursuant to 13 U.S.C. Section 23(c).

## Methods to Maximize Participation Rates and Deal with Nonresponse

In designing the various modes of the NSCH Screener and Topical questionnaires, attention is placed on the following design elements to help increase cooperation by prospective respondents.

* In developing and refining specific questions, the goal is to create a logical, clear questionnaire with concrete question wording and simple grammar.
* The Web and paper versions of the questionnaire will be attractive with clear and simple instructions on how to complete specific questions.
* Questions will be grouped according to subject areas.
* Questionnaire formatting will maximize readability, including appropriate question spacing, font type and size, along with easy-to-follow skip instructions.
* Respondent contact strategies and letters have been carefully designed to grab the attention of the respondent and pique interest in the subject matter.
* Respondents will receive a $5 bill as an incentive to participate in the survey. See **Section A.9** of the supporting statement for more information on incentives.

Data collection for the NSCH will involve a series of mailings and nonresponse follow-up activities, encouraging questionnaire completion (see **Appendix E** – Traditional Production Letter Drafts). Our proposed approach to data collection and nonresponse follow-up is based on previous project experience and recommendations made by Dillman and colleagues (2009)[[6]](#footnote-7).

*Invitation Letter.* An initial invitation letter will be mailed to all potential respondents providing details about the study, a Web URL with a unique login ID for accessing the Web version of the questionnaire (which combines the screener and topical into a consolidated instrument), and a toll-free number and email address for the individual to utilize if there are questions or comments. Only addresses identified as most likely to respond by paper questionnaire will receive a paper questionnaire in the initial mailing. In addition to the invitation letter, 90% of the production sample will also receive a token of appreciation ($5 bill).

*Additional mailings.* Subsequent to the first and second invitation mailings, the Census Bureau will send all sample addresses a reminder pressure-sealed postcard containing the NSCH questionnaire Web URL with a unique login ID. All addresses will then receive two additional mailings with an invitation letter and paper questionnaire, conditional on nonresponse.

*Hardcopy questionnaire mailing.* For Mail mode cases, the topical questionnaire and accompanying cover letter will be personalized to fill in the sample child’s name and other identifying information to ensure that the survey is completed for the correct child. This level of personalization in the questionnaire improves data quality by reducing the opportunity for skip logic errors. It also results in a questionnaire that is as short as possible for the selected child. The shorter the questionnaire, the more likely the respondent is to complete it.

## Procedures or Methods Testing

No additional procedural or methods testing other than what was outlined above in **Section B.1** is planned for the 2022 NSCH.

## Individuals Responsible for Study Design and Performance

The Census Bureau will collect the information on behalf of HRSA MCHB. Contact information for the Census Bureau’s principal staff on the project are listed below:

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List of Attachments:

Appendix A – 2022 NSCH Questionnaire Content Revisions

Appendix B – 2021 NSCH Sample Frame and Sampling Flags Creation

Appendix C – 2022 NSCH Table of State Sample Sizes

Appendix D – 2022 NSCH Screener and Topical Questionnaire Drafts

Appendix E – 2022 NSCH Traditional Production Letter Drafts

Appendix F – 2020 NSCH Methodology Report

1. The MAF is a Title 13 data source, and all data collected are confidential under 13 U.S.C. Section 9. All access to Title 13 data from this survey is restricted to Census Bureau employees and those holding Census Bureau Special Sworn Status pursuant to 13 U.S.C. Section 23(c). [↑](#footnote-ref-2)
2. For the purposes of the CDC oversample, stratum 1 will be subsequently split into stratum 1a (0-5 year old child linked to address) and stratum 1b (other stratum 1 addresses). Stratum 1a and stratum 1b are not referenced when selecting the base production sample. [↑](#footnote-ref-3)
3. [↑](#footnote-ref-4)
4. McPhee, C., Bielick, S., Masterton, M., Flores, L., Parmer, R., Amchin, S., Stern, S., and McGowan, H. (2015). *National Household Education Surveys Program of 2012: Data File User’s Manual* (NCES 2015-030). National Center for Education Statistics, Institute of Education Sciences, U.S. Department of Education. Washington, DC. See Table 5-6. [↑](#footnote-ref-5)
5. Bethell CD, Read D, Stein RE, Blumberg SJ, Wells N, Newacheck PW. Identifying children with special health care needs: Development and evaluation of a short screening instrument. Ambulatory Pediatrics, 2002 Jan-Feb; 2(1):38–48. This came from the 2005-2006 CSHCN Chartbook (pg 10): <http://mchb.hrsa.gov/cshcn05/MI/NSCSHCN.pdf> [↑](#footnote-ref-6)
6. Dillman, D.A.; Smyth, J.D.; Christian, L.M. (2009). Internet, mail and mixed-mode surveys: The tailored design method, 3rd edition. Hoboken, NJ: John Wiley & Sons. [↑](#footnote-ref-7)