

# Description of plans for a SIPP calendar validation study: Study design and analysis

US Census Bureau/PSID  
Event History Calendar Research Conference  
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# Overview

- **Currently in the middle of the development of multiple instruments for SIPP.**
- **Testing the possibility of using event history calendar hybrid instrument to facilitate annual administration of SIPP.**
- **Two planned evaluations**
  - **2008 Paper Test – (The test we are discussing here)**
  - **2009 Dress Rehearsal – (CAPI EHC Hybrid test)**
- **Subject to available funding.**

# SIPP Basics

- **National panel survey - sample size between about 11,000 to 36,700 interviewed households**
- **The duration of each panel from 2½ yrs to 4 yrs**
- **The SIPP sample is a multistage-stratified sample of the U.S. civilian noninstitutionalized population**
- **The survey uses a 4-month recall period**
- **The sample is divided into 4 rotation groups for monthly interviewing**
- **Interviews are conducted by personal visit and by decentralized telephone**

# Timeline of SIPP/DEWS/Re-engineered SIPP

2005

- **December** –
  - Direct conversion of 2004 Panel instrument to BLAISE instrument and SAS processing system halted.

2006

- **January through May**
  - Beginning of interagency discussions on the future plans for SIPP.
  - CEPR “Save the SIPP Letter” – Existing data alternatives developed.
- **June through December** –
  - Brookings Workshop – presentation of alternatives concerns over data gap / administrative records / existing data options.
  - August open meeting - presentation of event history calendar instrument plans.
  - December open meeting - more details on content and structure of the program.

2007

- **January through May** –
  - CNSTAT Panel presentation
  - Announce plans to continue 2004 panel with reduced sample
  - Topical content meetings held with stakeholders
- **June to Present** –
  - Appropriations proposed to provide funding to continue SIPP in 2008.

# Event History Calendars

- “...the use of event history calendars has considerable potential in assisting respondents to reconstruct their personal pasts more completely and accurately, maximizing the quality of retrospective reports.”
  - Dr. Robert Belli  
University of Nebraska

# SIPP calendar aided interview test

## 1989 to 1991

Person number (or name)	1988			1989						1990							
	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB
Respondent person number																	
Address change?																	
Number of persons in household																	
Marital status																	
Employer 1:																	
Wages/Salary																	
Employer 2:																	
Wages/Salary																	
Self-employed (income)																	
Health insurance coverage:																	
Private																	
Medicaid																	
Medicare																	
Programs:																	
Workers' compensation																	
Unemployment payments																	
Child support																	
Food stamps																	
SSI																	
AFDC/ADC																	
General assistance																	
WIC																	
Pensions/Retirement:																	
Social Security Retirement																	
Private pension																	
State/Local govt. pension																	

1. R.O. Code  
 2. Control number

Form SIPP-9030 U.S. DEPARTMENT OF COMMERCE  
 (9-13-89) BUREAU OF THE CENSUS

### EVENT CALENDAR

- INCOME SOURCE LIST**
- Social Security
  - U.S. Government Railroad Retirement pay
  - Federal Supplemental Security Income (SSI)
  - State Supplemental Security Income (State administered SSI only)
  - State unemployment compensation
  - Supplemental Unemployment Benefits
  - Other unemployment compensation (Trade Adjustment Act benefits, strike pay, other)
  - Veterans compensation or pensions
  - Black lung payments
  - Workers' compensation
  - State temporary sickness or disability benefits
  - Employer or union temporary sickness policy
  - Payments from a sickness, accident, or disability insurance policy purchased on your own
  - Aid to Families with Dependent Children (AFDC, ADC)
  - General assistance or General relief
  - Indian, Cuban, or Refugee Assistance
  - Foster child care payments
  - Other welfare
  - WIC (Women, Infants, and Children Nutrition Program)
  - Food stamps
  - Child support payments
  - Alimony payments
  - Pension from company or union
  - Federal Civil Service or other Federal civilian employee pensions
  - U.S. Military retirement pay
  - National Guard or Reserve Forces retirement
  - State government pensions
  - Local government pensions
  - Income from paid-up-life insurance policies or annuities
  - Estates and trusts
  - Other payments for retirement, disability, or survivor
  - G.I. Bill
  - Other VA educational assistance
  - Income assistance from a charitable group
  - Money from relatives or friends
  - Lump sum payments
  - Income from roomers or boarders
  - National Guard or Reserve pay
  - Incidental or casual earnings
  - Other cash income not included elsewhere

# Evaluation of EHC Instruments

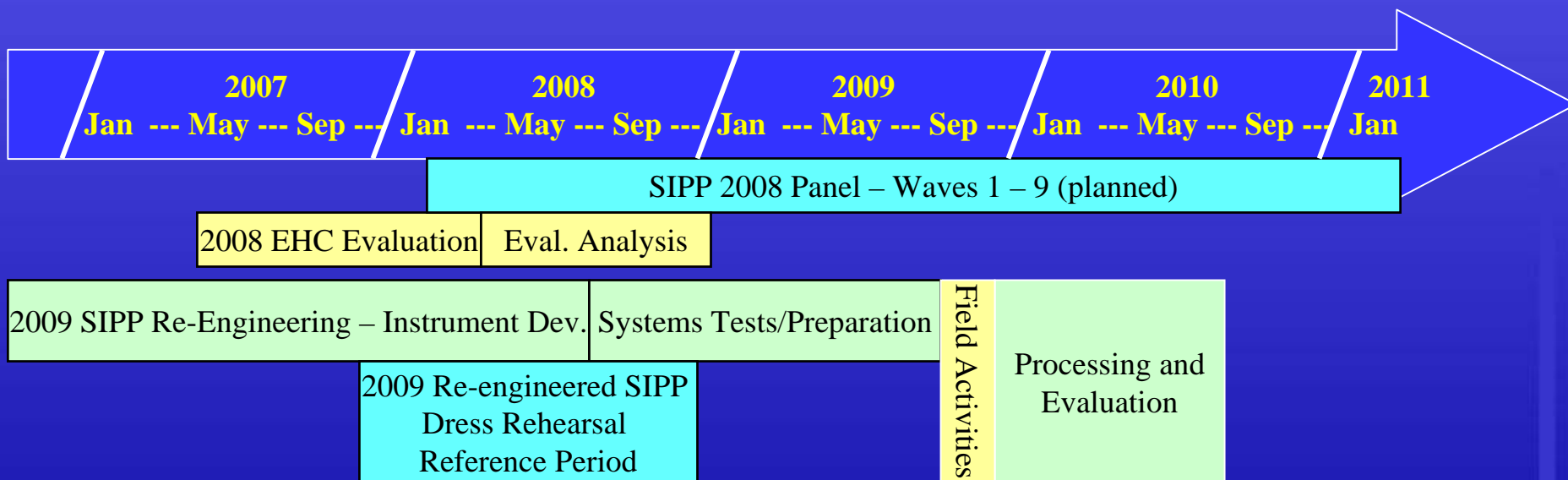
- **Event history calendar instruments evaluated on numerous occasions**
  - Compared with previously collected questionnaire responses
  - Only one test-retest experiment with comparison treatment groups
- **Reliability – High levels of agreement with previously collected questionnaire based data.**
- **Domains**
  - Marriage, births, residential moves, school enrollment, labor force (all showed good agreement)
  - Concerns - AFDC/Food Stamps
- **Mode - Phone and in-person almost same degree of consistency.**
- **Validation – Limited record check studies – designed into the first SIPP field test evaluation.**
- **Reduction of seam bias**

# Stakeholder Concerns

- **SIPP provides unique detail at the monthly level**
  - Can the EHC provide similar detail?
- **SIPP addresses recall concerns by frequent administration**
  - Can any annual survey facilitate comparable recall quality?
- **Program data are a key data element of SIPP**
  - Do the inconclusive/negative findings in prior EHC tests for AFDC/TANF and Food Stamps preclude the use of this method?
- **Data comparability and evaluation are crucial**
  - How do SIPP data collected via EHC compare with questionnaire data?



# Re-engineered SIPP Development



# 2008 Field Test Instrument and Training Materials Development

- **Contract to develop a simplified paper instrument which could be used in a field test reinterview of previous SIPP respondents**
- **Reduced content to focus on program participation recall issues**
- **Key components:**
  - **Paper instrument (Control card, EHC, and Assets Questions)**
  - **Training materials and procedures**
  - **Test interviews with interviewer debriefings and report**
- **Designed to be administered to each household adult (15+)**
- **One control card for the household, but separate EHC's for each person**

# 2008 Field Test Basics

- **A reinterview evaluation and validation test**
  - Reinterview of current 2004 panel SIPP respondents to recollect information for calendar year 2007
  - Pairwise comparison of responses from the two data sources
  - Validation of responses using administrative records matched at the individual level
- **Paper instrument (Control card, EHC, and Assets Questions)**
- **Interviewer debriefings and qualitative analyses to refine concepts and training procedures**

# 2008 Field Test Assumptions

1. Results from a paper questionnaire can be generalized to an automated EHC questionnaire with full content.
2. Results from continuing SIPP respondents are generalizable to respondents who would be new respondents in a new panel.
3. The lessons learned and materials developed for training interviewers to administer the EHC 2008 field test can be adapted and improved for the 2009 dress rehearsal and then again for production SIPP.
4. We will be successful in training the Census Bureau's field staff to administer an EHC instrument and develop the necessary probing and cueing techniques required to record high quality EHC data.
5. Results from a survey in limited areas and among a non-representative sample are generalizable to a national sample.

# Control Card – 2008 Field Test Instrument

## Control Card

Control Number: \_\_\_\_\_  
Household Address: \_\_\_\_\_

Field Rep. Code: \_\_\_\_\_ Field Rep. Code: \_\_\_\_\_ Field Rep. Code: \_\_\_\_\_  
Was a Debit Card Promised? Circle: Y N IF YES, Debit Card # \_\_\_\_\_  
Household Contact Name: \_\_\_\_\_ Household Contact Phone # \_\_\_\_\_  
Total Number of HH Members age 15+: \_\_\_\_\_

OMB # \_\_\_\_\_  
Expiration Date \_\_\_\_\_  
Form Name \_\_\_\_\_  
*NOTICE – Your report to the U.S. Census Bureau is confidential by law (Title 13, U.S. Code). It may be seen only by individuals who are sworn for life to protect the confidentiality of these data and may be used only for statistical purposes.*

### SECTION 1: Household Members

Person line #	A1	A2	A3
	FIRST NAME	MIDDLE NAME	LAST NAME
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

### SECTION 2: Household Demographics

B	C	D	E	F	G	H (15+)	I (15+)	J (15+)
Sex	Relationship to Person 1	Date of Birth MM/DD/YYYY	Age	Hispanic	Race Code(s)	Educ Code	Ever in Armed Forces?	Marital Status Code
M F	Self	/ /		Y N			Y N	
M F		/ /		Y N			Y N	
M F		/ /		Y N			Y N	
M F		/ /		Y N			Y N	
M F		/ /		Y N			Y N	
M F		/ /		Y N			Y N	
M F		/ /		Y N			Y N	
M F		/ /		Y N			Y N	
M F		/ /		Y N			Y N	
M F		/ /		Y N			Y N	
M F		/ /		Y N			Y N	
M F		/ /		Y N			Y N	

### SECTION 3: Spouse/Parent Relationships

K	L	M	Person line #
Spouse lives here? Enter line #	Mother lives here? Enter line #	Father lives here? Enter line #	
			1
			2
			3
			4
			5
			6
			7
			8
			9
			10
			11
			12

### SECTION 4: Selection of Respondents

- IF THERE ARE MORE THAN 12 PERSONS, WRITE DOWN THE NUMBER OF PERSONS WHO DID NOT GET LISTED. IF 12 OR FEWER PEOPLE, ENTER '0'. \_\_\_\_\_
- CIRCLE THE PERSON LINE NUMBER IN THE FIRST COLUMN TO INDICATE RESPONDENT FOR THIS CONTROL CARD.
- IN COLUMN E, CIRCLE THE AGES OF PERSONS AGE 15 AND OLDER.
- COUNT TOTAL NUMBER OF PERSONS AGE 15 AND OLDER. RECORD HERE AND TEXT BOX AT TOP: \_\_\_\_\_
- COMPLETE AN EVENT HISTORY CALENDAR WITH EACH PERSON AGE 15 AND OLDER (IF AT ALL POSSIBLE), OR WITH A PROXY IF PERSON IS UNAVAILABLE.

CONTROL\_CARD\_Deliverable version.doc

# Page 1 – 2008 Field Test Instrument

Control Number: \_\_\_\_\_ Date: \_\_\_\_\_  
 ENTER LINE # OF HH Member: \_\_\_\_ Field Rep Code: \_\_\_\_\_  
 CHECK ONE:  Self response  
 Proxy – Enter Line # of Proxy \_\_\_\_\_

## 2007 EVENT HISTORY CALENDAR

OMB # \_\_\_\_\_  
 Expiration Date \_\_\_\_\_  
 Form Name \_\_\_\_\_  
 NOTICE – Your report to the U.S. Census Bureau is confidential by law (Title 13, U.S. Code). It may be seen only by individuals who are sworn for life to protect the confidentiality of these data and may be used only for statistical purposes.

Landmark Events	Started before Jan 07	WINTER		SPRING			SUMMER			FALL		WINTER	Cont. into 2008		
		Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov			Dec
ENTER DESCRIPTION															Now?
<b>A Residences</b>															
<b>Current:</b> RECORD ONLY WHETHER IT IS Public Housing (PH), Section 8 (S8), Other Program (OP)															Y
<b>Former Address:</b> RECORD ADDRESS AND Public Housing (PH), Section 8 (S8), Other Program (OP)															
<b>Former Address:</b> RECORD ADDRESS AND Public Housing (PH), Section 8 (S8) Other Program (OP)															
<b>B School Enrollment</b>															Y N
<b>C Labor Force</b>		Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec		
<b>#1 Employer</b> Occupation _____ CHECK ONE: _____ Pay Rate _____ <input type="checkbox"/> Employer <input type="checkbox"/> Self-Employed <input type="checkbox"/> Other Avg. hrs/week _____															Y N
<b>#2 Employer</b> Occupation _____ CHECK ONE: _____ Pay Rate _____ <input type="checkbox"/> Employer <input type="checkbox"/> Self-Employed <input type="checkbox"/> Other Avg. hrs/week _____															Y N
<b>#3 Employer</b> Occupation _____ CHECK ONE: _____ Pay Rate _____ <input type="checkbox"/> Employer <input type="checkbox"/> Self-Employed <input type="checkbox"/> Other Avg. hrs/week _____															Y N
<b>#4 Employer</b> Occupation _____ CHECK ONE: _____ Pay Rate _____ <input type="checkbox"/> Employer <input type="checkbox"/> Self-Employed <input type="checkbox"/> Other Avg. hrs/week _____															Y N
<b>#5 Employer</b> Occupation _____ CHECK ONE: _____ Pay Rate _____ <input type="checkbox"/> Employer <input type="checkbox"/> Self-Employed <input type="checkbox"/> Other Avg. hrs/week _____															Y N
<b>D Unpaid Labor</b>															Y N
<b>E Employment Summary</b>															Y N
Was R looking for work? (Y – N)															
<b>F Workers Insurance Programs</b>	Disability	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$		Y N
	Unemployment	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$		Y N
	Workers compensation	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$		Y N

# Page 2 – 2008 Field Test Instrument

<b>G6. RECORD ANSWER(S):</b> <input type="checkbox"/> Employer/Union <input type="checkbox"/> Government <input type="checkbox"/> Other	<b>G9. RECORD ANSWER(S):</b> <input type="checkbox"/> Medicare <input type="checkbox"/> Medicaid, Medical Assistance, CHIP, other government assistance health plan <input type="checkbox"/> VA/Military <input type="checkbox"/> Something else	<b>G14. RECORD ANSWER(S):</b> <input type="checkbox"/> Employer/Union <input type="checkbox"/> Government <input type="checkbox"/> Other	<b>G17. RECORD ANSWER(S):</b> <input type="checkbox"/> Medicare <input type="checkbox"/> Medicaid, Medical Assistance, CHIP, other government assistance health plan <input type="checkbox"/> VA/Military <input type="checkbox"/> Something else
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G	Health Insurance	Started before Jan 07	WINTER			SPRING			SUMMER			FALL		WINTER	Cont. into 2008	Receive Now?	
			Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec			
	Employer-sponsored coverage?															Y N	
	Medicare?															Y N	
	Medicaid?															Y N	
	Military or VA Coverage?															Y N	
	Directly-purchased coverage?															Y N	
	Other health insurance?															Y N	
	CHECK ONE: <input type="checkbox"/> School <input type="checkbox"/> Parent/relative <input type="checkbox"/> Other-specify Describe: _____															Y N	
	Uninsured?															Y N	
<b>H</b>	<b>Social Security</b>																
	Social Security?																Y N
	Person number(s) of beneficiary _____		\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$		Y N	
	Medicare Part B deduction?		\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$		Y N	
	Person number(s) of beneficiary _____		\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$		Y N	
<b>I</b>	<b>Social Welfare</b>																
	Temporary Assistance for Needy Families (TANF)?															Y N	
	Person number(s) of beneficiary _____		\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$		Y N	
	Food Stamps?															Y N	
	Person number(s) of beneficiary _____		\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$		Y N	
	(Ask only of females) WIC?															Y N	
	Person number(s) of beneficiary _____		\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$		Y N	
	Supplemental Security Income (SSI)?															Y N	
	Person number(s) of beneficiary _____		\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$		Y N	
	Social Security Disability Income (SSDI)?															Y N	
	Person number(s) of beneficiary _____		\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$		Y N	

# 2008 Field Test Evaluation Groups

- **Two groups**
  - **Cases completing Wave 12 of SIPP 2004 Panel (Primed)**
  - **Sample reduction cases cut after Wave 8 2004 Panel (Un-Primed)**
- **The event history calendar (EHC) will be administered to each of these household groups.**
- **An additional group will be created by the universe which matches to administrative records in the validation phase of the analysis.**



# 2007 Reference Period SIPP Cases

SIPP 2004 PANEL REFERENCE PERIOD MONTHS IN CALENDAR YEAR 2007 BY ROTATION GROUP									
CALENDAR MONTH		ROTATION GROUP							
		1		2		3		4	
		Ref. Period	Intw. Month	Ref. Period	Intw. Month	Ref. Period	Intw. Month	Ref. Period	Intw. Month
2006	October	W10	W9						
	November				W9				
	December			W10			W9		
<b>2007</b>	<b>JANUARY</b>					W10			W9
	<b>FEBRUARY</b>	W11	W10					W10	
	<b>MARCH</b>				W10				
	<b>APRIL</b>						W10		
	<b>MAY</b>			W11					W10
	<b>JUNE</b>	W12	W11			W11			W11
	<b>JULY</b>				W11				
	<b>AUGUST</b>						W11		
	<b>SEPTEMBER</b>			W12					W11
	<b>OCTOBER</b>		W12			W12			
	<b>NOVEMBER</b>				W12				
	<b>DECEMBER</b>						W12		
2008	January								W12

\*\* FEBRUARY 2008 – START OF NEW 2008 PANEL \*\*

# 2007 Test Site SIPP Cases

Table 1. 2008 Field Test -- Approximate Number of Available Cases

	Illinois	Texas	Maryland
SIPP 2004 Available Cases (1)	Available Households	Available Households	Available Households
Total households	936	1048	884
Wave 10 completed households	508	614	268
Wave 8 reduced households	428	434	616

Source: Survey of Income and Program Participation - 2008 Re-engineering field test 1.

Notes: (1) Households were selected for interview in the field test from those completing interviews through Wave 10 in Illinois and in four metropolitan areas of Texas.

(2) If a selected address interviewed for the Event History Calendar test does not include any SIPP 2004 respondents we will utilize the cases as a type of 'un-primed' replacement households.

# 2008 Evaluation Plan

## Domains

- Residential Moves
- School Enrollment
- Labor Force
- Workers Insurance Programs
- Health Insurance
- Social Security
- Social Welfare Programs
- Asset Ownership

## Comparisons

- Measurement of occurrence
- Relative timing
- Contemporaneous events
- Distributional differences

## Evaluations

- Interviewer debriefing
- Interview observation
- Respondent debriefing
- Focus groups

## 2x2 Report Consistency Tables

SIPP/EHC Report Consistency in <u>[MONTH]</u> for <u>[PROGRAM/CHARACTERISTIC]</u>			
		SIPP	
		yes	no
EHC	yes	a	b
	no	c	d

outcomes:    if  $b = c$ :    equivalent data quality  
                   if  $b > c$ :    “underreporting” in SIPP, relative to EHC  
                   if  $b < c$ :    “underreporting” in EHC, relative to SIPP

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Report Consistency for Total Months of Participation/Coverage

SIPP/EHC Report Consistency for Total Months of Participation/Coverage in 2007 for <u>[PROGRAM/CHARACTERISTIC]</u>														
		SIPP												
		0	1	2	3	4	5	6	7	8	9	10	11	12
E H C	0													
	1													
	2													
	3													
	4													
	5													
	6													
	7													
	8													
	9													
	10													
	11													
	12													

outcomes: entries equally distributed above and below the diagonal: equivalent data quality  
 entries clustered above the diagonal: “underreporting” in EHC, relative to SIPP  
 entries clustered below the diagonal: “underreporting” in SIPP, relative to EHC

**Month-to-Month Transition Rates in 2007 (Selected Calendar Month-Pairs)  
among SIPP Seam Cases, SIPP Off-Seam Cases, and EHC Cases for  
[program/characteristic]**

	Jan- Feb	Feb- Mar	Mar- Apr	Apr- May	May- Jun	Jun- Jul	Jul- Aug	Aug- Sep
SIPP - Seam Cases								
SIPP - Off-Seam Cases								
EHC								

# 2008 Validation Plan

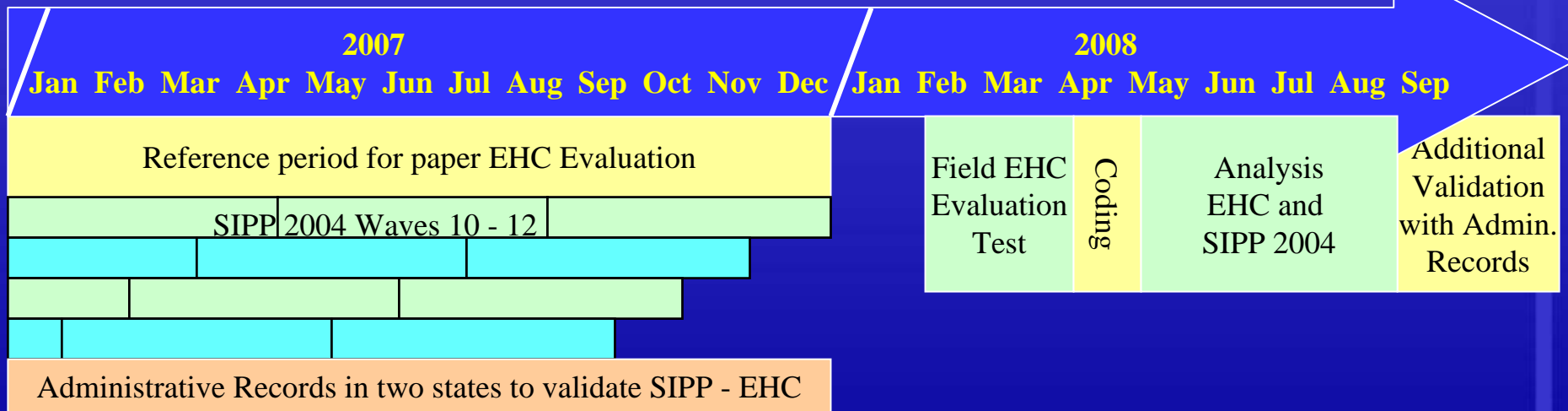
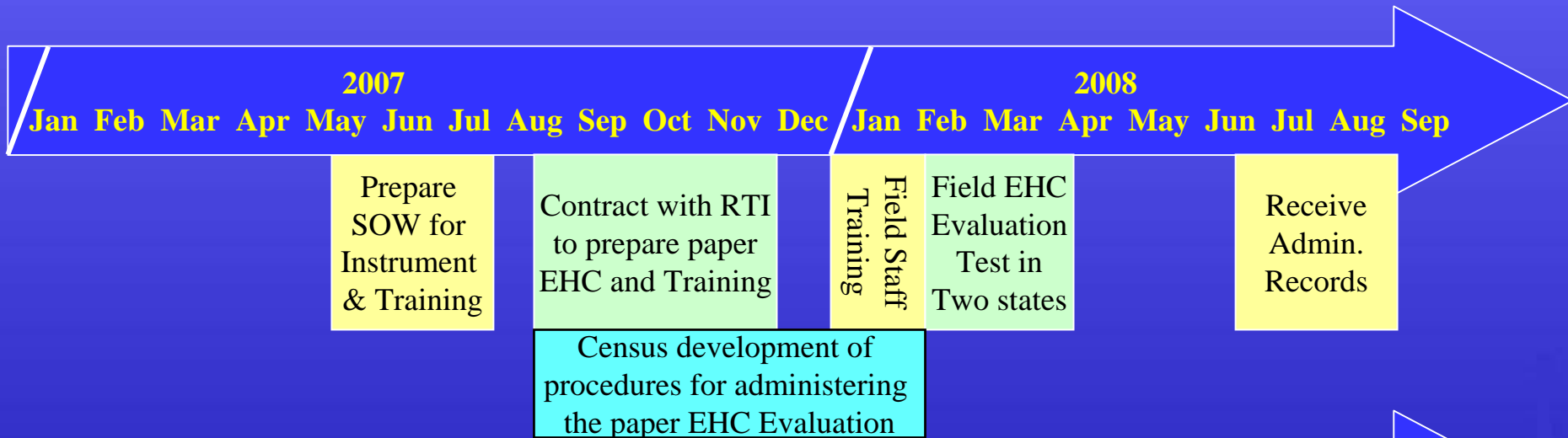
## Administrative Records

- Medicare
- Social Security
- SSI
- Unemployment Wage Information
- TANF
- Food Stamps

## Validations

- By domain – assess the agreement between the survey responses and the administrative records.
  - Occurrence
  - Timing (Survey to Records)
  - Distributional differences
- Evaluate the characteristics of the survey respondents matching and not matching administrative records by domain.

# 2008 EHC Evaluation Test





# Comments:

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