

# Methodology Report for the 2021-2023 National Health Interview Survey – Teen 30-month File

Benjamin Zablotsky, Lindsey I. Black, Amanda E. Ng, Jonaki Bose, Jessica Jones, Aaron Maitland, and Stephen J. Blumberg

Division of Health Interview Statistics National Center for Health Statistics Hyattsville, Maryland

Centers for Disease Control and Prevention U.S. Department of Health and Human Services

(September 2024)

#### Abstract

This report is intended to accompany the 30-month Interactive Summary Health

Statistics for Teens dashboard that launched in 2024. It provides a methodological background

for the full 30 months of data collection of NHIS-Teen with a focus on survey procedures,

including nonresponse follow-ups. In addition, the report presents permission, participation,

and interview rates, identifying covariates associated with each. Finally, the report includes

information about the teenagers' experiences taking the survey.

## **Table of Contents**

Introduction	5
Sample Design	6
Obtaining Parental Permission	6
Permission for Supplemental Text and E-mail Reminders	8
Contacting, Recruiting, Assenting Teenagers	8
Participation Reminders	9
Obtaining Assent	10
Parental Permission Rate	10
Permission Rate for Supplemental Text and E-mail Reminders	13
Teenager Participation Rate	14
Participation Rate with Supplemental Text and E-mail Reminders	16
NHIS-Teen Survey Rate	17
Questionnaire	18
Survey Metrics	19
Break-offs and Login Attempts	19
Survey Length	20
Item Non-Response	21
Quality Control	22
Likely Wrong Teenager	
Excessive Questions Skipper	
NHIS-Teen Speeder	23
Survey Logistics	24
Devices Used	24
Location and Presence of Others at Time of Interview	24
Assistance Received	
Survey Experiences	25
Conclusions and Future Directions	26
References	28

Appendix A: Parental Postcard Brochure (English)	29
Appendix B: Parental Postcard Brochure (Spanish)	32
Appendix C: Parental Permission Flowchart	35
A TO ANNOT A STATE OF THE STATE	2.0
Appendix D: NHIS-Teen Invitation	36
Appendix E: Participation Reminders Received by Parent Permission Groups	39
Appendix F: NHIS-Teen Survey Rate by Select Characteristics	40
Appendix 1. Nins-reen survey hate by select characteristics	40
Appendix G: NHIS-Teen Questionnaire	42
••	

Suggested Citation: Zablotsky B, Black LI, Ng AE, Bose J, Jones J, Maitland A, and Blumberg SJ. Methodology Report for the 2021-2023 National Health Interview Survey – Teen 30-month File. Published September 2024.

#### I. Introduction

The National Health Interview Survey (NHIS) is the principal source of information on the health of the civilian noninstitutionalized population of the United States and one of the major data collection programs of the National Center for Health Statistics (NCHS), a part of the Centers for Disease Control and Prevention (CDC). The NHIS is a cross-sectional household interview that has been conducted annually since 1957. Using geographically clustered sampling techniques to select the sample of dwelling units for the NHIS, each month's sample is nationally representative (1). The interview is designed to be conducted via a computerassisted personal interview (CAPI) by trained field representatives from the United States Census Bureau (herein referred to as "interviewers") at an in-person visit or over the telephone. For each sampled household, basic demographics of the household members are collected and then one adult (the "Sample Adult") and one child aged 0-17 (the "Sample Child") are randomly selected for the collection of more detailed questions about their health. The Sample Adult answers on their own behalf, and a knowledgeable adult responsible for the Sample Child completes the Sample Child interview. As most respondents for the Sample Child interview are parents (approximately 94%), herein all references to parents can be considered interchangeable with Sample Child respondents.

Since Sample Children do not answer the questionnaire themselves, this may hinder the ability of the NHIS to explore topics about which teenagers may be more accurate reporters, including physical activity, sedentary activity, use of social media and electronic devices, eating habits, school activities, extracurricular activities, friendships, bullying, and risk behaviors such

as smoking and alcohol use (2-4). In fact, few existing large-scale, nationally representative surveys collect data directly from teenagers, and even fewer can link those data to extensive parent-reported data such as those collected by the NHIS. An online follow-back survey, known as NHIS-Teen, was developed as part of the CDC Public Health Data Modernization Initiative with the intention of filling this notable research gap by collecting health-related data directly from teenagers and linking it to the parent-reported data collected in the Sample Child interview.

#### II. Sample Design

The NHIS-Teen eligible sample consisted of Sample Children between the ages of 12-17 (herein referred to as teenagers) from households across the 50 states and the District of Columbia, whose parent provided permission for them to be invited to participate in NHIS-Teen at the end of the NHIS Sample Child interview.

## III. Obtaining Parent Permission

The process of obtaining parental consent occurred toward the end of the NHIS Sample Child interview. The Census interviewer provided a short description of NHIS-Teen to the parent and explained that it contains questions similar to those they just answered about their child's health. If the Sample Child interview was in-person, the interviewer handed the parent a postcard-sized brochure as part of the process for obtaining informed consent; if the interview was completed over the phone, the interviewer mentioned the brochure would be mailed to the household in a sealed envelope. This brochure provided an overview of the major topic areas that will be covered in NHIS-Teen as well as a phone number and e-mail address to

contact for additional questions. The postcard brochure is available in both English and Spanish (Appendix A and B).

After providing a study description, the interviewer requested verbal permission from the parent to contact their teenager directly to ask the teen to participate in NHIS-Teen and noted whether the parent provided permission in the CAPI instrument. The interviewer informed the parent that if their teenager participates in the online survey, their teenager's answers will not be provided to anyone, including the parent, without their teenager's permission. If the parent provided permission and the NHIS interview took place in-person, the interviewer subsequently gave the parent the NHIS-Teen study invitation to hand to their teenager. If the parent provided permission and the NHIS interview occurred over the phone, the interviewer mailed the invitation directly to the teen the same or next day. A flowchart of the steps involved in gaining parental permission is included later in the report (Appendix C).

In some instances, the parent asked their teenager directly at the time of the Sample Child interview if they would like to participate in NHIS-Teen, making their own permission contingent on their teenager's interest in participating. If the teenager refused, the interviewer asked the parent if they were willing to provide permission to leave the study invitation so the teenager could review the materials at a later date, in the event they change their mind after learning more about the study. These teenagers did not receive any subsequent invitations or reminders to participate in the study.

If a parent refused to provide permission or did not allow the interviewer to leave the study invitation, parents instead were given the brochure and instructed that they could call if they reconsidered (i.e. opt-in) or had additional questions.

#### **Permission for Supplemental Text and E-mail Reminders**

The recruitment procedures designed for NHIS-Teen included the collection of teen cell phone numbers and e-mail addresses, to follow-up with teenagers that have parent permission to participate but who have not yet completed the survey. When a parent provided permission for the teen to be invited to participate, the interviewer explained that additional follow-up invitations could be sent via text message or e-mail. The interviewer first asked if the teenager had a personal cell phone number that could be used for texting invitations and reminders. If the parent indicated that they did, the interviewer then asked for the cell phone number. Following this, the interviewer then asked if the teenager had a personal e-mail address that could be used for e-mailing invitations and reminders, and asked for it if the parent indicated they had one. Parents had the option to refuse to provide either or both their teenager's cell phone number and e-mail address.

## IV. Contacting, Recruiting, and Assenting Teenagers

As previously mentioned, after the completion of the Sample Child interview, the interviewer provided the parent with the NHIS-Teen study invitation in a sealed envelope if the interview was in person, or mailed the invitation if the interview took place over the telephone. If the teenager was present at the time of the interview and the parent gave their approval, the interviewer may have attempted to hand the invitation directly to the teenager. The invitation

described the study, how the teenager was chosen for the study, what type of incentive would be given upon completion (\$5 cash), and an estimate of how long it would take to complete the survey. The invitation also indicated that the study was voluntary and that any question could be skipped. It also provided some common questions with answers. The invitation included the NHIS-Teen survey website URL and a unique Login ID which was needed for the teenager to access the survey. A copy of this invitation can be found later in the report (Appendix D).

#### **Participation Reminders**

In the weeks following the initial NHIS-Teen invitation, nonresponders received a series of reminders to participate based on the contact information available (traditional mail, text message or e-mail). Multiple modes of communication were used simultaneously if available. These communications were sent in batches due to operational limitations, and therefore the length of time between the receipt of the initial invitation and reminders to participate may have varied.

If a parent provided their teen's cell phone and/or e-mail address, their teen had the potential to receive up to four follow-up reminder messages via text and/or four follow-up reminder e-mails to complete the survey. Once a teenager completed NHIS-Teen they no longer received follow-up reminders. All teens who had not completed NHIS-Teen, regardless of whether permission was given to text and/or e-mail, were mailed a follow-up letter containing a \$5 non-conditional cash incentive and a reminder to complete the survey. A final mailed reminder to participate in NHIS-Teen was sent to the remaining nonrespondents in a mailed pressure-sealed postcard. All teenagers who completed the online survey received a thank you

letter containing a \$5 incentive approximately 2 to 4 weeks after completing the survey. A flowchart of nonresponder follow-up reminders by parent permissions to text or email can be found later in the report (Appendix E).

Of note, teenagers whose parents did not provide permission for texting and e-mailing only received up to two mailed reminders: the letter containing the \$5 non-conditional cash incentive and the pressure-sealed postcard.

During January 2023, a subsample of teens whose parents provided permission for their teenager to participate between July 2022 and December 2022 that had not yet completed NHIS-Teen were mailed a paper questionnaire with a prepaid return envelope. Instructions with this mailing included the option to complete the survey over the web. Starting in 2023, paper questionnaires and prepaid return envelopes were always included with the first mailed reminder letter which contained the \$5 non-conditional incentive.

#### **Obtaining Assent**

Once the teen logged into the NHIS-Teen survey webpage they saw the message "By logging in you agree to participate in NHIS-Teen". Teenagers thereby provided assent by entering their unique Login ID into the NHIS-Teen welcome webpage and pressing the "Login" button.

#### V. Parental Permission Rate

A parent was considered to have given permission if they answered "yes" to the question in the NHIS interview, "May we ask [your child] to participate in this survey?". From

July 1<sup>st</sup> 2021 to December 31<sup>st</sup> 2023, a total of 7,027 parents were asked for permission, of which 60.4% agreed (n=4,242) for their teenager to be contacted to participate in NHIS-Teen.

As previously mentioned, a change in the NHIS-Teen parental permission protocol allowed interviewers to leave a study invitation for teenagers to participate in NHIS-Teen if the teenager declined to participate at the time of the NHIS interview. In such circumstances, parents were asked "May we [leave/mail] the initial letter in case [your child] changes [his/her/their] mind?" An affirmative to this question constituted giving permission. This question was asked in about 5% of interviews, and, in these instances, parents gave permission approximately 32% of the time.

Table 1 provides the overall parent permission rate by teenager, family, and NHIS Sample Child interview characteristics.

Table 1. Parent permission rate by teenager, family, and NHIS Sample Child interview characteristics

Characteristic	(%) SE	χ² value
Overall	60.4 (0.6)	
Teenager characteristics		
Sex		0.18
Boys	60.6 (0.8)	
Girls	60.6 (0.8)	
Age group (years)		25.97**
12-14	57.2 (0.9)	
15-17	63.1 (0.8)	
Race and Hispanic origin		6.38
Asian, non-Hispanic	55.5 (2.3)	
Black, non-Hispanic	69.2 (1.8)	
White, non-Hispanic	61.2 (0.8)	
Other, non-Hispanic / multiracial	61.5 (2.3)	
Hispanic <sup>1</sup>	60.3 (1.1)	
Developmental disability <sup>2</sup>		0.24
Yes	59.9 (1.2)	
No	60.6 (0.7)	
Family characteristics		
Family structure		4.15*
Two-parent family	61.3 (0.7)	
Other <sup>3</sup>	58.8 (1.0)	
Highest education of resident parent <sup>4</sup>		0.96
High school diploma, GED or less	61.0 (1.2)	
Some college	59.4 (1.2)	
College degree or higher	60.5 (0.8)	
Family income <sup>5</sup>		
Less than 200% of federal poverty level	60.8 (1.0)	0.56
200-400% of federal poverty level	59.7 (1.1)	
Greater than 400% of federal poverty level	60.5 (0.9)	
NHIS Sample Child interview characte	ristics	
Mode		21.23*
In-person	63.3 (0.8)	
Telephone	57.9 (0.8)	
Language <sup>6</sup>		0.12
Any Spanish	60.9 (2.0)	
No Spanish	60.2 (0.6)	

<sup>&</sup>lt;sup>1</sup>Teenagers of Hispanic origin may be of any race.

<sup>&</sup>lt;sup>2</sup> Teenagers are considered to have a developmental disability if they were diagnosed with one or more of the five selected developmental disabilities: Attention Deficit Disorder (ADD) or Attention-Deficit/Hyperactivity Disorder (ADHD), autism spectrum disorder, intellectual disability, learning disability, or other developmental delay.

<sup>&</sup>lt;sup>3</sup> Includes single parent and nonparent families.

- <sup>4</sup> Nonparent families are not included.
- <sup>5</sup> Imputed when missing.
- <sup>6</sup> Interviews where language was not ascertained are not included.
- \* p<.05 \*\*p<.001

Parents of younger teenagers (12-14 years of age) were significantly less likely to give permission than parents of older teenagers (15-17 years of age) (57.2% vs. 63.1%). As mentioned previously, Sample Child interviews are conducted either in-person (44%) or over the telephone (56%). Parent permission rate was significantly higher among interviews completed in-person than over the phone (63.3% vs. 57.9%).

#### **Permission Rate for Supplemental Text and E-mail Reminders**

Of the 60.4% of parents who gave permission for their teenager to be invited to participate, 42.0% gave permission for their teenager to be texted, while 25.6% of parents gave permission for their teenager to be e-mailed. In total, about half of all teenagers had their parent's permission to receive either text or e-mail reminders or both (48.7%).

Table 2 presents the rate of parental permission for texting, e-mailing, both texting and e-mailing, or neither, by the mode of the NHIS Sample Child interview (in-person versus telephone). Parents were more likely to give permission for their child to be texted (49.2% vs. 35.0%) and e-mailed (30.5% vs. 20.9%) if the NHIS Sample Child interview was in-person.

Table 3 provides permission rates by the teenager's age for the different modes of reminder follow-ups. Parents of older teenagers (15-17 years) were more likely to give permission for their child to be texted (46.4% vs. 36.4%) and e-mailed (28.5% vs. 21.9%) than parents of younger teenagers (12-14 years).

Table 2. Percent distribution of parent permission rate by ability to text, e-mail, by NHIS Sample Child interview mode

•			
Reminder Groups	Overall	In-person	Telephone
	% (SE)	% (SE)	% (SE)
Ability to text, e-mail	48.7 (0.8)	56.4 (1.1)	41.4 (1.1)
Any text	42.0 (0.8)	49.2 (1.1)	35.0 (1.0)
Any e-mail	25.6 (0.7)	30.5 (1.0)	20.9 (0.9)
Text and e-mail	18.8 (0.6)	23.3 (1.0)	14.6 (0.8)
No ability to text, e-mail	51.3 (0.8)	43.6 (1.1)	58.5 (1.1)

Table 3. Percent distribution of parent permission rate by ability to text, e-mail, by age group

-0-0-1			
Reminder Groups	Overall	12-14 years	15-17 years
	% (SE)	% (SE)	% (SE)
Ability to text, e-mail	48.7 (0.8)	43.2 (1.2)	53.1 (1.0)
Any text	42.0 (0.8)	36.4 (1.1)	46.4 (1.0)
Any e-mail	25.6 (0.7)	21.9 (1.0)	28.5 (1.0)
Text and e-mail	18.8 (0.6)	15.1 (0.8)	21.8 (0.9)
No ability to text, e-mail	51.3 (0.8)	56.8 (1.2)	46.9 (1.0)

#### VI. Teenager Participation Rate

When teenagers get through the entire survey, the cases are considered to be "complete". When they get through at least the first section, but not the entire survey, the cases are considered to be "sufficient partials". When they start the survey, but do not get through the first section, the cases are considered to be "insufficient partials". Teenagers who never start the survey or are removed for quality control reasons (see section VIII for more information) are considered to be nonrespondents.

The teenager participation rate, including both complete interviews and sufficient partials, was approximately 46% (n=1,958). The participation rate is defined as the percent of cases that are considered completes or sufficient partials among those whose parent provided permission for the teen to be contacted to participate in NHIS-Teen.

Table 4. Teenager participation rate by teenager, family, and NHIS Sample Child interview characteristics

Characteristic	(%) SE	χ² value
Overall	46.2 (7.7)	
Teenager characteristics		
Sex		16.87*
Boys	43.1 (1.1)	
Girls	49.4 (1.1)	
Age group (years)		0.87
12-14	47.0 (1.2)	
15-17	45.5 (1.0)	
Race and Hispanic origin		80.26*
Asian, non-Hispanic	57.3 (3.0)	
Black, non-Hispanic	36.5 (2.3)	
White, non-Hispanic	51.2 (1.1)	
Other, non-Hispanic / multiracial	45.3 (3.1)	
Hispanic <sup>1</sup>	38.3 (1.4)	
Developmental disability <sup>2</sup>		13.51*
Yes	41.0 (1.6)	
No	47.7 (0.9)	
Family characteristics		
Family structure		36.06*
Two-parent family	49.6 (1.0)	
Other <sup>3</sup>	40.0 (1.3)	
Highest education of resident parent <sup>4</sup>		133.20*
High school diploma, GED or less	34.9 (1.5)	
Some college	40.5 (1.5)	
College degree or higher	55.2 (1.1)	
Family income <sup>5</sup>		77.88*
Less than 200% of federal poverty level	37.5 (1.3)	
200-400% of federal poverty level	45.3 (1.4)	
Greater than 400% of federal poverty level	53.5 (1.2)	
NHIS Sample Child interview characte	eristics	
Mode		3.81
In-person	44.6 (1.1)	
Telephone	47.6 (1.1)	
Language <sup>6</sup>		17.67*
Any Spanish	35.6 (2.5)	
No Spanish	47.0 (0.8)	

<sup>&</sup>lt;sup>1</sup>Teenagers of Hispanic origin may be of any race.

<sup>&</sup>lt;sup>2</sup> Teenagers are considered to have a developmental disability if they were diagnosed with one or more of the five selected developmental disabilities: Attention Deficit Disorder (ADD) or Attention-Deficit/Hyperactivity Disorder (ADHD), autism spectrum disorder, intellectual disability, learning disability, or other developmental delay.

<sup>&</sup>lt;sup>3</sup> Includes single parent and nonparent families.

- <sup>4</sup> Nonparent families are not included.
- <sup>5</sup> Imputed when missing.
- <sup>6</sup> Interviews where language was not ascertained are not included.
- \* p<.001

Among teenagers whose parents provided permission for them to be invited to participate in NHIS-Teen, girls were more likely than boys to complete NHIS-Teen (49.4% vs. 43.1%, Table 4). There were notable disparities by the teenager's race and Hispanic origin. Asian, non-Hispanic teenagers (57.3%) and White, non-Hispanic teenagers (51.2%) were more likely to complete NHIS-Teen than Black, non-Hispanic (36.5%) and Hispanic teenagers (38.3%). Teenagers living in families with two parents were more likely to complete NHIS-Teen than teenagers in nonparental care or living with one parent (49.6% vs. 40.0%). Teenagers with a developmental disability were less likely to complete NHIS-Teen than their peers without a developmental disability (41.0% vs. 47.7%). Teenagers living in families with higher educated parents and those with higher family incomes were more likely to participate in NHIS-Teen. Teenagers whose parent completed any part of the NHIS Sample Child interview in Spanish were more likely to complete NHIS-Teen compared versus to teenagers where none of the NHIS Sample Child interview was in Spanish (35.6% vs. 47.0%).

#### Participation Rate with Supplemental Text and E-mail Reminders

Teenagers whose parents provided permission for text and e-mail participation reminders received up to four texts and four e-mails over the course of the NHIS-Teen study period in addition to up to three paper mailings (including the initial invitation). Once a teenager completed NHIS-Teen they no longer received reminders of any kind, whether it be through mail, e-mail, or text.

The participation rate among teenagers whose parents gave permission for them to receive text reminders was 52.2% while the participation rate among teenagers whose parents gave permission for them to receive e-mail reminders was 58.6%. Conversely, teenagers who parents did not give permission for either text or e-mail reminders had a participation rate of 40.4%. A breakdown of participation rates based on all participation reminder groups can be found in Table 5.

Table 5. Teenager participation rate by ability to text, e-mail reminders

Reminder Groups	% (SE)
Ability to text, e-mail	53.0 (1.1)
Any text	52.2 (1.2)
Any e-mail	58.6 (1.5)
Text and e-mail	58.5 (1.8)
No ability to text, e-mail	40.4 (1.1)

#### VII. NHIS-Teen Survey Rate

The NHIS-Teen survey rate can be calculated by multiplying the parent permission rate by the teenager participation rate. For the 30-month data file, the NHIS-Teen survey rate was 27.9% (the product of 60.4% of the parents providing permission to contact the teen and 46.2% of those teens participating). Alternatively, the survey rate can also be calculated by dividing the total number of complete and sufficient partial NHIS-Teen interviews by the total number of parents who were asked for permission to invite their teenagers to participate in NHIS-Teen. Table 6 includes the final status of all NHIS-Teen cases.

Table 6. Final status of NHIS-Teen cases

	n	%
Complete surveys	1881	26.8
Sufficient partial surveys	77	1.1
Insufficient partial surveys	52	0.7
Nonrespondents	2232	31.8
Ineligible (parental permission not given)	2785	39.6
Total	7027	100.0

NOTE: Of the 1881 complete surveys, 200 were completed by paper questionnaire (10.6%). There were no partial surveys completed by paper questionnaire. It is unknown how many paper questionnaires were started but not returned.

Many predictors of the NHIS-Teen survey rate mirrored that of the teen participation rate, including sex, race and Hispanic origin, presence of a developmental disability, family structure, highest education of the resident parent(s), family income, and NHIS Sample Child interview language. However, the survey rate did not differ by whether the NHIS Sample Child interview was by telephone (28.2%) or in-person (27.6%). A table exploring the NHIS-Teen survey rate by teenager, family, and NHIS Sample Child interview characteristics can be found later in the report (Appendix F).

#### VIII. Questionnaire

NHIS-Teen contains 95 questions presented in five sections. Typically, teenagers do not receive all 95 questions, as they may be skipped out of some questions depending on their responses to previous questions. Teenagers can skip any question they do not want to answer, and help text is provided throughout the survey to provide additional details and definitions. If a teenager has trouble navigating the survey or has general questions about the survey, there is a toll-free number they can call. A copy of the NHIS-Teen questionnaire that was in the field during data collection can be found later in the report (Appendix G).

Table 8 lists the topics covered in each of the five sections, and the total number of questions in each section.

**Table 8. NHIS-Teen Questionnaire Content** 

Section	n Name	Topics Covered	Number of Questions
1.	Your Health	General health and well-being	24
		Height and weight	
		Physical activity	
		Sleep	
		Screen time	
		Concussions	
2.	Your Health Care	Health care utilization	18
		Content of care	
		Health care access	
		Complementary and alternative health	
3.	Your Mental Health and Supports	Mental health care use	21
		Unmet health needs	
		Social support	
		Cognition	
		Behavior	
		Depression symptoms	
		Anxiety symptoms	
4.	Your Experiences	Stressful life events	17
		Bullying	
		Everyday discrimination	
5.	About You	Demographics	15
		Survey environment	
		Experience with survey	

## IX. Survey Metrics

#### **Break-offs and Login Attempts**

Both insufficient and sufficient partials are considered to be interview break-offs.

Approximately 7% of all teens that started NHIS-Teen surveys were break-offs (n=129). Given the small number of break-offs, there is insufficient sample to explore whether there are statistically significant differences in the break-off rate by subgroups.

Among break-offs, 87.6% logged into the NHIS-Teen website once, 8.5% logged in twice, and 3.9% logged in three or more times. Among completes, 89.9% logged into the NHIS-Teen website once, while 8.3% logged in twice, and 1.7% logged in three or more times.

#### **Survey Length**

Data are collected to measure the length of time a respondent was on each page of the survey instrument among all web participants. It can be challenging to measure the length of time respondents take to complete an online survey due to variability in the presence of respondent multi-tasking, distractions, technical issues, interruptions, and the inability to account for these external factors. As a result, median length may be more meaningful than mean length. The median time to complete NHIS-Teen was 15 minutes among submitted cases. Table 9 presents timing data in minutes, including both median and mean time. The table is further broken out by whether the teenager logged-in once to the NHIS-Teen website or multiple times before submitting their answers. It is worth noting that teenagers who were idle for 15 minutes were automatically logged out of the survey, which may have led to an overinflation in survey times among teens who logged-in multiple times.

Table 9. NHIS-Teen timing data in minutes

	Median	Mean
All cases	15.0	18.0
One login	15.0	17.4
Multiple logins	18.0	23.8

#### **Item Non-Response**

Item non-response can be analyzed at either the individual-level or the question-level.

The first provides insight in the number of questions that a teenager typically skips, while the second gives a sense of what questions may be problematic.

Item non-response analysis at the individual level focuses on teenagers who completed the entire survey (n=1,881). Just over 70% of teenagers (70.7%) answered every question that was asked of them, and just over 11% of teenagers (11.3%) skipped no more than 1.5% of survey questions asked of them. In total, less than 2% (1.2%) of all teenagers skipped more than 10% of the questions asked of them. Table 10 details the percent distribution of skipped questions per completed interview.

Table 10. Percent distribution of skipped questions per completed interview

Skipped Percentage of Questions	%
0.00%	70.7
0.01% - 1.49%	18.1
1.50% - 2.99%	4.6
3.00% - 5.99%	4.3
6.00% - 9.99%	1.2
<u>≥</u> 10.00%	1.2

It was uncommon to have more than 1.5% missingness on any one question, in fact, only 4 questions had such missingness in the entire survey among sufficient partials and complete interviews. These questions asked about height, weight, the teen's race, and whether the teen did not get mental health care due to stigma, details of which can be found below in Table 11.

Table 11. Questions with 1.5% or greater missingness

Question Name	Question Text	% Missingness
HEIGHT	How tall are you without shoes?	2.1
WEIGHT	How much do you weigh now?	3.6
RACE	What race or races do you consider yourself to be?	3.1
MHTHNDSGMA	During the past 12 months, was there any time when you needed counseling or therapy from a mental health professional, but DID NOT GET IT because you were afraid of what others would think of you?	1.6

#### X. Quality Control

Quality control measures on the NHIS-Teen help to confirm the correct individual completed NHIS-Teen, that a sufficient number of questions were answered, and that questions were read before being answered. Cases that fail certain quality control checks are removed from the data files and those cases are coded as nonrespondents. Table 12 details the number and reason(s) for cases removed from the 30-month data file.

#### **Likely Wrong Teenager**

Invitations to complete NHIS-Teen were only extended to teenagers who were selected as the Sample Child as part of the NHIS. However, there was the possibility that somebody else in the household may have completed the survey, possibly another teenager in the household who was mistakenly handed the invitation. To help identify these potential scenarios, three checks were performed, comparing the age, sex, and Hispanic origin of the teenager as reported by their parent during the Sample Child interview to the age, sex at birth, and Hispanic origin of the teenager reported by themselves as part of NHIS-Teen. As these questions were asked near the end of NHIS-Teen, this analysis could only be conducted among completed

interviews. If this information was missing from either interview, the check could not be performed.

The primary check was to determine if the age matches between interviews, as there may have been disagreement about an individual's sex and Hispanic origin between parent and teen. In the event age did not match between interviews, and it was not explainable by time passing between the two interviews, sex and Hispanic origin were used as a secondary check. If the age did not match, and neither did one or both the sex and Hispanic origin check, the household composition of the teenager was explored to determine if another teenager in the household could possibly have completed the interview. This same check was performed if the reported age difference was greater than 2 years.

#### **Excessive Questions Skipper**

As previously mentioned, teenagers who completed NHIS-Teen answered the vast majority of questions asked of them, with virtually all teens (98.8%) answering at least 90% of questions asked of them. Among the remaining teenagers (1.2%), those who skipped more than 70% of questions asked of them were removed and coded as nonrespondents.

#### **NHIS-Teen Speeder**

As mentioned in a previous section, the median length of time to complete NHIS-Teen was 15 minutes. It was hypothesized that teenagers who completed NHIS-Teen in less than 3 minutes were unlikely to have devoted the necessary attention to reading each question and answering thoughtfully, and these cases were coded as nonrespondents.

In total, 11 cases were removed for one or multiple reasons, representing approximately half a percent of total completed cases.

Table 12. Reasons for case removal

Reason	n	%
Likely wrong teenager	6	0.3
Excessive questions skipper	5	0.3
NHIS-Teen speeder	1	0.1
Any reason <sup>1</sup>	11	0.6

<sup>&</sup>lt;sup>1</sup> Reasons are not mutually exclusive.

### XI. Survey Logistics

Findings from this section come directly from questions answered by teenagers in Section 5 ("About You"). Survey logistics examined in this section include devices used, location and presence of others, and assistance received at time of the NHIS-Teen interview.

#### **Devices Used**

Among teenagers who completed NHIS-Teen over the web, the majority of teenagers used either a smart phone (57.7%) or a computer (desktop or laptop) (40.9%), while approximately 5% of teenagers used a tablet (5.2%). These percentages do not add up to 100% as 3.4% of all teenagers completed NHIS-Teen over multiple devices (and therefore, over multiple sessions).

#### Location and Presence of Others at Time of Interview

Almost all teenagers completed the survey in their home (95.9%) with just over a third of teenagers reporting being alone when they completed the survey (38.3%).

#### **Assistance Received**

About 1 in 6 teenagers reported having the help of others for completing the survey (16.3%). Teenagers with a developmental disability were more likely to receive assistance while completing NHIS-Teen than their peers without a developmental disability (23.9% vs. 14.4%). A parent was the most common individual helping teenagers complete the survey among teenagers who indicated having a helper (89.5%). Table 13 includes a breakdown of the relationship of the helper(s) assisting teenagers who indicated having a helper present when completing NHIS-Teen, stratified by whether or not the teenager had a developmental disability.

Table 13. Sources of assistance received reported among teenagers receiving assistance to complete NHIS-Teen, by presence of developmental disability.

		Developmental	No developmental
	Overall	Disability	Disability
	%	%	%
Parent or guardian only	89.5	91.2	86.0
Other family member only	5.9	4.4	6.5
Friend only	2.6	0.0	3.7
Somebody else only	1.3	1.1	1.4
Multiple helpers	0.7	3.3	2.3
Total	100.0	100.0	100.0

## XII. Survey Experiences

Findings from this section also come directly from questions answered by teenagers in Section 5 ("About You"). These additional questions, derived from previous work measuring response burden at the Bureau of Labor Statistics (5), ask about the teen's experience completing the survey and include questions on burden, difficulty, sensitivity, and survey length

(see Table 14 for question wording and response options). The survey experiences of teenagers who broke off prior to these last four questions were unknown.

Table 14. Survey experiences question by topic, text, and response options

Topic	Text	Response Options
Burden	How burdensome was this survey to you?	<ol> <li>Not at all burdensome</li> </ol>
		2. A little burdensome
		3. Moderately burdensome
		4. Very burdensome
		<ol><li>Extremely burdensome</li></ol>
Difficulty	How easy or difficult was it for you to	<ol> <li>Very easy</li> </ol>
	answer the questions in this survey?	<ol><li>Somewhat easy</li></ol>
		<ol><li>Somewhat difficult</li></ol>
		4. Very difficult
Sensitivity	How sensitive were the questions in this	<ol> <li>Not at all sensitive</li> </ol>
	survey?	2. A little sensitive
		<ol><li>Moderately sensitive</li></ol>
		4. Very sensitive
		<ol><li>Extremely sensitive</li></ol>
Length	How would you describe the length of this	1. Very long
	survey?	2. Somewhat long
		3. A little long
		4. Not at all long

In total, 8.5% of teenagers found NHIS-Teen to be moderately to extremely burdensome, 4.3% found NHIS-Teen to be somewhat to very difficult, 12.5% found NHIS-Teen to be moderately to extremely sensitive, and 53.5% found NHIS-Teen to be somewhat to very long.

#### XIII. Conclusions and Future Directions

The current report provides methodological background for data users interested in learning more about the NHIS-Teen, including those producing estimates using the Interactive Summary Health Statistics for Teens dashboard released in 2024.

A report in the NCHS Vital and Health Statistics Series will be released next year and will provide additional information about features that were added over the course of the 30-month survey, including the introduction of a paper questionnaire that began in 2023.

#### References

- 1. Moriarity C, Parsons VL, Jonas K, Schar BG, Bose J, Bramlett MD. Sample design and estimation structures for the National Health Interview Survey, 2016–2025. National Center for Health Statistics. Vital Health Stat 2(191). 2022.
- 2. Short MA, Gradisar M, Lack LC, Wright HR, Chatburn A. Estimating adolescent sleep patterns: parent reports versus adolescent self-report surveys, sleep diaries, and actigraphy. Nature and science of sleep. 2013 Feb 12:23-6.
- 3. Gersh E, Richardson LP, Katzman K, Spielvogle H, Arghira AC, Zhou C, McCarty CA. Adolescent health risk behaviors: Parental concern and concordance between parent and adolescent reports. Academic Pediatrics. 2018 Jan 1;18(1):66-72.
- 4. Sheldrick RC, Neger EN, Shipman D, Perrin EC. Quality of life of adolescents with autism spectrum disorders: Concordance among adolescents' self-reports, parents' reports, and parents' proxy reports. Quality of Life Research. 2012 Feb;21:53-7.
- 5. National Academies of Sciences, Engineering, and Medicine. 2016. Reducing Response Burden in the American Community Survey: Proceedings of a Workshop. Washington, DC: The National Academies Press. https://doi.org/10.17226/23639.

Appendix A: Parental Postcard Brochure (English)

## **National Health Interview Survey—Teen**

An online health survey just for teens



#### **Topics include:**

- Doctor visits
- Sleep
- Physical activity
- Injuries
- Mental health
- Social and emotional supports
- Experiences with bullying and discrimination



National Health Interview Survey—Teen

## Giving Teens a Voice About Their Health

Thank you for completing the National Health Interview Survey (NHIS), the nation's largest and oldest in-person household health survey. The success of the NHIS depends on the participation from people like you.

Now, we are asking for your help to better understand the health of teens in the United States, as well as issues they may face getting health care. With your permission, we will ask your teen to complete a quick online survey about many of the same topic areas covered in the NHIS. Teenagers encounter unique challenges that impact their health. That's why we think it is important to give them a chance to tell us about their health.

The information your teenager provides will be combined with thousands of other teen survey responses, and together, they will help tell the story of the health of our nation's teenagers.

For any questions about NHIS—Teen, call 1-800-618-5888 or e-mail nhist@census.gov.

Centers for Disease Control and Prevention National Center for Health Statistics Division of Health Interview Statistics 3311 Toledo Road Hyattsville, MD 20782



for participating and helping us learn more about the health of teens in the United States.





Appendix B: Parental Postcard Brocl	nure (S	Spanish)
-------------------------------------	---------	----------

# Encuesta Nacional de Entrevistas de la Salud—Adolescentes

Una encuesta de salud en línea sólo para adolescentes



#### Los temas incluyen:

- Visitas médicas
- Dormir
- Actividad física
- Lesiones
- Salud mental
- Apoyo social y emocional
- Experiencias de intimidación o bullying y discriminación



La Encuesta Nacional de Entrevistas de la Salud (NHIS por sus siglas en inglés) es un recurso confiable para la información de salud pública.

# Encuesta Nacional de Entrevistas de la Salud—Adolescentes

Dándole voz a los adolescentes sobre su salud

Gracias por completar la Encuesta Nacional de Entrevistas de la Salud (NHIS, por sus siglas en inglés), la encuesta en persona más grande y antigua del país. El éxito de la NHIS depende de la participación de personas como usted.

Ahora, estamos pidiendo su ayuda para entender mejor la salud de los adolescentes en los Estados Unidos, así como los problemas que pueden enfrentar para obtener atención médica. Con su permiso, le pediremos a su hijo(a) adolescente que complete una encuesta breve en línea sobre muchas de las mismas áreas temáticas cubiertas en la NHIS. Los adolescentes enfrentan desafíos únicos que afectan su salud. Por eso creemos que es importante darles la oportunidad de hablarnos sobre su salud.

La información que provee su hijo(a) adolescente se combinará con miles de otras respuestas de la encuesta de adolescentes, y juntos, ayudarán a contar la historia de la salud de los adolescentes de nuestra nación.

Si tiene preguntas sobre la Encuesta Nacional de Entrevistas de la Salud—Adolescentes, llame al 1-800-618-5888 o escriba al correo electrónico nhist@census.gov.

Centros para el Control y la Prevención de Enfermedades Centro Nacional de Estadísticas de la Salud División de Estadísticas de Entrevistas de Salud 3311 Toledo Road Hyattsville, MD 20782



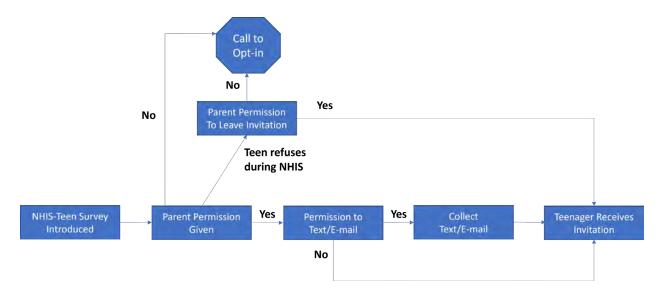
## Gracias

por su participación y por ayudarnos a aprender más sobre la salud de los adolescentes en los Estados Unidos.





## Appendix C: Parental Permission Flowchart



## Appendix D: NHIS-Teen Invitation



CENTERS FOR DISEASE CONTROL AND PREVENTION National Center for Health Statistics 3311 Toledo Road Hyattsville, MD 20782



Hello!

## You are invited to participate in NHIS Teen!



Recently, your parent or guardian answered questions about your health as part of the National Health Interview Survey (NHIS). They also gave us permission to invite you to be part of a similar survey just for teens, called NHIS-Teen.



NHIS-Teen is a short online survey to learn more about the health of teens in the United States. This survey includes questions about your health and activities, like how often you see a doctor, how much exercise you get, and who you turn to when you need help.



NHIS-Teen takes approximately 15 minutes to complete and we will send you \$5 to thank you for your time. Your participation is voluntary, and you can skip any questions you don't want to answer.

Completing the survey is easy. You can even do it on your phone.



1. Go to: https://respond.census.gov/nhist

2. Enter your Login ID:

Common questions about the survey are on the back of this letter. If you have any problems with this survey, need help, or have questions about NHIS-Teen, please e-mail us at nhist@census.gov.

## Thank you for your help with this important survey!

Sincerely,

Brian C. Moyer, Ph.D.

Director, National Center for Health Statistics Centers for Disease Control and Prevention

**NHIS-Teen** 

NHIST-101 (4-2021) census.gov

# **Common Questions**

#### How was I selected?

You were invited to participate because your parent or guardian answered questions about your health as part of the National Health Interview Survey (NHIS). The NHIS is the longest-running household health survey in the United States. It is conducted by the U.S. Census Bureau on behalf of the National Center for Health Statistics (NCHS). The goal of the NHIS is to better understand the health of people in the United States.

#### Do I have to participate?

You do not have to do this if you do not want to. You can skip any questions you don't want to answer. By taking part in NHIS-Teen you can make a difference by helping us learn about the health of teens in the United States.

#### What is the goal of NHIS-Teen?

Nobody knows more about your health than you! NHIS-Teen gives you a chance to tell us about your health care needs. Your answers will be combined with other teens to help us learn about the health and health issues facing teens in the United States.

#### What are you going to ask me?

NHIS-Teen covers a range of health topics including doctor visits, sleep, physical activity, injuries, mental health, social and emotional supports, and experiences with bullying and discrimination. You can skip any questions you don't want to answer.

## Will my answers be kept private?

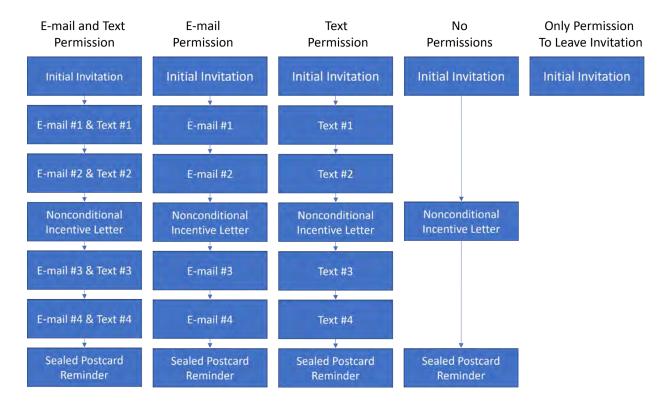
Yes! By law, your answers cannot and will NOT be shared with anyone, including your parents or guardians without your permission. Strict federal law protects your privacy and keeps your answers confidential under Section 308(d) of the Public Health Service Act (42 U.S.C. 242m(d)), the Privacy Act of 1974 (5 U.S.C. § 552a) and the Confidential Information Protection and Statistical Efficiency Act (CIPSEA, Title 5 of Public Law 107-347). Under the Federal Cybersecurity Enhancement Act of 2015, your data are protected from cybersecurity risks through screening of the systems that transmit your data, but not the responses you provided. NCHS can only protect information once it is in the NCHS system and therefore cannot promise protection related to information shared when using a personal device.

#### Who authorizes this survey?

The Census Bureau is conducting this survey on behalf of the U.S. Department of Health and Human Services under the authority of Title 13, United States Code (U.S.C.), Section 8(b) and section 501(a)(2) of the Social Security Act (42 U.S.C. §701). This survey has been approved by the Office of Management and Budget (OMB). The eight-digit OMB approval number 0920-0214 appears at the bottom left corner of the survey web page. If this number were not displayed, we could not conduct this survey.

NCHS collects and uses information you provide in accordance with System of Records Notice 09-20-0164, Health and Demographic Surveys Conducted in Probability Samples of the United States (https://www.cdc.gov/SORNnotice/09-20-0164.htm).

# Appendix E: Participation Reminders Received by Parent Permission Group



Note: Teenagers who refused to participate at the time of the NHIS Sample Child interview were left the initial invitation if their parent provided such permission. These teenagers did not receive any additional follow-up reminders and parents were not asked for permission to text or e-mail. A subsample of teens whose parents provided permission to participate between July and December 2022 who remained nonresponders after receiving the sealed postcard reminder were mailed a paper questionnaire with a prepaid return envelope. Starting in 2023, a paper questionnaire accompanied the nonconditional incentive letter as part of standard operations.

# Appendix F: NHIS-Teen Survey Rate by Select Characteristics

Table. NHIS-Teen interview rate by teenager, family, and NHIS Sample Child interview characteristics

Characteristic	(%) SE	χ² value
Overall	27.9 (0.5)	
Teenager characteristics		
Sex		11.13*
Boys	26.1 (0.7)	
Girls	29.7 (0.8)	
Age group (years)		3.12
12-14	26.9 (0.7)	
15-17	28.7 (0.7)	
Race and Hispanic origin		60.39**
Asian, non-Hispanic	31.8 (2.1)	
Black, non-Hispanic	21.6 (1.5)	
White, non-Hispanic	31.3 (0.8)	
Other, non-Hispanic / multiracial	27.8 (2.2)	
Hispanic <sup>1</sup>	23.1 (1.0)	
Developmental disability <sup>2</sup>		11.65*
Yes	24.5(1.1)	
No	28.9 (0.6)	
Family characteristics		
Family structure		38.25**
Two-parent family	30.4 (0.7)	
Other <sup>3</sup>	23.5 (0.8)	
Highest education of resident parent⁴		100.21**
High school diploma, GED or less	21.3 (1.0)	
Some college	24.1 (1.0)	
College degree or higher	33.4 (0.8)	
Family income <sup>5</sup>		57.10*
Less than 200% of federal poverty level	22.8 (0.9)	
200-400% of federal poverty level	27.1 (1.0)	
Greater than 400% of federal poverty level	32.4 (0.9)	
NHIS Sample Child interview characte	eristics	
Mode		0.40
In-person	28.2 (0.8)	
Telephone	27.6 (0.7)	
Language <sup>6</sup>		12.07*
Any Spanish	21.7 (1.7)	
No Spanish	28.3 (0.6)	

<sup>&</sup>lt;sup>1</sup>Teenagers of Hispanic origin may be of any race.

<sup>&</sup>lt;sup>2</sup> Teenagers were considered to have a developmental disability if they were diagnosed with one or more of the five selected developmental disabilities: Attention Deficit

Disorder (ADD) or Attention-Deficit/Hyperactivity Disorder (ADHD), autism spectrum disorder, intellectual disability, learning disability, or other developmental delay.

- <sup>3</sup> Includes single parent and nonparent families.
- <sup>4</sup> Nonparent families are not included.
- <sup>5</sup> Imputed when missing.
- <sup>6</sup> Interviews where language was not ascertained are not included.
- \* p<.01 \*\* p<.001

# Appendix G: NHIS-Teen Questionnaire

Form approved OMB No. 0920-0214 Exp. Date: 12/31/2023

# NATIONAL HEALTH INTERVIEW SURVEY – TEEN (NHIS-TEEN)

Updated May 6, 2021

# Sponsored and conducted by the National Center for Health Statistics and the Centers for Disease Control and Prevention

SECTION 1: YOUR HEALTH	43
SECTION 2: YOUR HEALTH CARE	48
SECTION 3: YOUR MENTAL HEALTH AND SUPPORTS	52
SECTION 4: YOUR EXPERIENCES	56
SECTION 5: ABOUT YOU	60

#### **Section 1: Your Health**

**PHSTAT** - Would you say your health in general is excellent, very good, good, fair, or poor?

- 1. Excellent
- 2. Very good
- 3. Good
- 4. Fair
- 5. Poor

**LSATIS11 -** Using a scale of 0 to 10, where 0 means "very dissatisfied" and 10 means "very satisfied", how do you feel about your life as a whole these days?

<Enter value>

**SPORT** - In the past 12 months, did you play or participate on a sports team or club or take sports lessons either at school or in the community?

- 1. Yes
- 2. No

**PEGYM** - In the past 12 months, did you take a physical education, PE, or gym class?

- 1. Yes
- 2. No

**PADAYS** - In a typical week during the school year, how often do you exercise, play a sport, or participate in physical activity for at least 60 minutes a day?

- 1. Never
- 2. Some days
- 3. Most days
- 4. Every day

**STRENGTH** - In a typical week during the school year, how often do you do exercises to strengthen or tone your muscles, such as sit-ups, push-ups, or weight lifting?

- 1. Never
- 2. Some days
- 3. Most days
- 4. Every day

**WALK** - In a typical week during the school year, how often do you walk for at least 10 minutes at a time?

- 1. Never
- 2. Some days
- 3. Most days
- 4. Every day

**BIKE** - In a typical week during the school year, how often do you ride a bike for at least 10 minutes at a time?

- 1. Never
- 2. Some days
- 3. Most days
- 4. Every day

**RESTED** - In a typical week during the school year, how often do you wake up well-rested?

- 1. Never
- 2. Some days
- 3. Most days
- 4. Every day

**OUTOFBED** - In a typical week during the school year, how often do you have difficulty getting out of bed in the morning?

- 1. Never
- 2. Some days
- 3. Most days
- 4. Every day

**TIRED** - In a typical week during the school year, how often do you complain about being tired during the day?

- 1. Never
- 2. Some days
- 3. Most days
- 4. Every day

**NAPS** - In a typical week during the school year, how often do you nap or fall asleep during the day, such as in school, watching TV, or riding in a car?

- 1. Never
- 2. Some days
- 3. Most days
- 4. Every day

**BEDTIME** - In a typical week during the school year, on nights you have school the next day, how often do you go to bed at the same time?

- 1. Never
- 2. Some days
- 3. Most days
- 4. Every day

**WAKETIME** - In a typical week during the school year, on school days, how often do you wake up at the same time?

- 1. Never
- 2. Some days
- 3. Most days
- 4. Every day

**TSCREENTIME** - On most weekdays, how many hours do you spend a day in front of a TV, computer, cellphone, or other electronic device watching programs, playing games, accessing the Internet, or using social media?

Do not include time spent doing schoolwork

- 1. Less than 1 hour
- 2. 1 hour
- 3. 2 hours
- 4. 3 hours
- 5. 4 or more hours

**HEIGHT** - How tall are you without shoes?

<Enter value for feet> <Enter value for inches>

**WEIGHT** - How much do you weigh now?

<Enter value for pounds>

**WEIGHTPER** - How do you describe your weight?

- 1. Very underweight
- 2. Slightly underweight
- 3. About the right weight
- 4. Slightly overweight
- 5. Very overweight

**WEIGHTCON**- Are you concerned about your weight?

- 1. Yes, it's too high
- 2. Yes, it's too low
- 3. No

**TBILOSTCON** - As a result of a blow or jolt to the head, have you ever been knocked out or lost consciousness?

Please think about all head injuries, for example, from playing sports, car accidents, falls, or being hit by something or someone.

- 1. Yes [goto TBICHKCONC]
- 2. No

**TBIDAZED** - As a result of a blow or jolt to the head, have you ever been dazed or had a gap in your memory?

Please think about all head injuries, for example, from playing sports, car accidents, falls, or being hit by something or someone.

- 1. Yes
- 2. No

**TBIHEADSYM** - As a result of a blow or jolt to the head, have you had headaches, vomiting, blurred vision, or changes in mood or behavior?

Please think about all head injuries, for example, from playing sports, car accidents, falls, or being hit by something or someone.

- 1. Yes
- 2. No

**TBICHKCONC** - Have you ever been checked for a concussion or brain injury by a doctor, nurse, athletic trainer, or other health care professional?

- 1. Yes
- 2. No [goto LASTDR]

**TBIDRCONC** - Did a doctor, nurse, athletic trainer, or other health care professional ever say that you had a concussion or brain injury?

- 1. Yes
- 2. No

#### Section 2: Your Health Care

**LASTDR** - Not including dental care, about how long has it been since you last saw a doctor or other health professional about your health?

- 1. Within the past 12 months
- 2. A year ago or more, but less than 2 years ago
- 3. 2 or more years ago
- 4. Never [goto USUALPL]

**TIMEALONE** - At this LAST medical care visit, did you have a chance to speak with a doctor or other health professional privately, without a parent or guardian in the room?

- 1. Yes
- 2. No.

**WELLNESS** - Was this a wellness visit, physical, or general purpose check-up?

This kind of visit typically includes: height and weight measurements, vaccinations, and vision or hearing checks. The doctor or other health professional may also discuss topics related to your health such as growth and development, diet and exercise, safety, and sleep patterns. These visits are usually scheduled in advance and occur when you are not sick.

If a wellness exam was combined with a sick care visit, include this visit.

An obstetrician/gynecologist (OB/GYN) may perform this visit.

- 1. Yes [goto NEWCHANGES if LASTDR=1; OTHERVISIT if LASTDR=2,3]
- 2. No

**WELLVIS** - About how long has it been since you last saw a doctor or other health professional for a wellness visit, physical, or general purpose check-up?

This kind of visit typically includes: height and weight measurements, vaccinations, and vision or hearing checks. The doctor or other health professional may also discuss topics related to your health such as growth and development, diet and exercise, safety, and sleep patterns. These visits are usually scheduled in advance and occur when you are not sick.

If a wellness exam was combined with a sick care visit, include this visit.

An obstetrician/gynecologist (OB/GYN) may perform this visit.

- 1. Within the past 12 months
- 2. A year ago or more, but less than 2 years ago
- 3. 2 or more years ago
- 4. Never [goto NEWCHANGES if LASTDR=1; OTHERVISIT if LASTDR=2,3]

**PTIMEALONE** – At this LAST wellness visit, physical, or general purpose check-up, did you have a chance to speak with a doctor or other health professional privately, without a parent or guardian in the room?

- 1. Yes [goto OTHERVISIT if WELLVIS=2,3,4 and LASTDR=2,3]
- 2. No [goto OTHERVISIT if WELLVIS=2,3,4 and LASTDR=2,3]

**NEWCHANGES** - During the past 12 months, has a doctor or other health professional talked to you about understanding the changes in health care that happen at age 18?

This can include understanding changes in privacy, consent, access to information, or decision-making

- 1. Yes
- 2. No

**GAINSKILLS** - During the past 12 months, has a doctor or other health professional talked to you about gaining skills to manage your health and health care?

- 1. Yes
- 2. No

**TALKSMK** - During the past 12 months, has a doctor or other health professional asked you about using tobacco products or smoking?

This can include asking about using e-cigarettes (electronic cigarettes) or vaping.

- 1. Yes
- 2. No

**SCRNMENTAL** - During the past 12 months, has a doctor or other health professional asked you about your mental or emotional health?

This could include you filling out a questionnaire about how you have been feeling recently.

- 1. Yes
- 2. No

**SHEALTH** - During the past 12 months, has a doctor or other health professional talked with you about changes to your developing body, or safe sex practices?

- 1. Yes
- 2. No

**OTHERVISIT** - Have you ever had a visit with a doctor or other health professional that your parents or guardians didn't know about?

- 1. Yes
- 2. No [goto USUALPL]

**OTHERTYPE** - What type of doctor visit or health service was it? (Please select all that apply)

- 1. Mental health professional visit
- 2. Women's health specialist visit
- 3. Other (specify)

**USUALPL** - Is there a place that you usually go to if you are sick and need health care?

- 1. Yes, there is ONE or MORE THAN ONE place
- 2. No, there is NO place [goto PERSONALDOC]

**USPLKIND** - What kind of place do you go to most often?

A doctor's office or health center is a place where you see the same doctor or the same group of doctors every visit, where you usually need to make an appointment ahead of time, and where your medical records are on file.

Urgent care centers, and clinics in a drug store or grocery store are places where you do not need to make an appointment ahead of time, and do not usually see the same health care provider at each visit.

- 1. A doctor's office or health center
- 2. An urgent care center
- 3. A clinic in a drug store or grocery store
- 4. A hospital emergency room
- 5. Some other place

**PERSONALDOC** - Do you have one or more persons you think of as your personal doctor or nurse?

A personal doctor or nurse is a health professional who knows you well and is familiar with your health history. This can be a general doctor, a pediatrician, a specialist doctor, a nurse practitioner, or a physician assistant.

- 1. Yes
- 2. No.

**MEDITATE** - Meditation includes mindfulness, mantra, and spiritual meditation. During the past 12 months did you use any of these types of meditation?

- 1. Yes
- 2. No

**YOGA** - During the past 12 months did you practice yoga?

- 1. Yes
- 2. No

**CHIRO** - During the past 12 months did you see a chiropractor?

- 1. Yes
- 2. No

# **Section 3: Your Mental Health and Supports**

**MHRX** - During the past 12 months, did you take any prescription medication to help with your emotions, concentration, behavior, or mental health?

- 1. Yes
- 2. No

**MHTHRPY** - During the past 12 months, did you receive counseling or therapy from a mental health professional such as a psychiatrist, psychologist, psychiatric nurse, or clinical social worker?

- 1. Yes
- 2. No

**MHTHND** - During the past 12 months, was there any time when you needed counseling or therapy from a mental health professional, but DID NOT GET IT because of cost?

- 1. Yes
- 2. No

**MHTHNDSGMA** - During the past 12 months, was there any time when you needed counseling or therapy from a mental health professional, but DID NOT GET IT because you were afraid of what others would think of you?

- 1. Yes
- 2. No

**MHTHNDDKH** - During the past 12 months, was there any time when you needed counseling or therapy from a mental health professional, but DID NOT GET IT because you didn't know where to go or how to get help?

- 1. Yes
- 2. No

**SUPPORT** - How often do you get the social and emotional support you need?

- 1. Always
- 2. Usually
- 3. Sometimes
- 4. Rarely
- 5. Never

**FRIENDSHELP** - How much can you rely on your friends for help if you have a serious problem?

- 1. A lot
- 2. Some
- 3. A little
- 4. Not at all

**FRIENDSOPEN** - How much can you open up to your friends if you need to talk about your worries?

- 1. A lot
- 2. Some
- 3. A little
- 4. Not at all

**PARENTSHELP** - How much can you rely on your parents or guardians for help if you have a serious problem?

- 1. A lot
- 2. Some
- 3. A little
- 4. Not at all

**PARENTSOPEN** - How much can you open up to your parents or guardians if you need to talk about your worries?

- 1. A lot
- 2. Some
- 3. A little
- 4. Not at all

**COMSUPPORT** - Other than parents or adults living in your home, is there at least one adult in your school, neighborhood, or community who makes a positive and meaningful difference in your life?

- 1. Yes
- 2. No

**LEARNDF** – Compared with other people your age, do you have difficulty learning things?

- 1. No difficulty
- 2. Some difficulty
- 3. A lot of difficulty
- 4. Cannot do at all

**REMEMBERDF** – Compared with other people your age, do you have difficulty remembering things?

- 1. No difficulty
- 2. Some difficulty
- 3. A lot of difficulty
- 4. Cannot do at all

**BEHDFCNTR** - Compared with other people your age, do you have difficulty controlling your behavior?

- 1. No difficulty
- 2. Some difficulty
- 3. A lot of difficulty
- 4. Cannot do at all

**BEHDFFCS** - Do you have difficulty concentrating on an activity you enjoy doing?

- 1. No difficulty
- 2. Some difficulty
- 3. A lot of difficulty
- 4. Cannot do at all

**BEHDFCHG** – Do you have difficulty accepting changes in your routine?

- 1. No difficulty
- 2. Some difficulty
- 3. A lot of difficulty
- 4. Cannot do at all

**BEHDFMKFR** – Do you have difficulty making friends?

- 1. No difficulty
- 2. Some difficulty
- 3. A lot of difficulty
- 4. Cannot do at all

**PHQ1** - Over the last two weeks, how often have you been bothered by having little interest or pleasure in doing things?

- 1. Not at all
- 2. Several days
- 3. More than half the days
- 4. Nearly every day

**PHQ2** - Over the last two weeks, how often have you been bothered by feeling down, depressed, or hopeless?

- 1. Not at all
- 2. Several days
- 3. More than half the days
- 4. Nearly every day

**GAD1** - Over the last two weeks, how often have you been bothered by feeling nervous, anxious, or on edge?

- 1. Not at all
- 2. Several days
- 3. More than half the days
- 4. Nearly every day

**GAD2** - Over the last two weeks, how often have you been bothered by not being able to stop or control worrying?

- 1. Not at all
- 2. Several days
- 3. More than half the days
- 4. Nearly every day

# **Section 4: Your Experiences**

**VIOLENEV** - The next set of questions are about events that may have happened during your life. These things can happen in any family, but some people may feel uncomfortable with these questions. You may skip any questions you do not want to answer.

Have you ever been the victim of violence or witnessed violence in your neighborhood?

1. Yes 2. No **JAILEV1** - Have you ever been separated from a parent or guardian because they went to jail, prison, or a detention center? 1. Yes 2. No **MENTDEPEV** - Have you ever lived with someone who was mentally ill or severely depressed? 1. Yes 2. No **ALCDRUGEV** - Have you ever lived with someone who was having a problem with alcohol or drug use? 1. Yes 2. No **PGDIE** - Have you ever had a parent or guardian die? 1. Yes 2. No **PGDIVSEP** - Have you ever had a parent or guardian divorce or separate? 1. Yes 2. No **PUTDOWN** - Have you ever lived with a parent or adult who frequently swore at you, insulted you, or put you down? 1. Yes

2. No

**BNEEDS** - Has there ever been a time when your basic needs were NOT met, such as having enough to eat, being able to go to a doctor when you were sick, or having a safe place to stay?

- 1. Yes
- 2. No

**UNFAIRRE** – Has anyone ever treated or judged you unfairly because of your race or ethnic group?

- 1. Yes
- 2. No.

**UNFAIRSO** – Has anyone ever treated or judged you unfairly because of your sexual orientation or gender identity?

- 1. Yes
- 2. No

**BULLYVIC** - The next four questions are about your experiences with bullying. The first two questions are about if you have **been bullied** by other children or teenagers and the next two questions are about if you have **bullied others**.

During the past 12 months, how often were you bullied, picked on, or excluded by other children or teenagers?

If how often you were bullied changed throughout the year, tell us about when you were bullied the most.

- 1. Never in the past 12 months
- 2. 1-2 times in the past 12 months
- 3. 1-2 times per month
- 4. 1-2 times per week
- 5. Almost every day

**CYBERVIC** - During the past 12 months, have you ever been electronically bullied?

Count being bullied through texting, Instagram, Facebook, Snapchat, or other social media.

- 1. Yes
- 2. No

**BULLYPERP** - During the past 12 months, how often did you bully others, pick on them, or exclude them?

If how often you bullied others changed throughout the year, tell us about when you bullied others the most.

- 1. Never in the past 12 months
- 2. 1-2 times in the past 12 months
- 3. 1-2 times per month
- 4. 1-2 times per week
- 5. Almost every day

**CYBERPERP** - During the past 12 months, have you ever electronically bullied others?

Count bullying others through texting, Instagram, Facebook, Snapchat, or other social media.

- 1. Yes
- 2. No

**RESPECT** – In your day-to-day life, how often do any of the following things happen to you?

You are treated with less courtesy or respect than other people your age.

- 1. Almost everyday
- 2. At least once a week
- 3. A few times a month
- 4. A few times a year
- 5. Less than once a year
- 6. Never

**POORSERVICE** – You receive poorer service than other people your age at restaurants or stores.

- 1. Almost everyday
- 2. At least once a week
- 3. A few times a month
- 4. A few times a year
- 5. Less than once a year
- 6. Never

# **NOTSMART** - People act as if they think you are not smart.

- Almost everyday
   At least once a week
- 3. A few times a month
- 4. A few times a year5. Less than once a year
- 6. Never

#### **Section 5: About You**

# **AGE** – How old are you?

#### <Enter value>

# NATORG - Do you consider yourself to be Hispanic or Latino?

- 1. Yes
- 2. No

# **RACE** - What race or races do you consider yourself to be? (Select all that apply)

- 1. White
- 2. Black or African American
- 3. American Indian or Alaska Native
- 4. Native Hawaiian or Other Pacific Islander
- 5. Asian
- 6. Some other race

# **ORIENT** – Which of the following best represents how you think of yourself?

- 1. Gay or lesbian
- 2. Straight, that is not gay or lesbian
- 3. Bisexual
- 4. Something else
- 5. I am not sure / I don't know the answer

# **SEXBIRTH** – What sex were you assigned at birth, on your original birth certificate?

- 1. Male
- 2. Female
- 3. I don't know

# **GENDERID** – How do you currently describe yourself?

- 1. Male
- 2. Female
- 3. Transgender
- 4. None of these
- 5. I am not sure / I don't know the answer

# **SCHSTATUS** - Are you currently enrolled in school?

- 1. Yes, a public school
- 2. Yes, a private school
- 3. I am homeschooled
- 4. No, I am not currently enrolled in school

# **DEVICES** - What device or devices did you use to complete this survey? (Select all that apply)

- 1. Smart phone
- 2. Tablet or iPad
- 3. Computer

# **HOME** - Did you complete this survey while you were in your home?

- 1. Yes
- 2. No

# **HELPER** - Did anyone help you answer questions in this survey? (Select all that apply)

- 1. No one helped me
- 2. Parent or guardian helped me
- 3. Other family member helped me (NOT a parent or guardian)
- 4. Friend helped me
- 5. Someone else helped me

# **ALONE** – Was anyone else in the room when you completed this survey?

- 1. Yes
- 2. No

## **BURDEN** - How burdensome was this survey to you?

- 1. Not at all burdensome
- 2. A little burdensome
- 3. Moderately burdensome
- 4. Very burdensome
- 5. Extremely burdensome

## **DIFFICULTY** - How easy or difficult was it for you to answer the questions in this survey?

- 1. Very easy
- 2. Somewhat easy
- 3. Somewhat difficult
- 4. Very difficult

# **SENSITIVITY** - How sensitive were the questions in this survey?

- 1. Not at all sensitive
- 2. A little sensitive
- 3. Moderately sensitive
- 4. Very sensitive
- 5. Extremely sensitive

# **LENGTH** - How would you describe the length of this survey?

- 1. Very long
- 2. Somewhat long
- 3. A little long
- 4. Not at all long