Overview of the National Health Interview Survey

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Questionnaire Contents

- Roster of families and members
- Demographics
- Socioeconomic status
- Limitation of activity
- Injuries and poisonings
- Respondent assessment of health status

Questionnaire Contents

- Utilization of health care services
- Health insurance status
- Chronic conditions
- Health behavior
- Height and weight
- Supplements

NHIS Sample Design

- Household interview survey
- Nationally and regionally representative of the non-institutionalized civilian population of the United States
- Complex design
- Over-sample black and Hispanic populations

NHIS Sample Design

- Fielded continuously throughout year
- Each week representative sample
- 1995-2006 design
 - ~40,000 households; ~105,000 persons
 - ~37,000 sample adults
 - ~15,000 sample children

1997 NHIS Redesign

- Implemented Computer Assisted Personal Interviewing (CAPI)
- Major changes in questionnaire content and format

NHIS Field Procedures

- Trained interviewers from the US Census Bureau
- In-home personal interview
- Use of telephone permitted after initial contact
- Advance letter
- Informed consent

Geographic Detail from NHIS

- National
- 4 Census Regions: Northeast, Midwest, South, West
- Metropolitan Statistical Areas (MSA)
 - Know if household is in MSA, etc.
 - MSAs identified if >1 million population
- State: plan to identify largest in future

Questionnaire Coverage

Component	Includes
Household	All HH members
Family	All family members
Sample Child	One child/family
Immunization	Sample child
Sample Adult	One adult/family
Supplements	Any of the above

Component Response Rates: Unconditional

Component	1999	2000	2001	2002	
		Percent			
Family 88	86	87	88		
Sample child 81	78	79	81		
Sample adult 74	70	72	74		

Component Response Rates: Conditional

Component	1999	2000	2001	2002	
		Percent			
Family 98	98	98	99		
Sample child 92	91	91	92		
Sample adult 84	81	83	84		

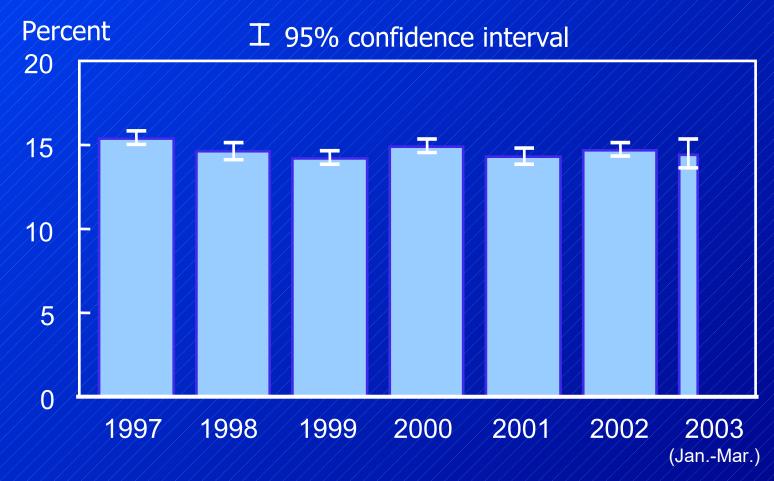
Integration of NHIS with Other Surveys

- NHIS is linked to the National Death Index
- NHIS respondents serve as the sampling frame for the Medical Expenditure Panel Survey (MEPS)
- NHIS and MEPS are periodically linked

Selected NHIS Supplements

Topic	Co-sponsor(s)	Year
Healthy People 2000/2010	Multiple	All
Mental health	NIMH	1999
Cancer control	NCI/CDC	2000, 2005
Children's mental health	NIMH	2001-
Complementary and alternative medicine	NCCAM	2002
Cell phone usage	(NCHS only)	2003, 2004

Sample Graph from Early Release Program Released September 30, 2003



Percent of persons of all ages without health insurance coverage: United States, 1997-2003

NHIS Re-engineering Project

Main Components of Re-engineering Project

Update data collection system

- Replace current CAPI software with Blaise instrument
- CAPI instrument adopted in 1997 is now antiquated
- Migrate from a DOS to a Windows platform

Main Components of Re-engineering Project

Re-engineer the data processing system

- Use database technology
- Move routine processing to earlier stages
- Minimize the tendency to "over edit"
- Develop automated systems for editing and analysis
- Train staff to maintain and develop

Expected Benefits

- Improved data quality
- Even better timeliness release of microdata six months after data collection ends
- Easier production of Early Release estimates
- Strengthened analytical capabilities
 - Less time editing and more time analyzing
 - New analytic tools

Coping with a Flat Budget Sample cuts

- •1 week in April 2002
- 2 weeks in July 2002
- 2 weeks in October 2002
- 3 weeks in April 2003
- 2 weeks in December 2003
- •? weeks in 2004

Coping with a Flat Budget

- Cancellation of interviewer retraining in January 2003
- Postponement of implementation of sample redesign from 2005 to 2007

In-house Analysis in the Division of Health Interview Statistics

Editing

- Most analysts also edit data
- Re-engineering will simplify editing, free up some analyst time, and facilitate analysis

Subject Matter Studies

- Marital status and health
- Utilization of mental health services by U.S. children
- Physical activity among adults
- Asthma prevalence in U.S. children and adults
- National trends and correlates of skin cancer screening
- Prevalence of selected health behaviors among U.S. adults
- The emotional and behavioral health of children

- Access to health care among Hispanic children
- Psychometric properties of the parentreported Strengths and Difficulties Questionnaire for American children
- Epidemiology of COPD and smoking
- Prevalence of self-reported diabetes, use of glucose regulating medications, and usual source of care among adults in the United States by race and Hispanic origin
- Functional limitations among adults
- Health insurance coverage among Hispanic persons

- The relationship between health insurance, managed care, and access to healthcare
- Analysis of SLAITS' National Asthma Survey
- The role of socioeconomic status in receipt of a yearly influenza immunization among employed target group adults 18-64 years of age
- Cigarette smoking and cessation among Asian-Americans
- Selected estimates from NHIS: Before/after the 9/11 attacks
- Race reporting by Hispanic respondents
- Analysis of SLAITS' National Survey of Early Childhood Health

Methodological Studies

- Analysis of the determinants of family income nonresponse
- Multiple imputation of missing income data at the individual and family levels using sequential regression imputation
- Reasons for partials and break offs in the NHIS
- Using Blaise audit trails with the NHIS
- Plan and operation of the 2002 Joint Canada/United States Survey of Health
- Innovations in Spanish translation

Special Topic: Estimating the Prevalence of Uninsured Children Using Data from SLAITS

SLAITS: The State and Local Area Integrated Telephone Survey

- Developed by CDC/NCHS
- Addresses need for subnational data
- Uses sampling frame from the National Immunization Survey

Sampling Frame: National Immunization Survey

- Designed to produce immunization coverage estimates for 50 states and 28 metropolitan areas
- Random-digit-dial telephone survey
- Screens about 1 million households annually
- Target population: 19-35 months old

Key Features of SLAITS

- Expands on the National Immunization Survey
 - Random-digit-dial telephone survey
 - Computer assisted telephone interviewing (CATI)
- Customized content and sample

National Survey of Children with Special Health Care Needs, 2001

- Produced national and state-based estimates on the prevalence and impact of children with special health care needs (CSHCN)
- Will be repeated in 2005

National Survey of CSHCN Interview Process in 2001

- Screened 2.6 million telephone lines to identify households with children <18
- Screened all children to identify CSHCN
- Detailed questionnaire for 38,866 CSHCN (~750 per state)
- Asked about health insurance coverage for an additional 176,296 children without special health care needs

Results and Discussion

	National Survey of CSHCN	National Health Interview Survey	National Survey of America's Families	Current Population Survey	Medical Expenditure Panel Survey
Insurance coverage rate Insured	91.7	89.0	87.4	88.3	85.5
Uninsured	8.3	11.0	12.6	11.7	14.6