

FAQ: The 2018 Community Health Assessment Phone Survey

Below are answers to questions gathered from local communities about the Regional Community Health Survey and how it reaches people. The responses were provided by members of the WNC Healthy Impact Data Consulting Team, including PRC—the research firm that conducts the phone survey. This FAQ list can help you better answer questions that your community stakeholders may have about the method and quality of the primary data that comes from the phone survey.

Does the phone survey get a good representation of people of all ages from our community?

Random sampling typically produces a highly representative sample (i.e. a group of participants whose characteristics closely match the characteristics of the whole population of the county). PRC typically achieves a representative sample, though some population groups (e.g., men, younger adults, minority race/ethnic groups) may be underrepresented. To address any underrepresentation, PRC “weighted” the raw data to improve representativeness (i.e., adjusted results to produce a sample that more closely matches the demographic characteristics of the population). The final survey is highly representative of counties in terms of geographic distribution and demographic characteristics. In each county’s slide deck, there is a slide that shows the population characteristics compared to the weighted sample.

Tell me more about underrepresented population groups...

While PRC “weights” the raw data to improve the representation of smaller population groups, sometimes the raw data sample size of the underrepresented population group does not meet WNC Healthy Impact’s reporting criteria (greater than or equaling 50 respondents). When a population group does not meet the reporting criteria, the population group data will either be suppressed in regional or county reporting or combined with other population groups until the group total reaches ($n \geq 50$). An example of when this might happen is when race/ethnic minority groups are combined into an “other” category.

I think people are skeptical about answering phone calls from an unknown number. I think this is particularly true for older people. How can a phone survey be valid with so many people not answering their phones?

PRC had no difficulty achieving the targeted samples throughout the region. To ensure the best representation of the population surveyed, a multi-mode methodology was implemented for the 2018 survey. This consisted primarily of telephone interviews, via both landlines and cell phones. To increase the potential for participation even further, especially for younger

populations, a small proportion of the surveys were completed in an online, internet-based survey format.

How does the phone survey work?

PRC employs the latest CATI (computer-aided telephone interviewing) system technology in its interviewing facilities. The CATI system automatically generates the daily sample for data collection, retaining each telephone number until the Rules of Replacement are met.

Replacement means that no further attempts are made to connect to a particular number, and that a replacement number is drawn from the sample. To retain the randomness of the sample, telephone numbers drawn for the sample are not discarded and replaced except under very specific conditions.

So many people have cell phones these days. Isn't a phone survey obsolete?

Of the 2,602 surveys completed by telephone, 29% were conducted via cell phone (up from 6% in 2015) and 71% via landline. PRC's sampling frame (the list from which they randomly selected the telephone numbers they called) included both cell phones and landlines. Completed cell phone surveys are up to two times more expensive than landline surveys due to the additional screening necessary to ensure that people are over 18 and in a safe place (i.e., not driving) (<http://www.people-press.org/methodology/collecting-survey-data/cell-phone-surveys/>). To meet our budget, the sampling frame included a higher percentage of landline numbers than cell phone numbers. One of the concerns of landline surveys is a lower response rate by younger individuals. To increase the response rate for younger populations in 2018, a small proportion of the surveys (n=663 or 20%) were completed in an online, internet-based survey format.

Each survey year (2012, 2015, 2018) WNC Health Network works with the survey company to ensure that the "gold standard" of random survey collection is being used for our region. PRC — like the NC DHSS and the CDC in its Behavioral Risk Factor Surveillance System — is continually looking for ways to incorporate a greater number of cell phones into its samples and use new technology such as the internet-based survey format, but recognizes that telephone-based surveys continue to be the best way to produce a representative sample due to random-selection capabilities and much higher response rates than other approaches.

How does the internet-based survey format work?

PRC works with a company called Research Now/SSI, which is one of the largest vendors of this sort in the world, to develop online samples for invitation. RN/SSI maintains panels of consumers that are by-invitation only. When PRC engages RN/SSI, they send out announcements to qualified persons, with a log-in that directs respondents to the web survey platform. Once the participant completes the survey, they earn rewards for their participation from RN/SSI and its partners. PRC has found that this method of survey collection can help with participation among younger adults. *Updated 10.19.2018*