

# ***OVERVIEW OF RESPONSE AND CONSENT IN THE HEALTH AND RETIREMENT STUDY***

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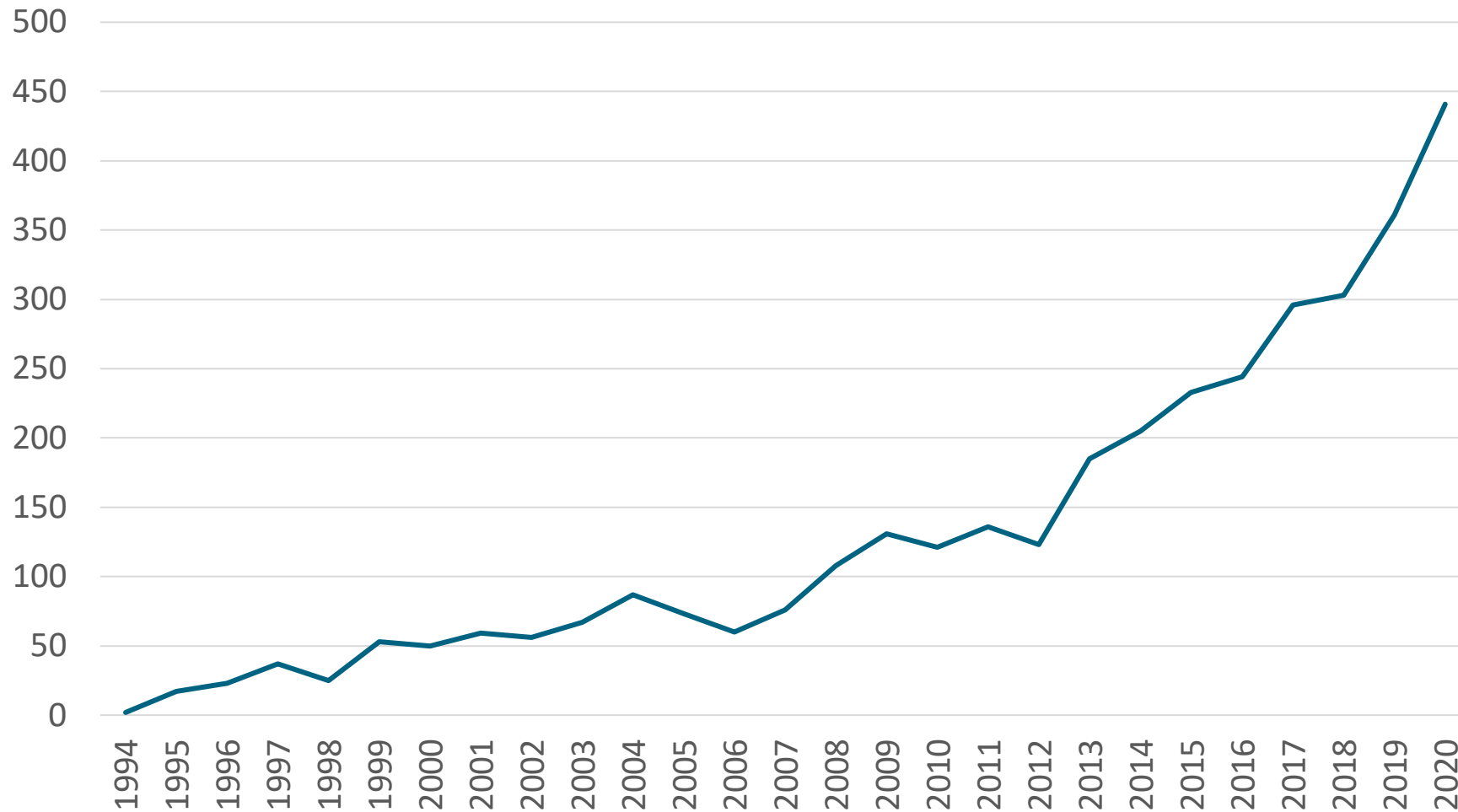
***Improving Consent and Response in Longitudinal Studies of Aging  
Committee on National Statistics, NASEM***

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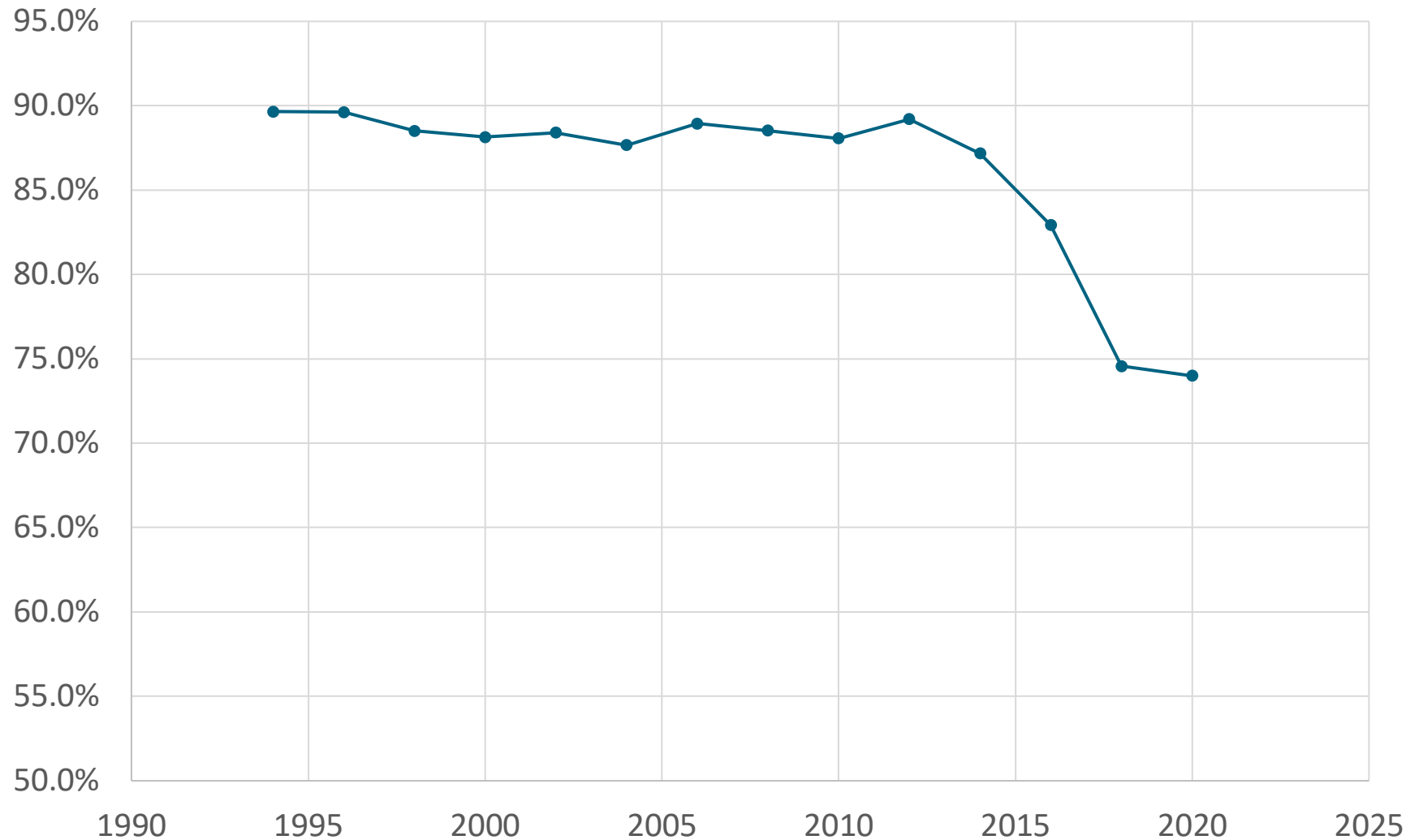
**HRS** | **HEALTH AND  
RETIREMENT  
STUDY**

# ANNUAL NUMBER OF NEW PEER-REVIEWED JOURNAL PUBLICATIONS USING HRS, 1994-2020



The scientific impact of HRS has been growing steadily since it began, due to extending length of the panel and expanding scientific content

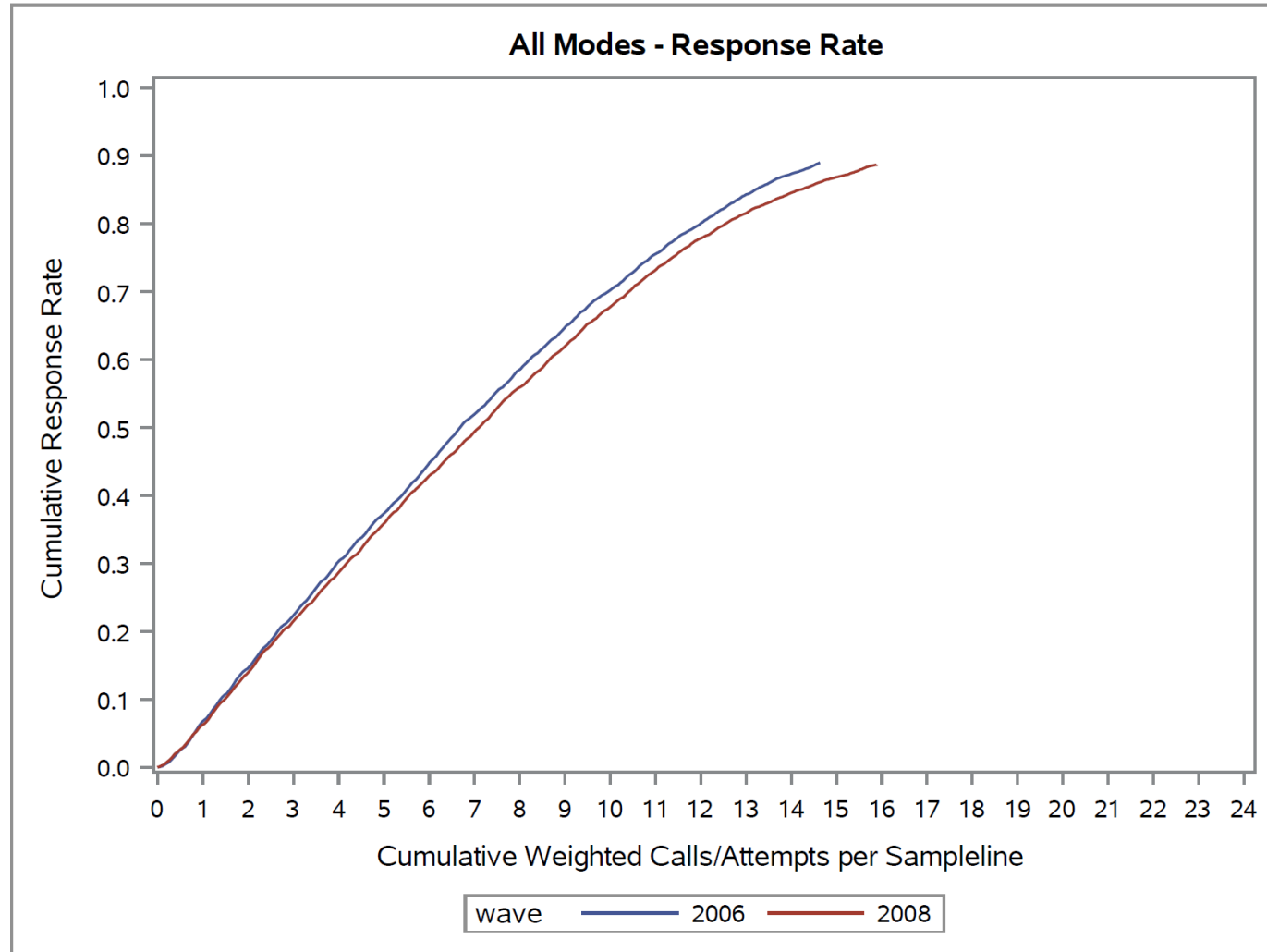
# CORE INTERVIEW RESPONSE RATE OF HRS PANEL PARTICIPANTS, 1994-2020



The trends in response rates have not been so favorable

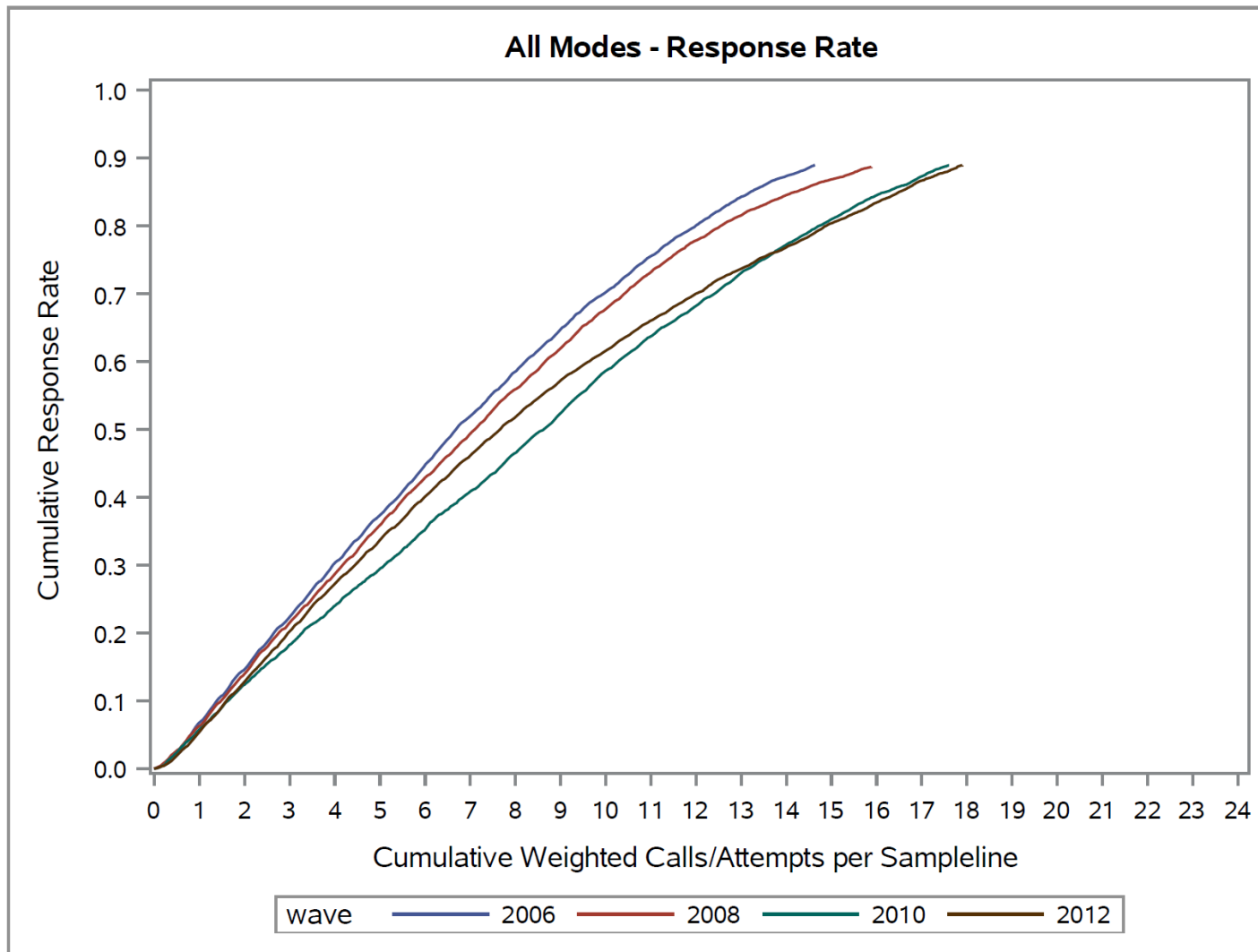
In fact, negative trends in participation predate the observed decline in final RR

# EFFORT-YIELD CURVES, 2006 AND 2008



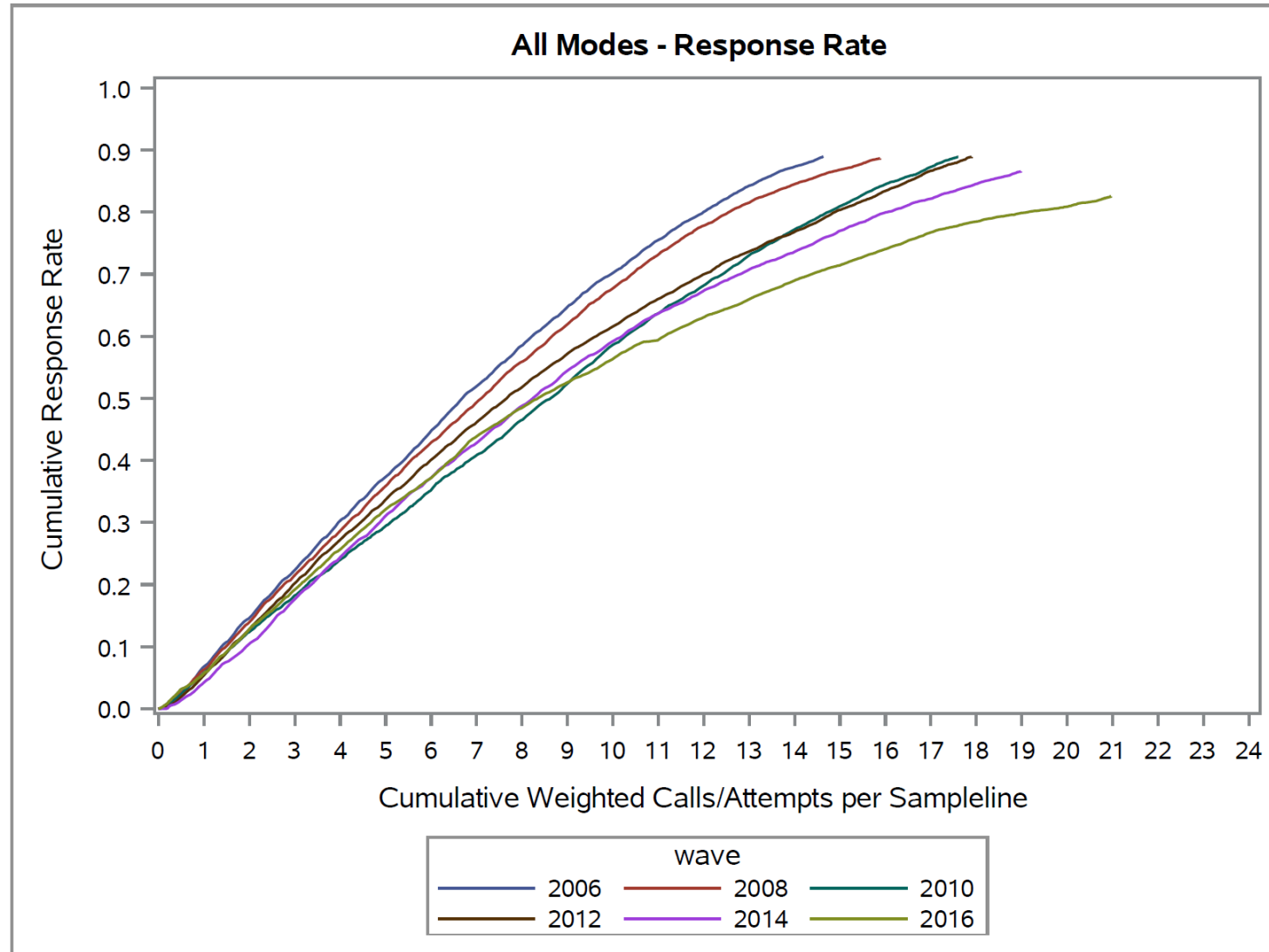
The response rate reflects the amount of effort put into contacting and persuading participants. The yield from a given amount of effort reflects how difficult it is to obtain participation. 2008 was a little bit harder than 2006

# EFFORT-YIELD CURVES, 2006-2012



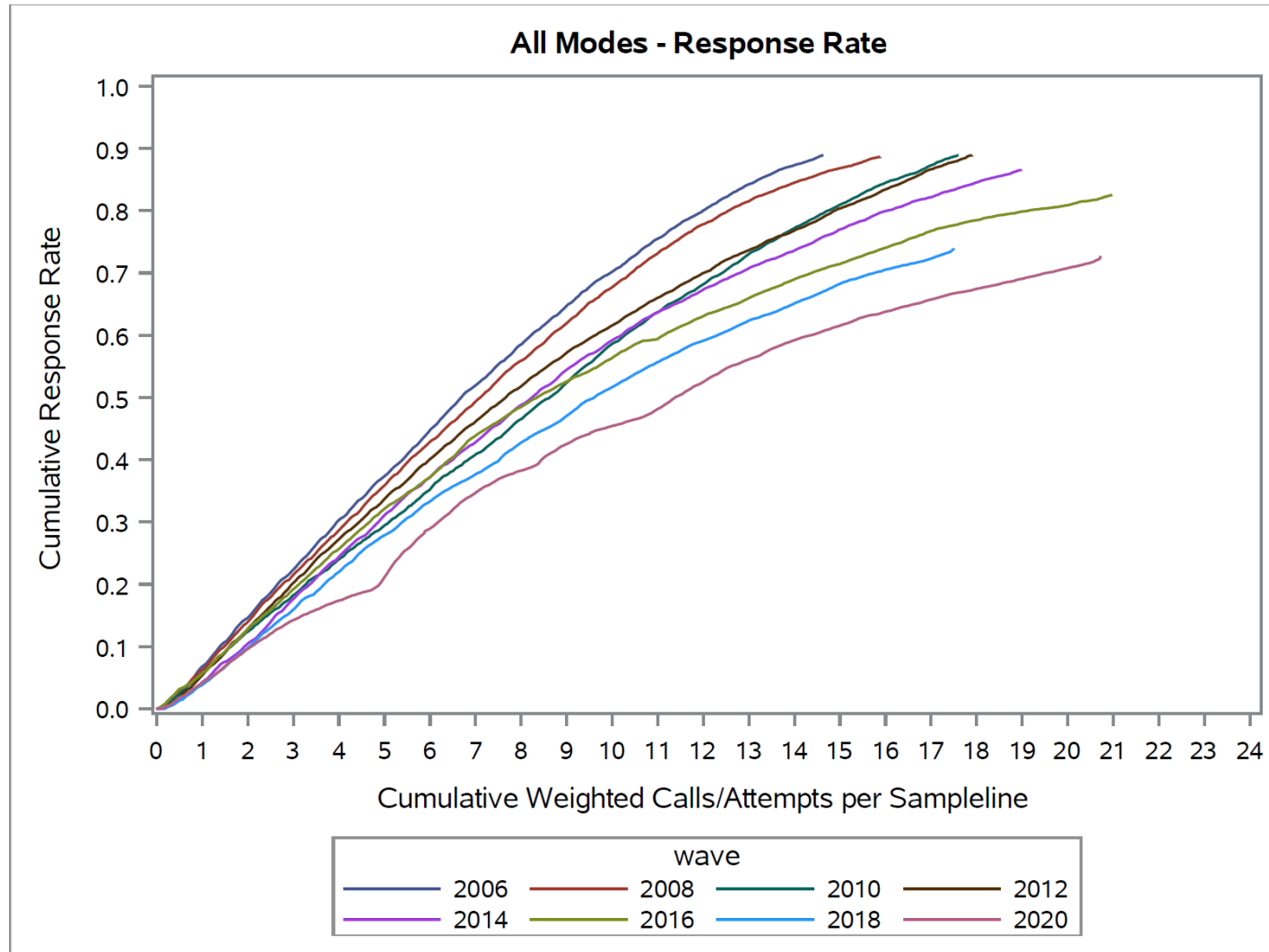
In 2010 and 2010 difficulty increased considerably. However, by increasing total effort we were able to maintain RR

# EFFORT-YIELD CURVES, 2006-2016



In 2014 and 2016 difficulty continued to increase and despite continued increase in total attempts the RR began to fall

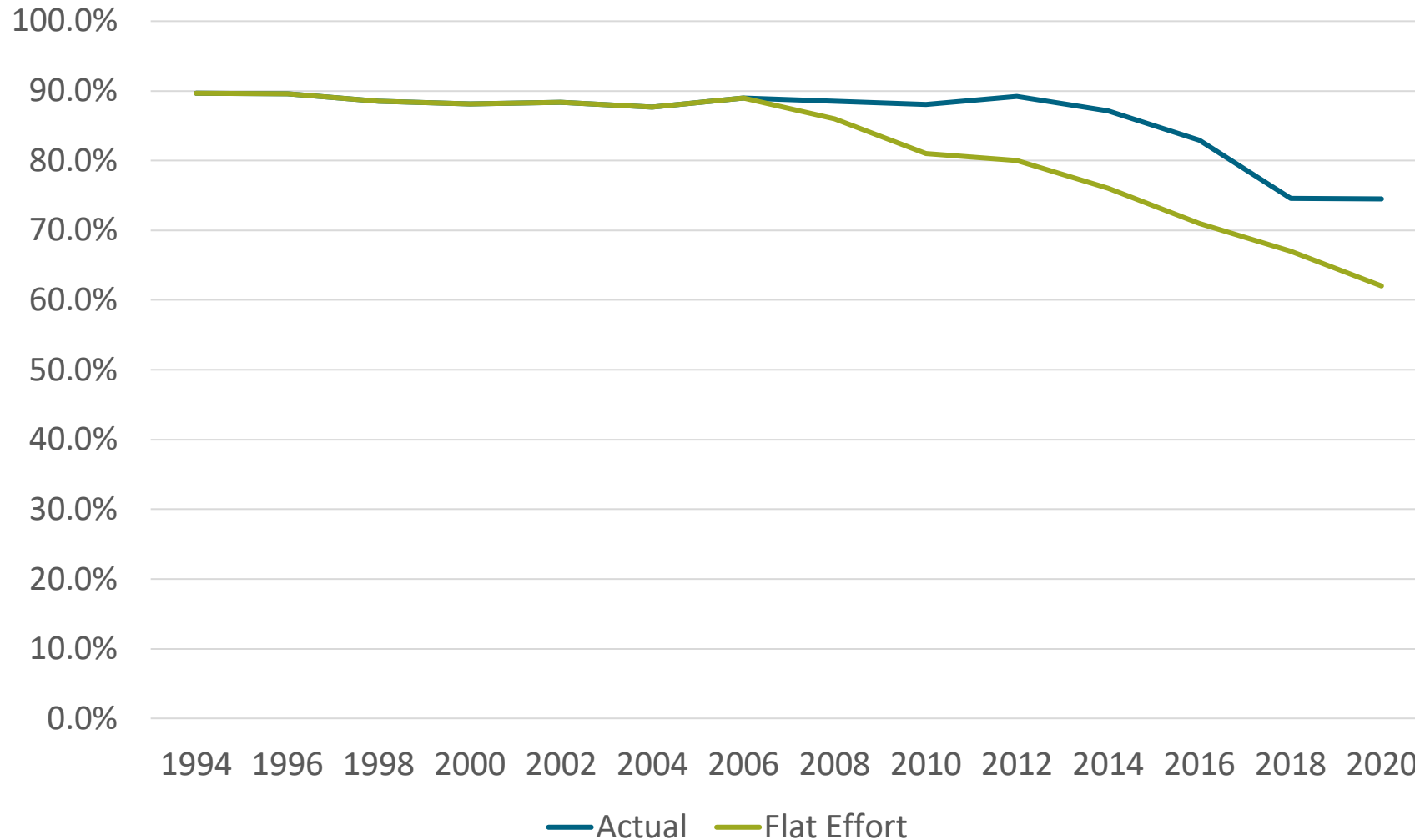
# EFFORT-YIELD CURVES, 2006-2020



NIA budget cuts in the HRS renewal forced limits on effort in 2018 while trends in difficulty continued

In 2020, the pandemic forced conversion to telephone, reducing in-person costs and freeing budget to expand effort

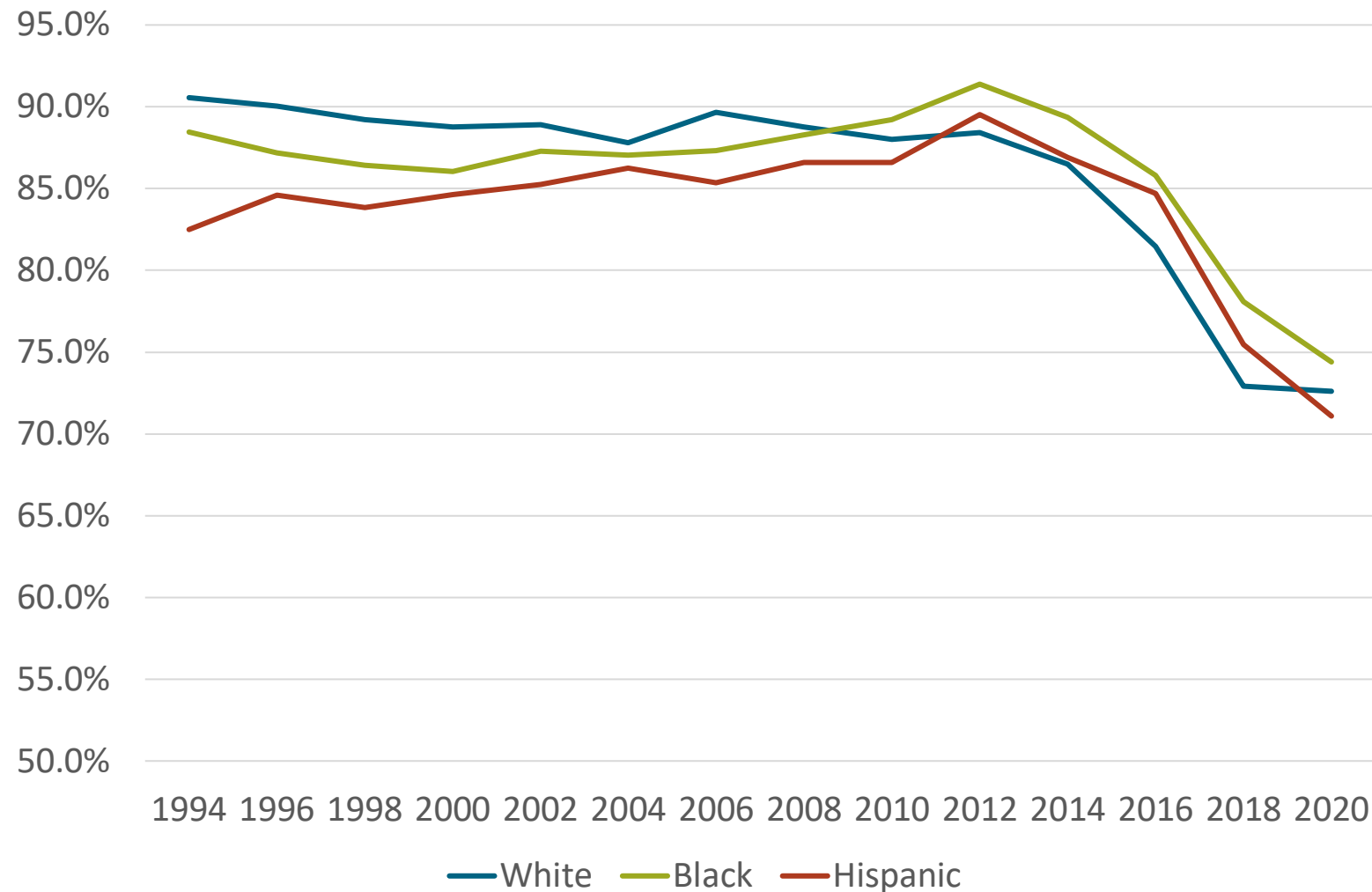
# ACTUAL RR AND HYPOTHETICAL RATE IF EFFORT HELD CONSTANT AT 2006 LEVEL



Without the increase in effort, the trend toward lower RR would have been visible from at least 2006 and would be about 12 points lower by 2020.

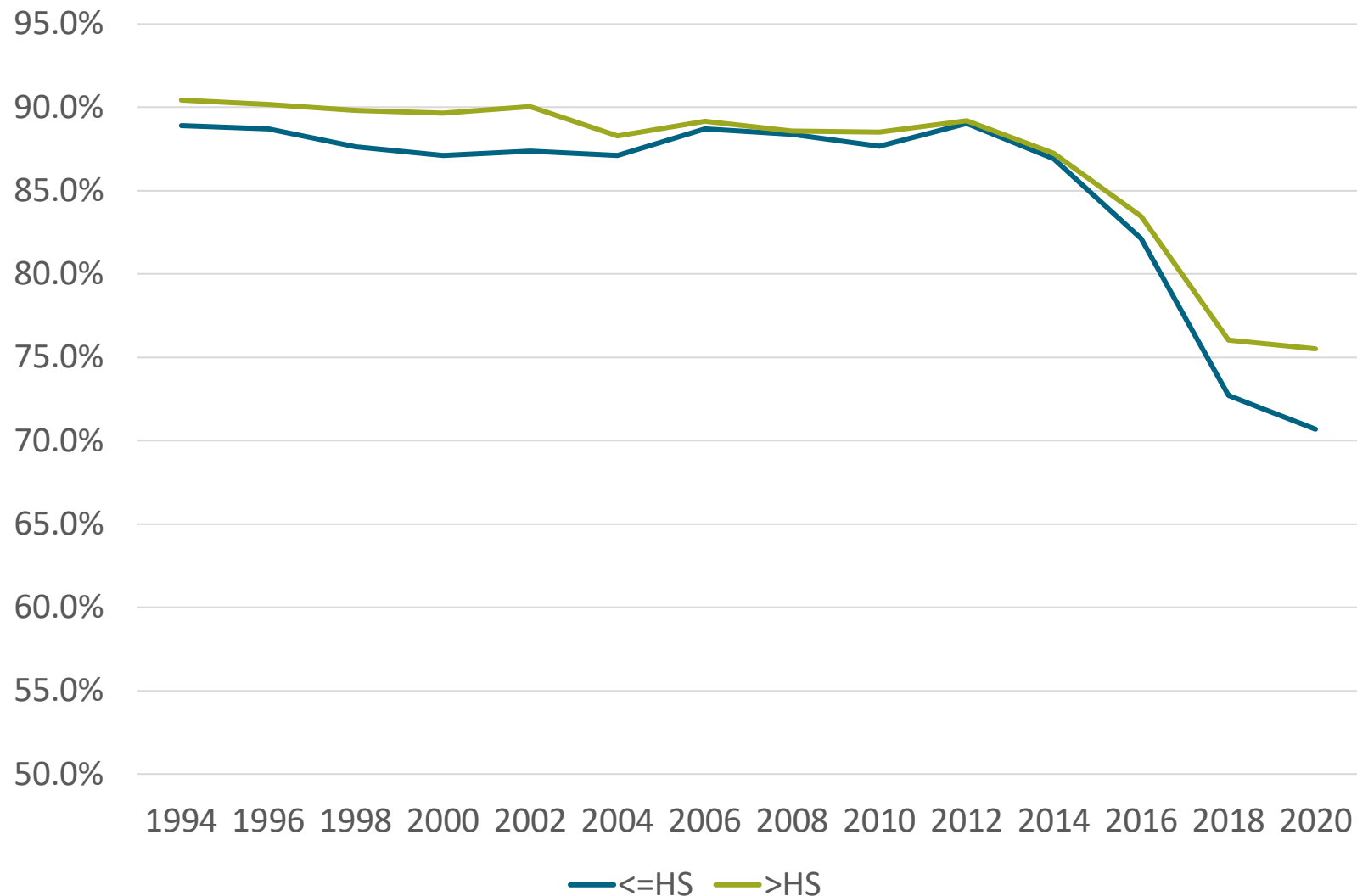


# CORE INTERVIEW RESPONSE RATE OF HRS PANEL PARTICIPANTS, BY RACE/ETHNICITY, 1994-2020



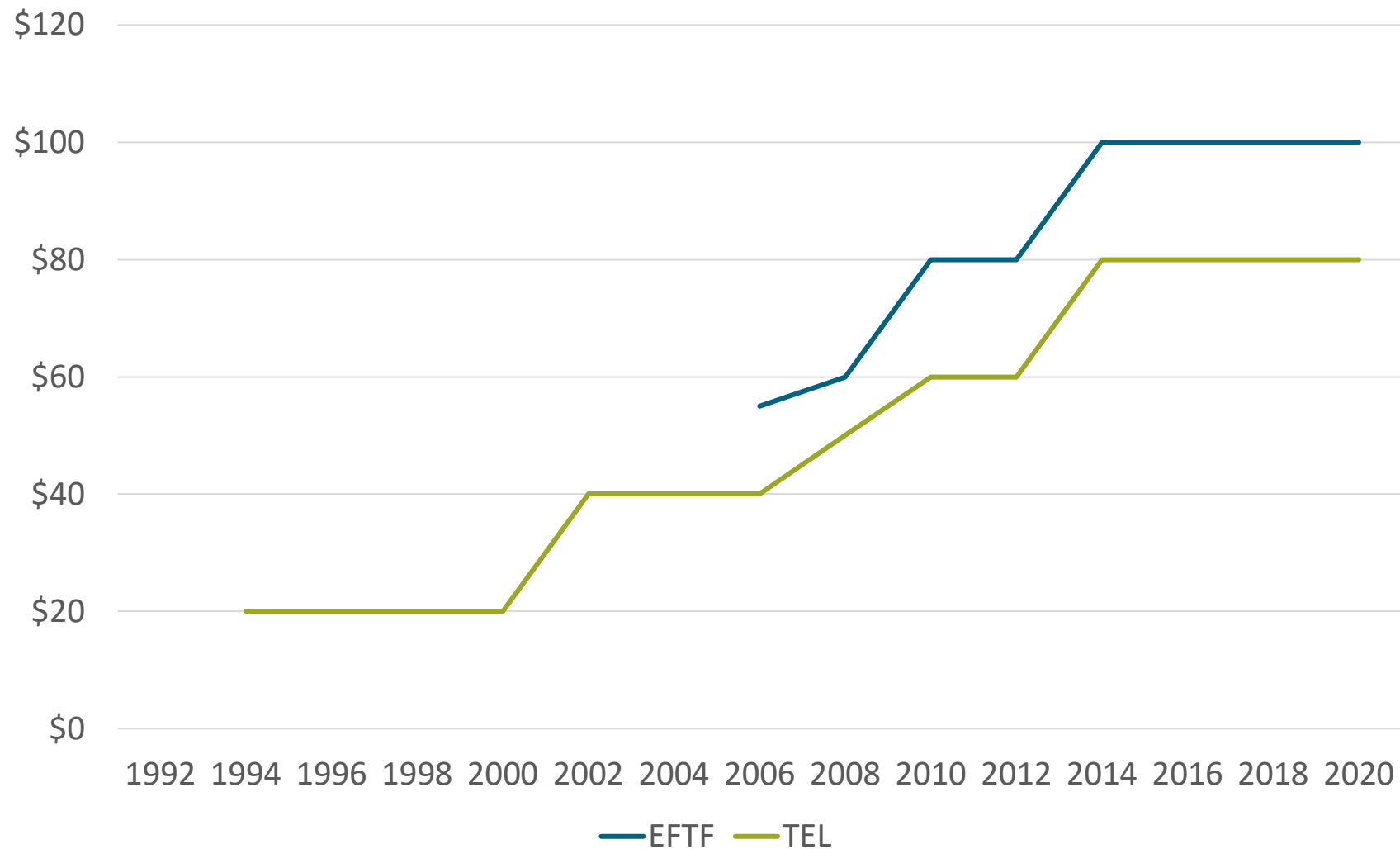
The trend toward lower RR has been stronger among white participants and has reversed the pattern of differentials from the early years of the survey.

# CORE INTERVIEW RESPONSE RATE OF HRS PANEL PARTICIPANTS, BY EDUCATION, 1994-2020



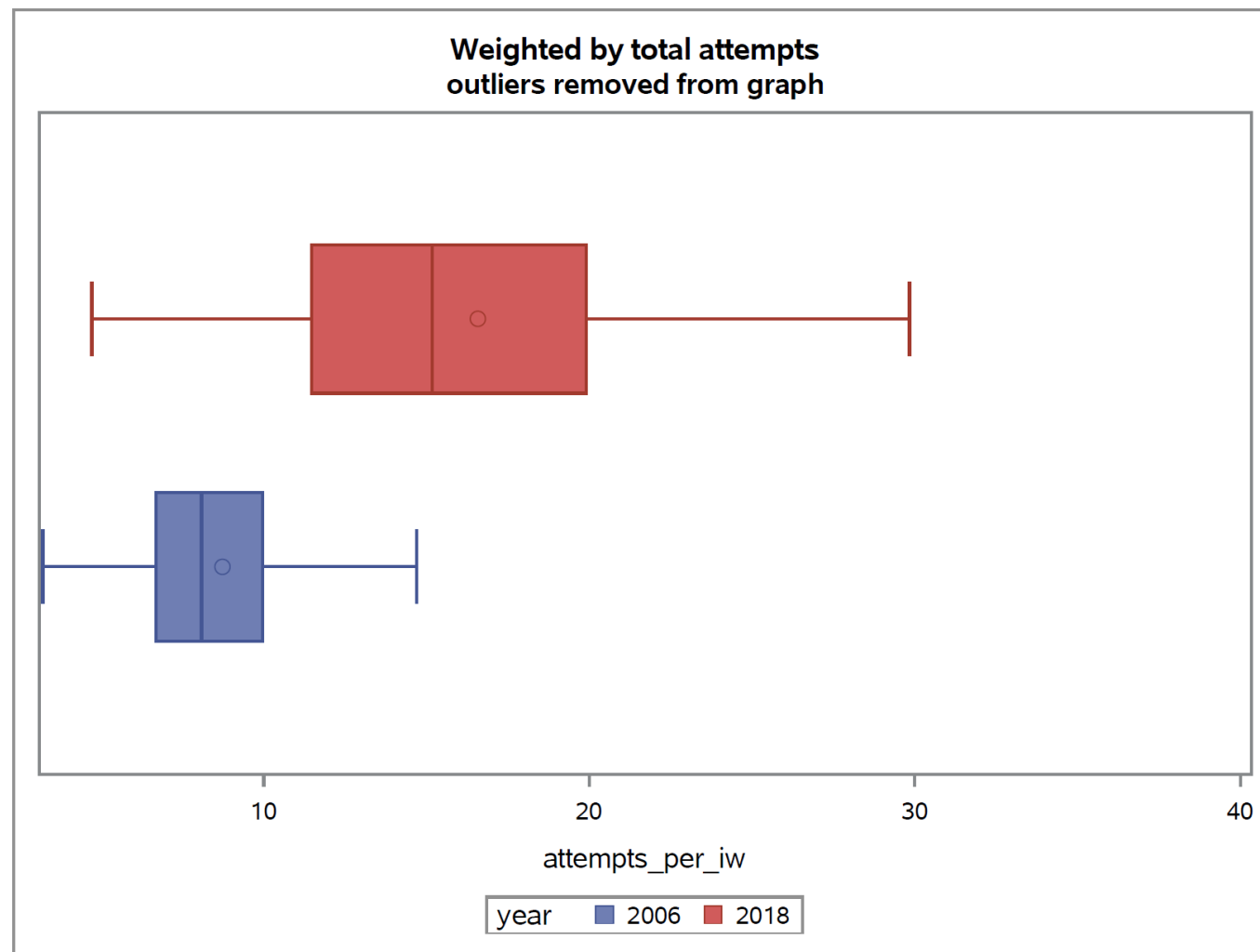
The trend toward lower RR has been stronger among less-educated participants and has reopened a pattern of differentials from the early years of the survey.

# HRS RESPONDENT INCENTIVE PAYMENT TO PANEL PARTICIPANTS FOR CORE INTERVIEW, 1994-2020



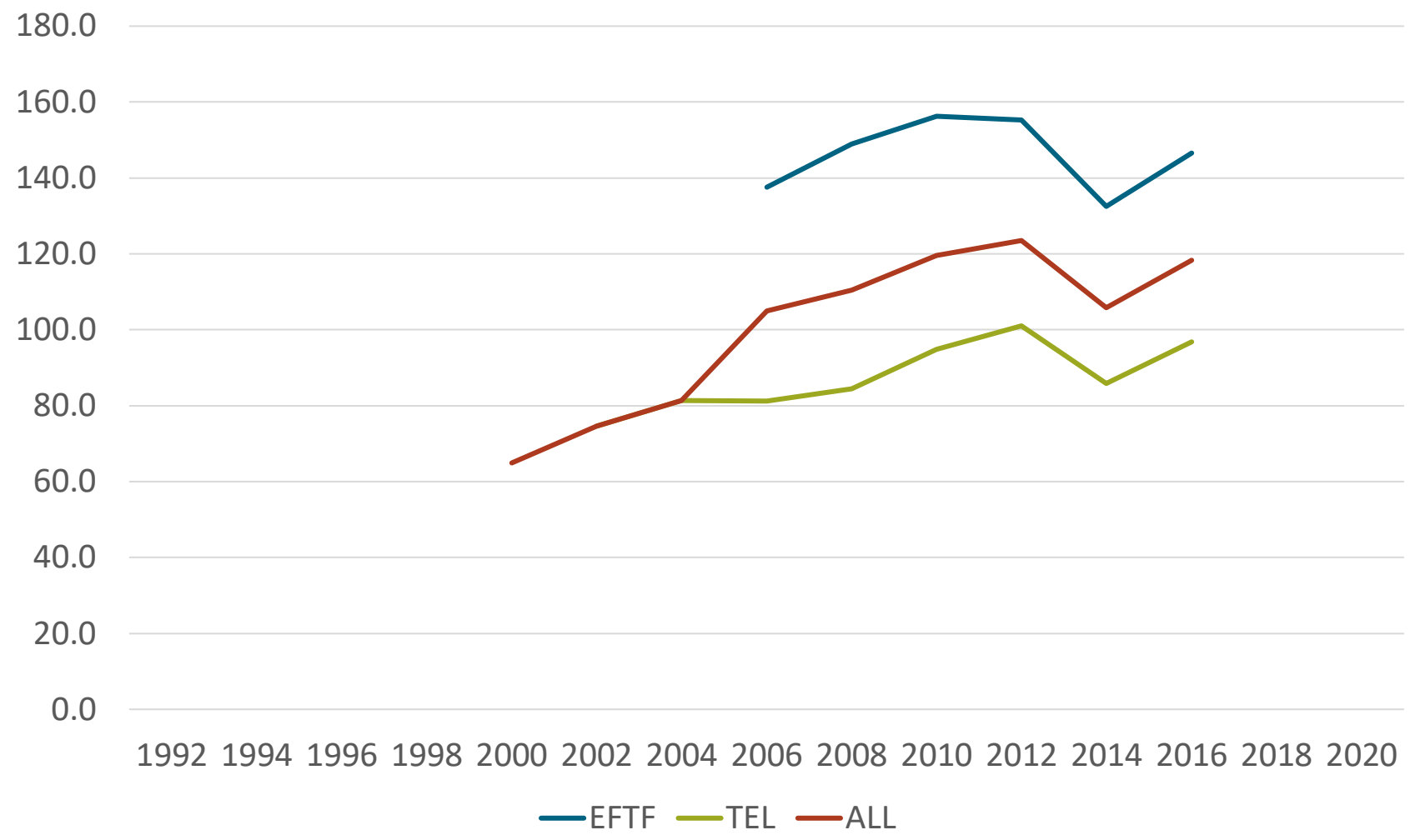
Incentive payments have risen, though not recently

# DISTRIBUTION OF INTERVIEWER EFFICIENCY, 2006 AND 2018



The variance in interviewer performance has increased somewhat. However, the shift of the entire distribution is the dominant trend.

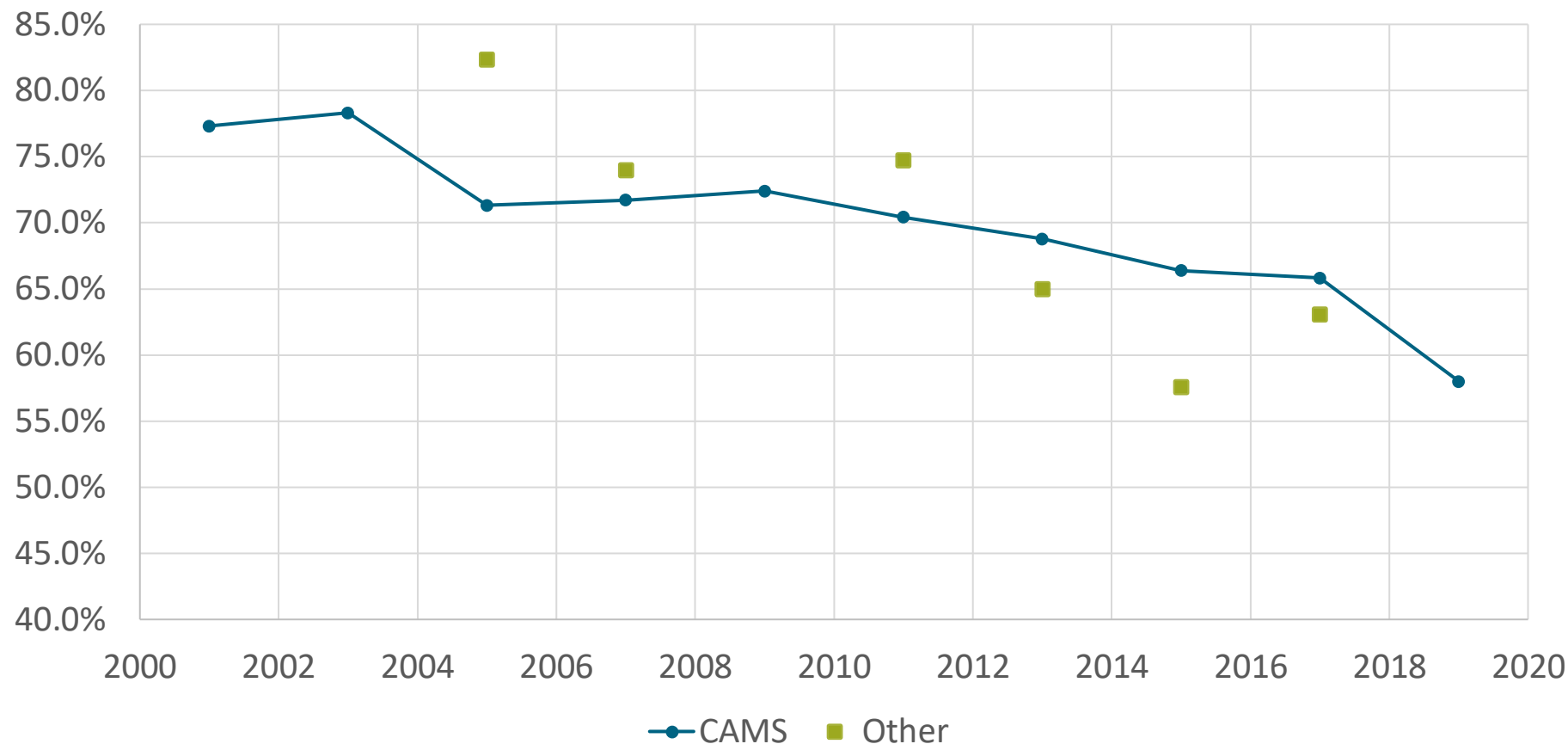
# INTERVIEW LENGTH IN MINUTES, BY MODE, 2000-2016



Interview length rose steadily from 2000 to 2012, with a jump in 2006 due to adding EFTF mode. A major effort in 2014 saw a 10% cut but trend has resumed.

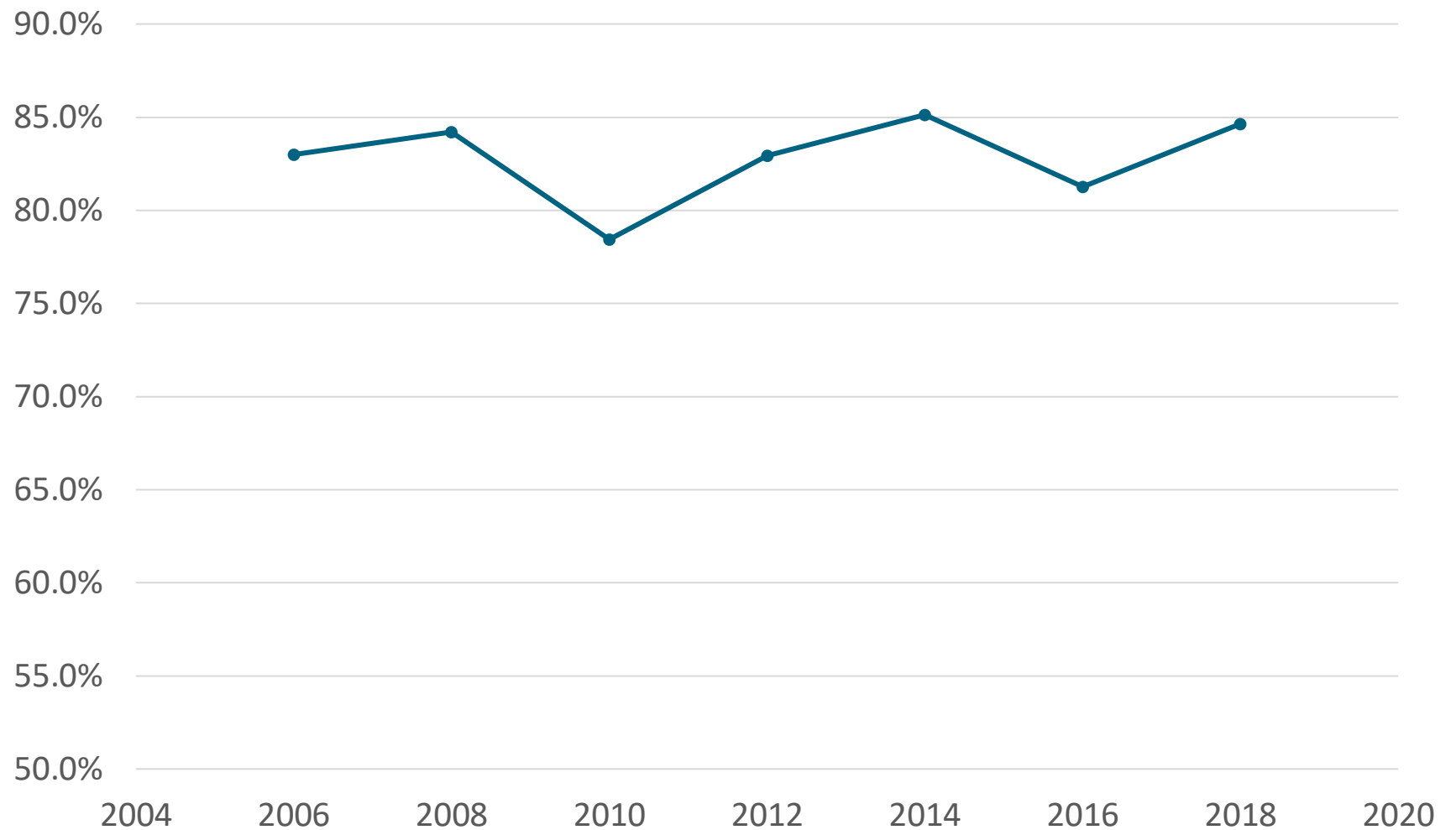
# RESPONSE RATES TO MAIL SURVEYS, 2001-2019

Mail survey RRs have also been trending down, for both the panel Consumption and Activities Survey and the other topics. Incentive payments have not changed from \$25



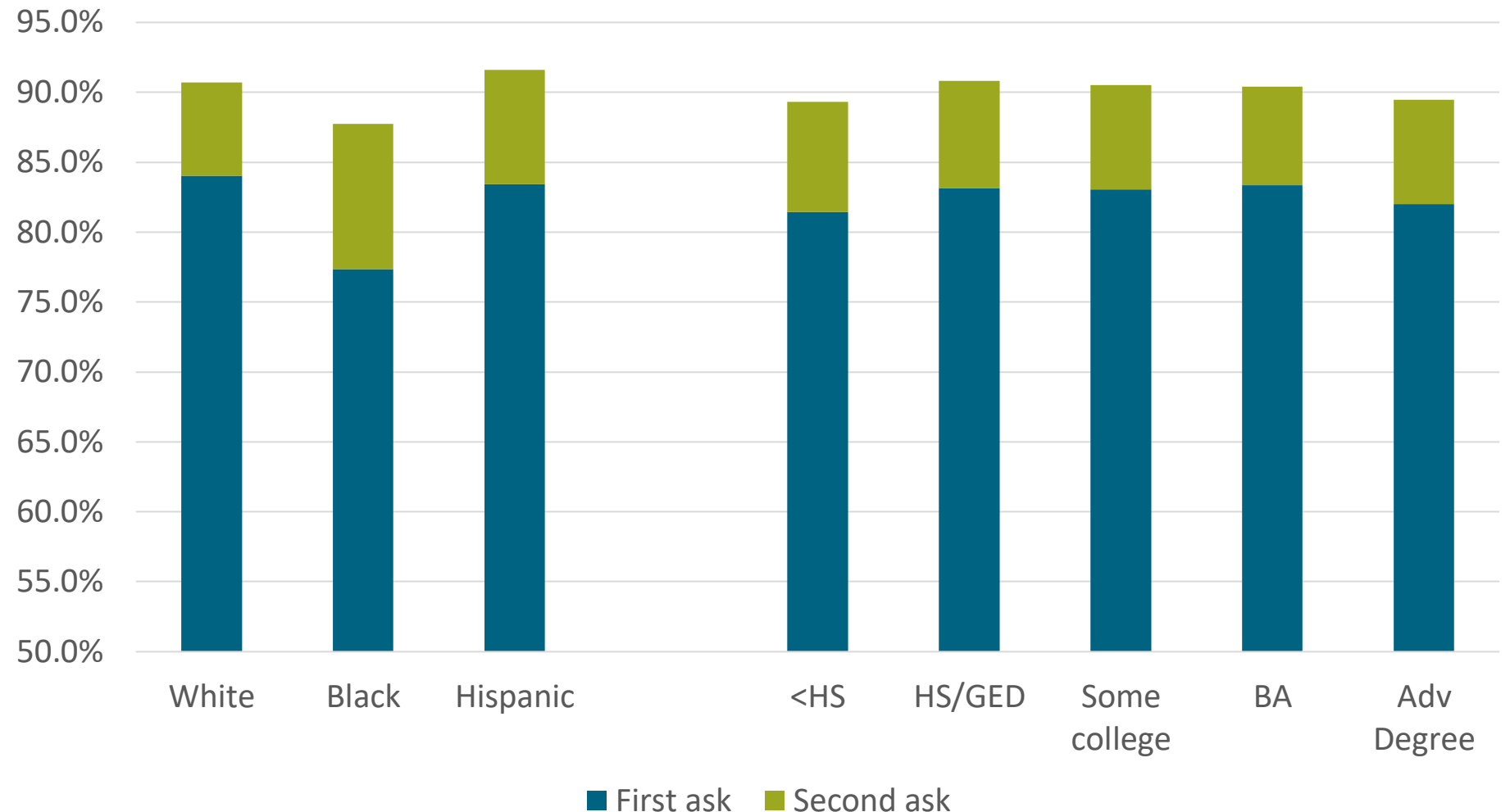
# SALIVARY DNA COMPLETION RATES FOR FIRST-TIME REQUESTS, 2006-2018

DNA consent and collection has been part of the new enhanced face-to-face survey since 2006. As collection directly follows consent there is very little difference between consent and completion rates. Rate are high and stable



# SALIVARY DNA COMPLETION RATES BY RACE/ETHNICITY AND EDUCATION, FIRST AND SECOND REQUESTS

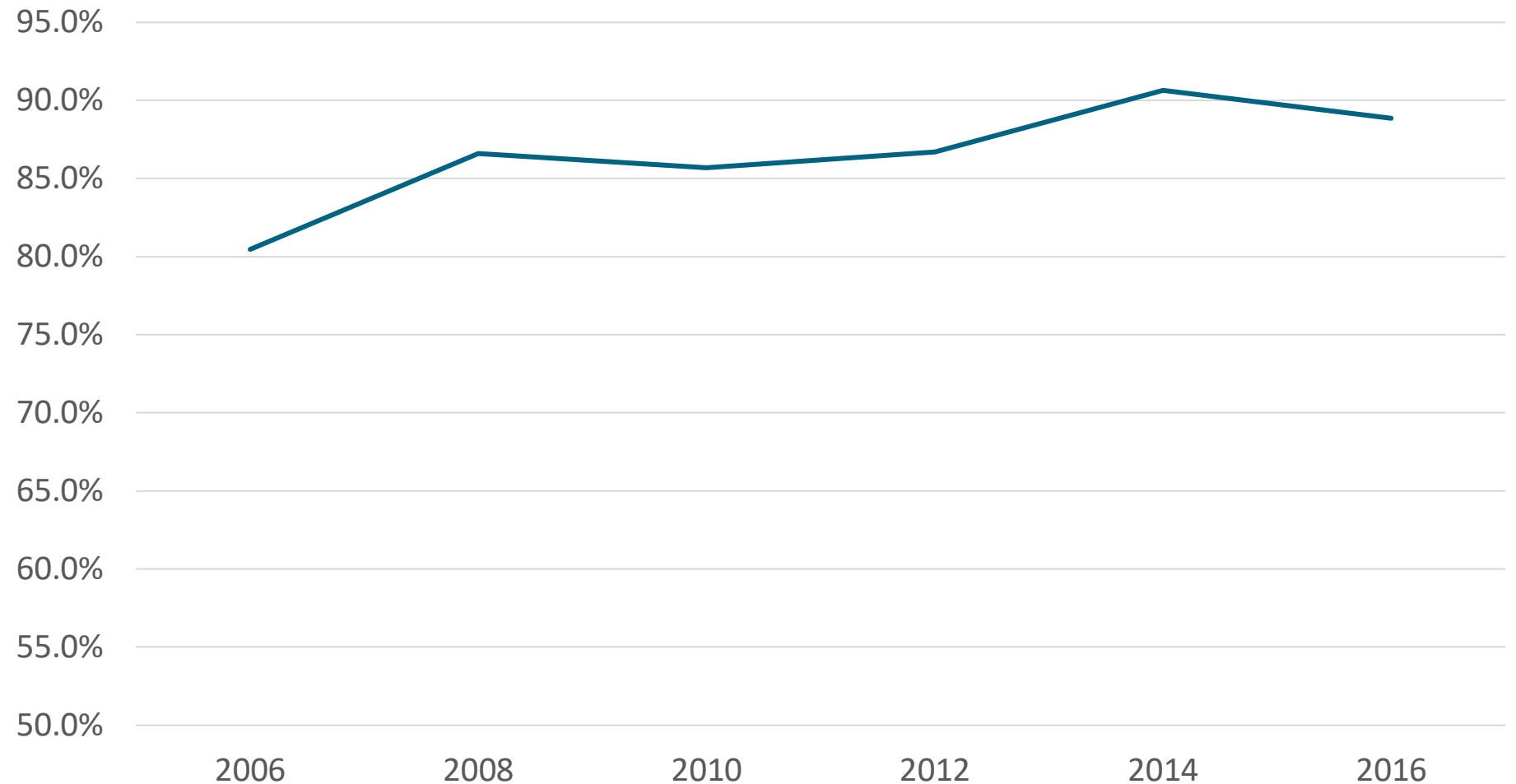
The ability to ask multiple times for consent improves overall completion rates. For DNA, this has been especially helpful with Black participants.





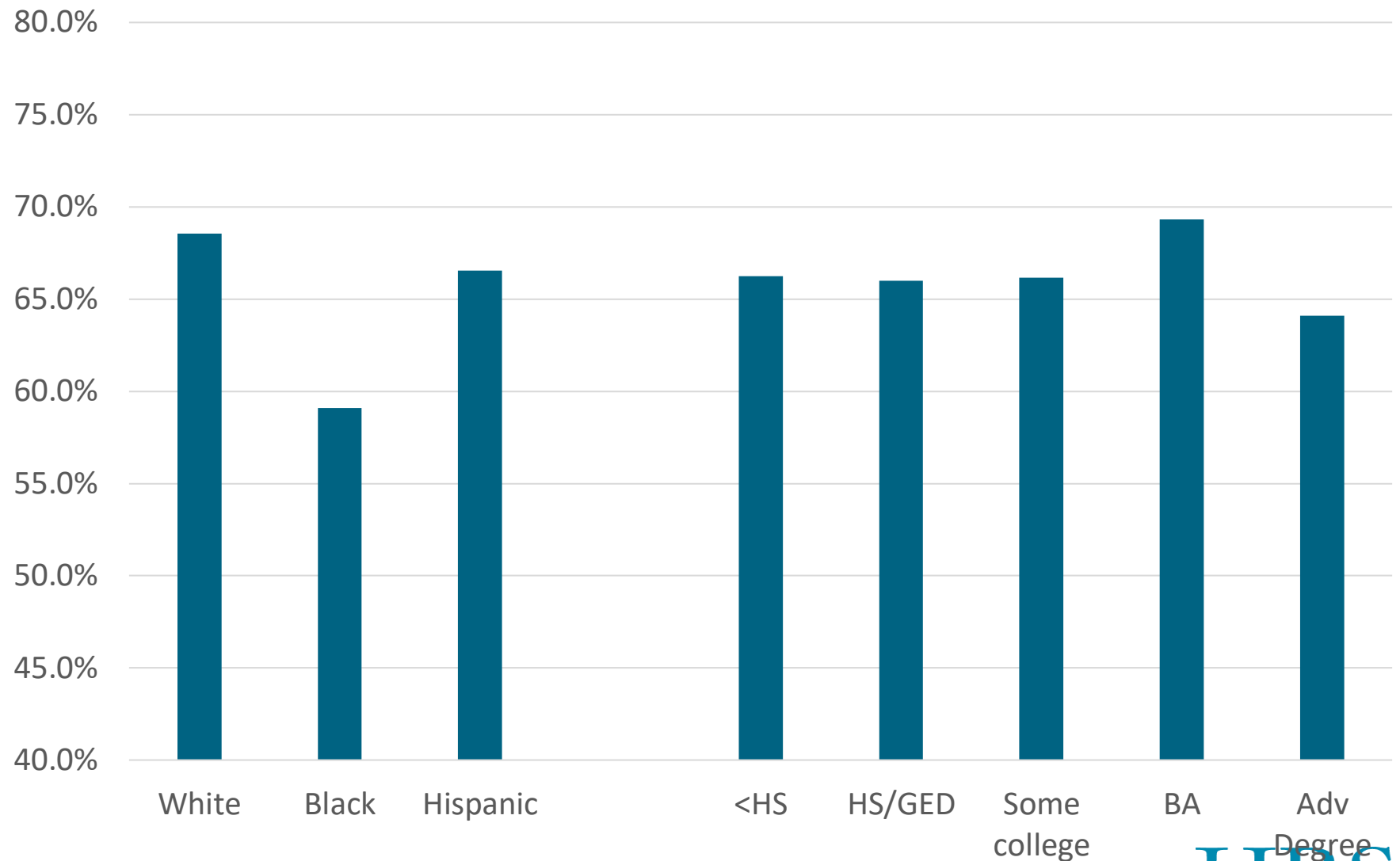
# DRIED BLOOD SPOT COMPLETION RATES, 2006-2018

Like DNA, DBS consent and collection has been part of the new enhanced face-to-face survey since 2006. Completion rates improved over time. We stopped DBS in favor of whole blood after 2016.



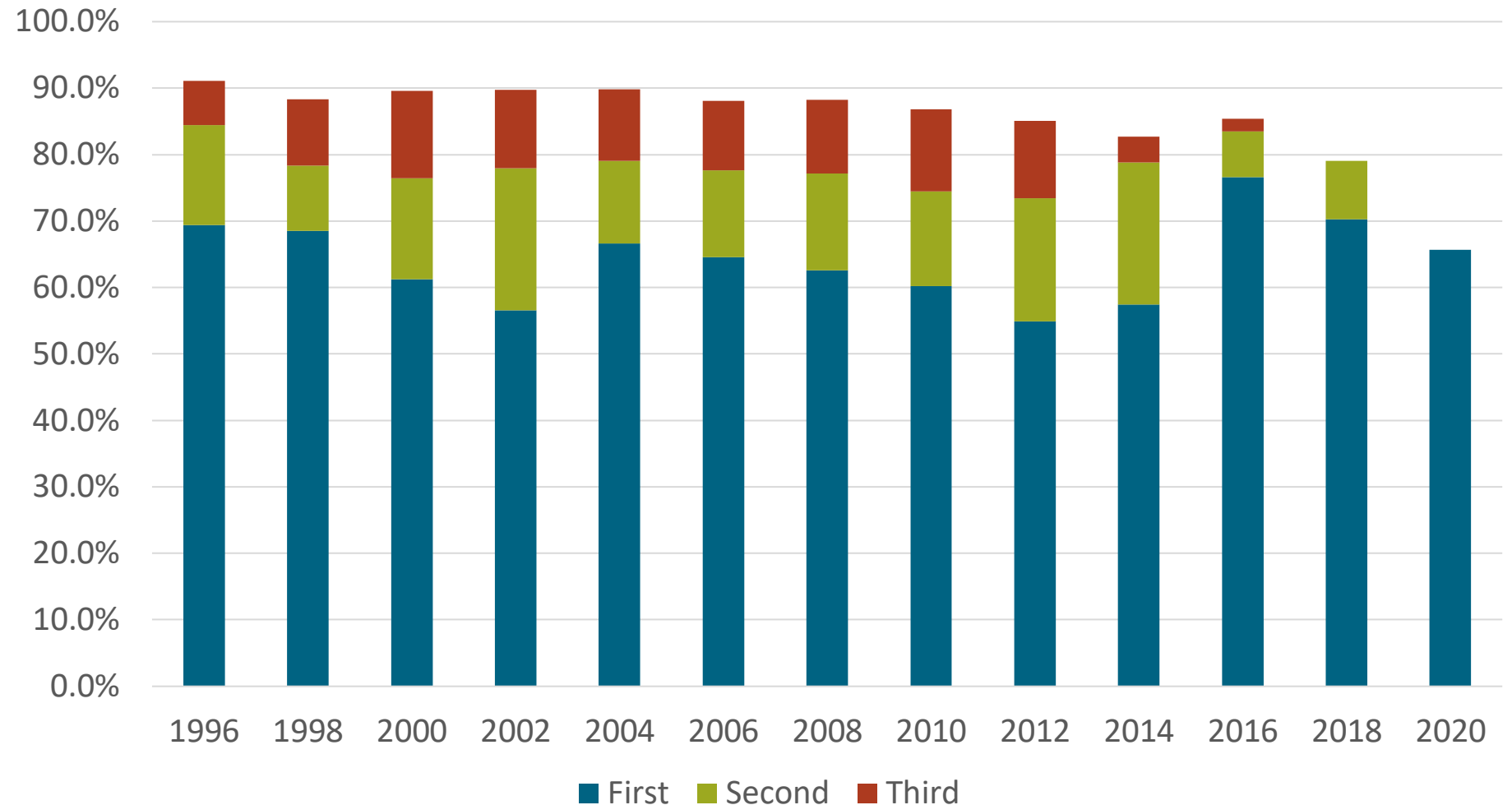
# WHOLE BLOOD COMPLETION RATES BY RACE/ETHNICITY AND EDUCATION, 2016

Whole blood is a 2-stage process with consent provided in the main interview, followed by scheduling and completing a home phlebotomy visit. 78% consented, and 85% of those completed, for 66% overall.



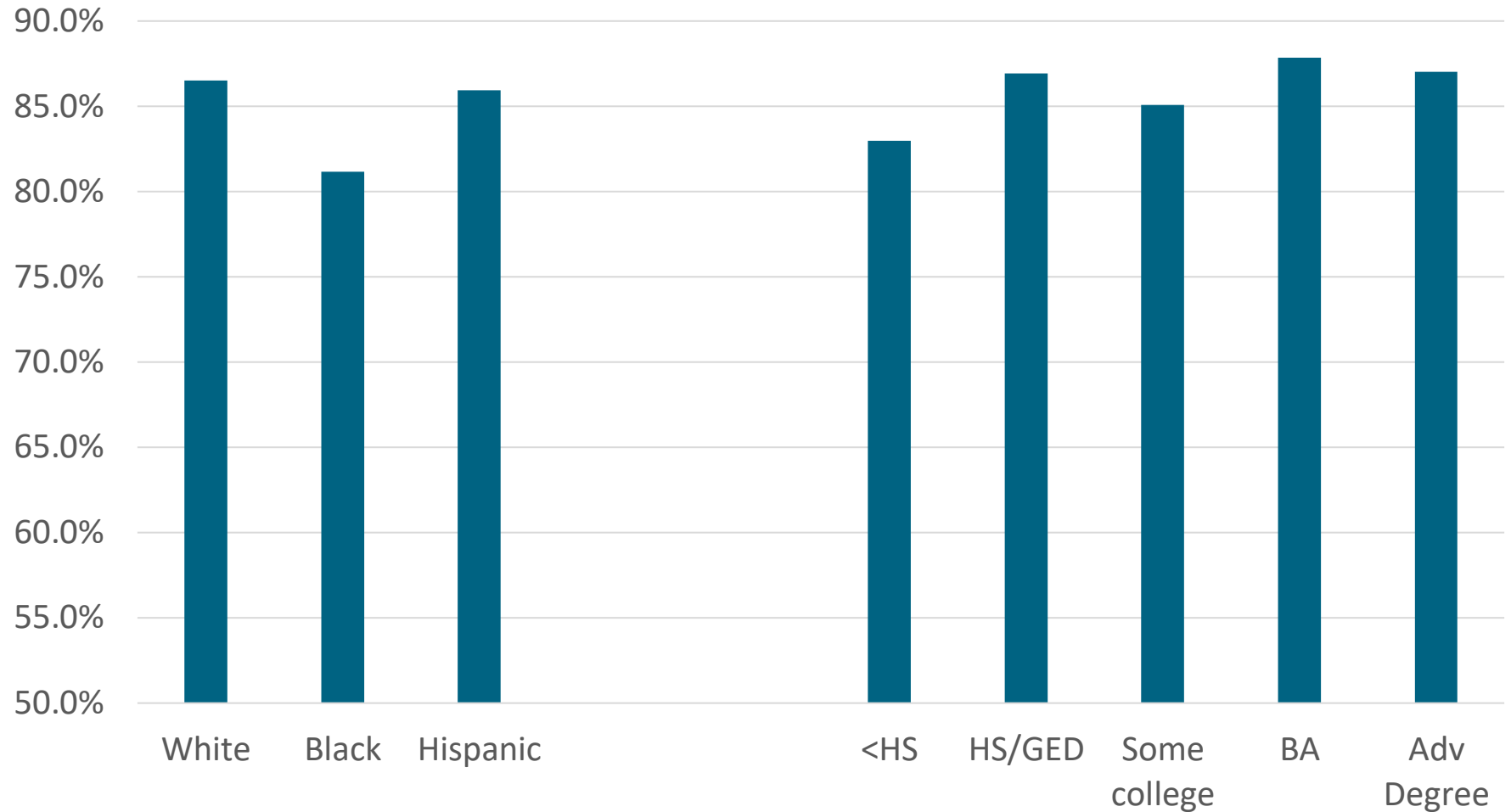
# CONSENT RATES FOR MEDICARE LINKAGE, BY YEAR FIRST ASKED AND NUMBER OF ASKS

Medicare consent is asked during the main interview and re-asked up to 3 times. Re-asks boost rates by 20-30 percentage points. A simplification of the consent improved first-time consents in 2016.



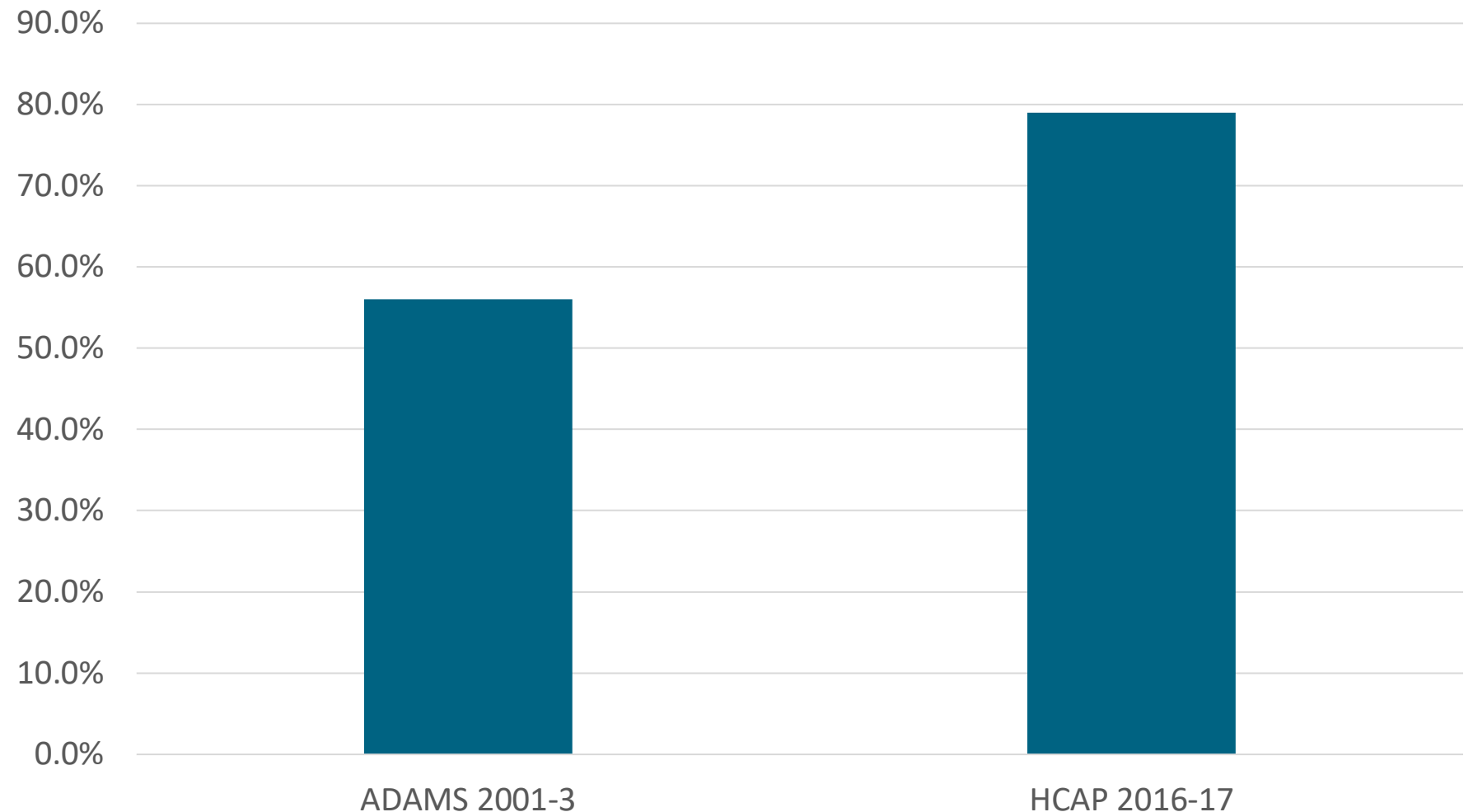
## CONSENT RATES FOR MEDICARE LINKAGE, BY RACE/ETHNICITY AND EDUCATION (b. <1950)

Medicare consent rates are somewhat lower for Black participants and those with less than high school education.



# RESPONSE RATES TO DEMENTIA ASSESSMENT: ADAMS AND HCAP

The HCAP was designed to be both much lower cost and higher participation than the earlier ADAMS study.



# THANK YOU!

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