

Assessing and improving calibration weighting of web surveys using the R-indicator

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Motivation

- Quickly produced commercial panel-based web surveys have been developed to complement the ability of the federal statistical system to provide health information about the U.S. population.
- Despite their great potential, statistical inferences based on these web surveys might be subject to potential bias compared with traditional, high-quality household surveys.
- To mitigate these biases, units from the web survey are usually calibrated to external controls by reweighting samples, often using a benchmark survey of high quality.
- We propose to use an adaptation of the *R-indicator*, originally suggested as a measure of quantifying "representativeness" of survey response, to assess and improve the quality of calibration weighting. This metric can be effectively used to identify possible calibration variables and compare alternative weighting strategies.

Introduction: "Representativeness" using a metric R-indicator by SCB, 2009

Use a definition proposed from Schouten, Cobben and Bethlehem (Survey Methodology 2009), i.e., **SCB's response vs. non-response** context, indicators for the representativeness of survey response are defined as

Definition of "Representativeness" of response: For a population: X = covariate with H categories h=1 to H

 $\rho_{hu} = P($ unit u is a response $| u \in h)$

"representativeness" for class covariates requires $\bar{\rho}_1 = \bar{\rho}_2 = ... = \bar{\rho}_H$

In words: Nonresponse mechanism is **M**issing **C**ompletely **A**t **R**andom with respect to X.

"Representativeness" cont.

A metric defining constancy of response propensities in the population:

$$S^{2}(\rho_{x}) = \sum_{u=1}^{N} \frac{1}{N} (\rho_{u,x} - \overline{\rho}_{x})^{2} \quad \text{where,} \quad \overline{\rho}_{x} = \sum_{u=1}^{N} \frac{1}{N} \rho_{u,x}$$

the *R***-indicator** is $R(\rho_x) = 1 - 2\sqrt{S^2(\rho_x)}$ and $0 \le R(\rho_x) \le 1$

- "Not representative" as $R(\rho_x)$ approaches 0
- "Representative" as $R(\rho_x)$ approaches 1

This generic population metric can be adapted to sampling situations.

Introduction: Adapt SCB response/non-response "representative" metrics to Web Panel surveys / Benchmark survey "representative" metrics

We have two independent designs, *Benchmark* and *Web* over the population.

Usually, the **Benchmark** design (National Health Interview Survey, or NHIS) is a well-established population survey considered to be of high quality with pre-specified calibrated weights.

The *Web* design will correspond to a web survey with its own pre-specified calibrated weights.

The two questions we are addressing are:

1. Are *Web* and *Benchmark* "representing" the same population?

2. Can *Web's* weighting be modified for better representation?

Method: Use a 2-survey *R-indicator* for assessment of *Web* with regard to *Benchmark*

- 1. Pool the samples from *Web* and *Benchmark*.
- 2. Prediction only, so no variance structures used.
- 3. Scale the weights so that the sum of the *Web* weights = sum of the *Benchmark* weights. The weighted proportion of each sample to the weighed total is ½.
- 4. Propensity estimation.

Model $y_u \sim f(x_u)$, on the **X** (usually logistic regression)

- y = 1 if a unit *u* in the pooled sample is in **Web** y = 0 if a unit *u* in the pooled sample is in **Benchmark**
 - X: important covariates (domains)

Method Cont.

5. For unit u with covariate x_u the prediction is $\hat{\rho}_{u|x} = \hat{P}(\text{ unit } u \text{ is from web} | x)$

the mean prediction is $\hat{\rho} = \sum_{u=1}^{n_w + n_B} \hat{\rho}_{ux} w_u$

the distance of predictions from the mean is $\hat{S}^2(\hat{\rho}_X) = \sum_{u=1}^{n_w+n_B} w_u (\hat{\rho}_{ux} - \hat{\rho})^2$ (weights scaled to 1)

Web's is "Representative" if the $\hat{\rho}_{u|x}$'s are roughly constant or if $\hat{S}^2(\hat{\rho}_x)$ is small.

SCB form: *R*-indicator $\hat{R}(\hat{\rho}_X) = 1 - 2\sqrt{\hat{S}^2(\hat{\rho}_X)}$ in range [0,1]

 $\widehat{R}(\widehat{\rho}_X) \approx 1$ interpreted as **Web** and **Benchmark** are "equally representative" with respect to X

Features of the R-indicator

- 1. For the *Web* and *Benchmark* surveys, the initial weights can be considered as survey adjusted weights. They may be pre-adjusted for non-response and calibrated to external controls.
- 2. The *R*-indicator, $\hat{R}(\rho_x)$ and the form $\hat{S}^2(\rho_x)$ are equivalent metrics, with the latter form targeting 0 as an indication of representativeness. The latter form is more amenable to explaining features of the metric.
- 3. The scaling of the two survey's weights to sum to ½ makes the *R-indicator* a useful metric to evaluate different weighting methods on the **Web** in relation to the **Benchmark**. Deviations of $\hat{\rho}_{W,x}$ and $\hat{\rho}_{B,x}$ from 0.50 over all observations are main components of the *R-indicator*.
- 4. If x_1 and x_2 are two sets of covariates and $x_{12} = (x_1, x_2)$ is the combined set then $\hat{R}(\rho_{x_{12}}) \le \hat{R}(\rho_{x_1})$, *i.e.*, adding more covariates to the model decreases the *R*-indicator.

General application to determine impact of survey weights and covariates on survey 's "representativeness"

Pre-release, consider the Web survey as open to survey calibration methods.

Determine a weighting method that achieves some degree of "representativeness" with a Benchmark survey.

Start with w1=1 for raw assessment and

w2= Web provided weight (possibly complex strategy)

Select re-calibration weighting methods w3, ..., wk (may include w2 population controls along with additional controls based on benchmark variables.

Select assessment covariates (can be different from calibration controls)

Evaluate the *R*-indicator by weight and assessment covariates.

General application: cont.

Create a weighting method / assessment covariate-vector table with different "representative" covariate groupings. Determine a weighting method that meets the Web survey's objectives (subjective).

$\int D$ weight option	covariate option		covariate option	
	x_1		x_2	
	R-indicator		R-indicator	
W_1	$R(x_1)$		$R(x_2)$	
w ₂	$R(x_1)$		$R(x_2)$	
W ₃	$R(x_1)$		$R(x_2)$	

Example: the 2019 NHIS* serves as the Benchmark survey while the RANDS 4** is the Web survey

Survey	Weight system	Weight calibration variables
NHIS (n=31,997)	NHIS Final calibrated Weight	Census provided demographic variables
	Unit Weight	No
	AmeriSpeak Weight	Census provided demographic variables [^]
	Candidate re-weightings	
(Calibwgt5	By raking: 5 demographic variables^: gender, age, race/ethnicity, education, Census region
	Calibwgt9	By raking: 9 variables: variables from 5-variable calibration plus marital status, income, and selected health outcomes (asthma, diabetes)

*National Health Interview Survey (NHIS) which is based on a personal interview with weighting which includes nonresponse adjustment and raking to US population totals.

**RANDS 4 is a web-panel survey (conducted by NORC) based on AmeriSpeak with weights adjusted to US population totals.
^ common demographics may vary in definition by AmeriSpeak and candidate re-weightings.

Candidate variables (x) used in logistic models: Pr(Web=1|x) ~ Bx

Variable	Number of Categories	Category group		
Gender	2	Male, female		
Age group	3	18 - 44, 45 - 64, 65+		
Race/ethnicity	4	Hispanic, NH white, NH black, NH other		
Education	3	<=High school, some college, >=Bachelor		
Region	4	Northeast, Midwest, South, West		
Marital status	2	Married, not married		
Income	2	<\$50,000, \$50.000+		
Asthma (ever)	2	Yes, no		
Diabetes (ever)	2	Yes, no		
Health status	2	Fair/poor, good+		
Anxiety (severe)	2	Yes, no		
Depression (severe)	2	Yes, no		

Result: logistic model: Pr(Web=1|x) ~ Bx for single health outcome(x)

Single x	Unit-weight	NORC Weight	NCHS Calibrated Weight
Asthma*	0.743	0.911	0.935
Diabetes*	0.746	0.926	0.958
Health status**	0.618	0.704	0.808
Anxiety**	0.648	0.739	0.889
Depression**	0.649	0.742	0.891

*Weighted regression using *Calibwgt5* ; **Weighted regression using *Calibwgt9*.

Results: NCHS Calibrated Weights improved the Web survey's "representativeness" with higher *R-indicators*

Results: logistic model: Pr(Web=1|x) ~ Bx for

multiple outcomes: health status + asthma + diabetes + depression + anxiety

	Unit Weight	NORC Weight	Calibwgt5	Calibwgt9
R-indicator	0.655	0.755	0.760	0.916

Results: NCHS Calibrated Weights improved the Web survey's "representativeness" with higher *R-indicators* Impact of survey weights and covariates on survey 's "representativeness", cont.

- 1. Impact from survey weight in propensity score (PS) logistic regression: we used different weighting strategies to improve the R-indicator, i.e., we compared R-indicators with different weights included in PS models.
- Impact from covariates included in PS logistic regression: For point estimates, target health outcomes might vary with R-indicator computing PS models.

Summary

- The *R-indicator* : used to assess the "representativeness" of a webpanel based health survey as compared to the NHIS (benchmark).
- The metric can be used to evaluate possible weighting strategies and select covariates common to both surveys.
- In our case study example, the *R-indicators* helped improve calibration reweighting when compared to the web survey's weight.
- *R-indictors* on periodic web-panels may suggest:
 - 1. Additional weight calibrations are needed;
 - 2. Design feature changes from previous survey *R-indicator* assessments;
 - 3. New non-sampling issues.

Other studies on R-indicators

- Schouten *et al*. (2012). *R-indicators* can be applied to establish the quality of register data.
- Roberts *et al.* (2020) Case study using data from the Swiss European Social Survey and nonresponse follow-up survey indicated that a validation of *R-indicator* depends on the auxiliary data used in *R-indicator* estimation.
- Michael *et al.* (2022) studied "universal adaptability", which focused on targetindependent inference that competes with propensity scoring.

References

- Schouten B, Cobben F and Bethlehem J 2009 Indicators for the representativeness of survey response. Survey Methodology, June 2009 101 Vol. 35, No. 1, pp. 101-113 https://www.researchgate.net/publication/267836796
- Rosenbaum PR, Rubin DB, 1983. Assessing Sensitivity to an Unobserved Binary Covariate in an Observational Study with Binary Outcome. Journal of the Royal Statistical Society. Series B (Methodological), 1983, Vol. 45, No. 2 (1983), pp. 212-218 https://www.jstor.org/stable/2345524
- Rosenbaum PR, Rubin DB, 1983. The central role of the propensity score in observational studies for causal effects. Biometrika, 70, 41-55.
- Roberts C, Vandenplas C, and Herzing JME, 2020. A Validation of R-Indicators as a Measure of the Risk of Bias using Data from a Nonresponse Follow-Up Survey. Journal of Official Statistics, Vol. 36, No. 3, 2020, pp. 675–701. http://dx.doi.org/10.2478/JOS-2020-0034
- Barry Schouten, Jelke Bethlehem, Koen Beullens, ØyvinKleven, Geert Loosveldt, Annemieke Luiten, Katja Rutar, Natalie Shlomo and Chris Skinner 2012 Evaluating, Comparing, Monitoring, and Improving Representativeness of SurveyResponse Through R-Indicators and Partial R-Indicators International Statistical Review(2012), 80, 3, 382–399 doi:10.1111/j.1751-5823.2012.00189.x
- Michael P, Kim MP, Kern C, Goldwassera S, Kreutere F, Reingoldg O, 2022. Universal adaptability: Target-independent inference that competes with propensity scoring. PNAS 2022 Vol. 119 No. 4, https://doi.org/10.1073/pnas.2108097119

Thank you!

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