

Childhood Immunization Supplement
Notes

Information on childhood immunizations was collected from adult respondents (often the mother) for one sample child under 6 years of age per National Health Interview Survey (NHIS) family with age-eligible children in the household. Analysts are STRONGLY encouraged to review the questionnaire used for this survey before undertaking any analysis. Five vaccine types were asked about in the survey: DTP, Polio, Measles or MMR, Hemophilus type B or HIB, and Hepatitis B. When possible, information was abstracted directly from vaccination records maintained by the family. Respondents with vaccination records were also asked about additional shots that may have been received but were not listed on the records. Respondents who were unable to provide records were asked the number of shots of each type their child had received. Respondents who did not know the exact number of shots but stated that the child had received "all" of a particular type of vaccination had "88" coded as the number of shots. For each vaccine type, the total number of shots received was calculated and included as a recode for each child in the file. For children 2 years and older who had complete shot record information (i.e., all their vaccination information was contained on their shot record), the total number received by 24 months was also calculated and included on the file as a recode.

Estimation of immunization coverage levels (i.e., the percentage of children who are "up-to-date" for a particular vaccine type or a series of vaccines) is complicated. The National Immunization Program at the Centers for Disease Control and Prevention is responsible for calculating the official Public Health Service coverage level estimates. Analysts who wish to make these types of estimates can contact the National Immunization Program (404-639-1884) for technical assistance.

Information collected in this survey is similar to that collected in the 1991 NHIS as part of a supplement on child health. However, there are some differences in the way the information based on respondent's recall was collected. In 1991, the ages of vaccination were collected for each antigen; in 1992, just the total number of shots of each type was collected. The recode for shots received before 24 months was calculated for all children 2 and older in 1991; in 1992, since data on ages at vaccination was not collected in the history portion, this recode could only be calculated for those children with complete shot record information.

The response rate to the 1992 Immunization Survey was 92.6 percent and was calculated as follows:

The response rate to the NHIS Core questionnaire was 95.7 percent. Of the eligible families from the CORE, 96.8 percent responded to the Immunization supplement. Multiplying these two response rates together yields the overall response rate to the Immunization survey (92.6 percent).

Each record included in the Immunization file contains a final weight (file locations 207-212). Weights must be used to make accurate estimates based on this data file. Because the Immunization survey included only one child per NHIS family, the weight on this file is different from the weight for the same

child on the NHIS Core Person file. Most of the weights for records on the Immunization file are between 2000 and 8000. However, due to the design of the NHIS and the weighting procedure, there are a few records on the Immunization file which have very large weights (> 15,000); 2 of these have weights of 20,000 or more. Analyses involving fairly small sample numbers may be heavily impacted by the inclusion of these records with extremely large weights. Analysts are encouraged to look at the distribution of weights for records being analyzed to decide how to handle these weighting outliers.