An Evaluation of Incentive Experiments in a Two-Phase Address-Based Sample Mail Survey

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Abstract:
Address-based sampling (ABS) with a two-phase data collection approach has emerged as a promising alternative to random digit dial (RDD) surveys for studying specific subpopulations in the United States. In 2011, the National Household Education Surveys Program Field Test used a two-phase ABS design with a mail screener to identify households with eligible children and a mail topical questionnaire administered to parents of sampled children to collect measures of interest. Experiments with prepaid cash incentives and special mail delivery methods were applied in both phases. For the screener, sampled addresses were randomly designated to receive either $2 or $5 in the initial mailing. During the topical phase, incentives (ranging from $0 to $20) and delivery methods (First Class Mail or Priority Mail) were assigned randomly but depended on how quickly the household had responded to the screener. The paper first evaluates the effects of incentives on response rates, and then identifies the optimal incentive level for attracting the hard-to-reach groups and improving sample composition. The impact of incentive on data collection cost is also examined.

Key Words: Response rate, prepaid, subpopulation, sample composition, data collection cost

1. Introduction

In response to the declining coverage and response rates of landline random digit dialing (RDD) surveys, address-based sampling (ABS) with two-phase mail data collection has emerged as a promising alternative for studying specific subpopulations (Han et al., 2010; Brick et al., 2011). Yet little is known about the effectiveness of the various procedures (e.g., use of mail delivery method, nonresponse follow-up mailings, monetary incentives) for administering these surveys. This paper examines the effect of prepaid monetary incentives on response rate, sample composition, and data collection cost in a two-phase ABS mail study – the National Household Education Surveys Program 2011 (NHES:2011) Field Test. Sponsored by the United States (U.S.) National Center for Education Statistics (NCES), NHES is a set of periodic education surveys that were conducted as landline RDD surveys until 2007. Like many other telephone surveys in the U.S., NHES experienced a decline in response rates and coverage rates. An alternative mail data collection approach using a two-phase ABS design was tested in the 2009 Pilot Study and found to be feasible (Brick et al., 2011). This article is based on the NHES:2011 Field Test, a very large-scale methodological study designed using lessons learned from the 2009 Pilot Study.
1.1 The National Household Education Surveys (NHES):2011 Field Test
The overall objective of the NHES:2011 Field Test was to evaluate various experiment conditions for data collection and identify economical alternatives for achieving high response rates and limiting potential nonresponse bias. The Field Test targeted two subgroups – School-aged children (those in kindergarten through twelfth grade) were eligible for the Parent and Family Involvement in Education (PFI) questionnaire and children ages six years or younger who had not yet started kindergarten were eligible for the Early Childhood Program Participation (ECPP) questionnaire. The need to screen for households with eligible children and to sample from the list of enumerated children dictated a two-phase design. The first phase (screener) was used to identify households with eligible children. Items collected in the screener instrument included the age, gender, school enrollment, and grade for each person of age 20 or younger living at the sampled address. Any first-phase responding household with at least one child eligible for either the PFI or the ECPP study was sampled for a second phase (topical) survey. One child was sampled per household, and the topical questionnaire was sent to the parents/guardians of the sampled child to collect data on the care and education of the sampled child. We adopted the total design method (Dillman et al., 2009) and administered up to three questionnaire mailings in each phase of data collection. A series of experiments were included to examine the effects on response rate and nonresponse bias (Montaquila et al., 2012). The experiment reported here varied the amount of the prepaid cash incentive in the initial mailing for both phases, the mail delivery method (First Class or USPS Priority Mail), and the amount of incentive in the final nonresponse follow-up mailing. We describe the incentive treatments in greater detail in Section 2.

1.2 Research Questions
Two-phase mail data collection is an innovative approach. The incentive literature that is most relevant to this approach covers single-phase mail surveys, telephone surveys targeting specific subpopulations, and longitudinal surveys. Here we briefly review the existing literature and lay out the questions we aimed to answer through this research.

Although monetary incentives have been used in many surveys, the theory for explaining the effectiveness of incentives has not been fully established. The alternative frameworks include social exchange theory (Dillman 1978), the norm of reciprocity (Gouldner 1960), and economic exchange theory (Biner and Kidd 1994). Groves et al. (2000) proposed a more comprehensive model that viewed incentives as an inducement to compensate for the absence of factors that might otherwise stimulate cooperation (e.g., topic salience, a sense of civic obligation).

Existing studies have demonstrated that token monetary incentives increase response rate in single-phase mail surveys. Prepaid incentives are almost always more effective than promised incentives that are contingent on response (e.g., Church 1993). However, findings are mixed on how large an incentive should be and whether the effects of incentives are linear (e.g., Yu and Cooper 1983; Gelman et al. 2002; Cantor et al. 2008). Prepaid incentives can either be provided to all units in the initial attempt, or only to those that initially refused to cooperate. Some researchers recommend using refusal conversion payments in combination with sampling nonrespondents as a more cost-effective approach (Brick et al. 2005). The longer-term impact of incentives has also been studied in face-to-face and telephone longitudinal surveys. There is no evidence that an earlier wave incentive would condition the respondents to expect incentives in later waves (e.g., Creighton et al. 2007, Singer et al. 1998). This finding is relevant to the two-phase design of the NHES:2011 Field Test.
Offering an incentive may affect the composition of the respondents. For example, several studies demonstrated that monetary incentives are particularly effective in recruiting low-income, low-education, or minority respondents (Martin et al. 2001; Singer and Kulka 2002; Petrolia and Bhattacharjee 2009). On the other hand, Juster and Suzman (1995) found that offering $100 per individual and $200 per couple in refusal conversion brought into the sample people with higher incomes and more net worth than those who had never refused or had been converted with other efforts. Singer (2002) reviewed the “intended” and “unintended” consequences of using incentives and concluded that while monetary incentives are generally effective, less money is required to recruit and retain low-income groups than those whose income is higher.

Our research was motivated by the concern that findings from incentive experiments in single-phase cross-sectional surveys would not hold in the two-phase setting. For example, would the positive effect of a screener incentive carry over to the topical phase? In the RDD context (based on the NHES:2003), Brick et al. (2005) concluded that if there was any effect on cooperation rates at the topical interview level that had been carried over from giving incentives at the screening interview level, then the effect was relatively small. This finding is relevant, but not directly applicable to our mail survey context. Similarly, experiences from longitudinal surveys are relevant, but in our two-phase mail design the time lag between the two questionnaires is much shorter and no interviewers are present to establish rapport as in the face-to-face or telephone data collection modes.

Our first challenge was to identify combinations of screener and topical incentives that result in high overall response rates across both phases. When surveying a specific subpopulation from a general population frame, survey researchers face two situations. If no reliable benchmark is available for the target subpopulation, it is important to elicit roughly equal response rates from all the units in the sample to estimate the prevalence of the specific subpopulation. In the NHES:2011 Field Test, however, a reliable benchmark exists for the target subpopulation (households with children) so our primary goal was to identify approaches that maximize responses from the specific subpopulation. Responses from households without children did reduce data collection costs associated with screener nonresponse follow-up mailings. We also use the percentage of households with a child as a measure of the quality of the survey.

Since response rates are not good indicators of nonresponse bias (see, for example, Groves and Peytcheva 2008), we aimed to identify methods that improve sample representativeness and reduce potential nonresponse bias. Household surveys, especially when conducted through mail data collection mode, tend to underrepresent groups with lower socio-economic status (SES). Our goal was to examine the representativeness of respondent groups under different incentive treatments.

In addition, the incentives and mailing treatments affect the cost of data collection. Therefore, we study whether there are incentive levels that attain a high response rate and good sample representativeness while containing the data collection cost in the two-phase mail design.

Finally, the key to persuading people to cooperate is to improve the experience of participation and reduce response burden. Monetary incentives are only one tool for increasing the motivation for survey participation. It is important to consider all the contributing factors and identify the best overall approach with the available resources. The NHES:2011 Field Test included other experiments such as screener questionnaire
versions and mail delivery methods, so we explore interaction effects between these factors and the incentive treatments.

The remainder of this paper is organized as follows: Section 2 describes the incentive, questionnaire version, and mail delivery method treatments in greater detail. Section 3 evaluates the effectiveness of screener and topical incentives in increasing responses from all units in the sample and from the target subpopulation. The impacts of incentives on sample composition and data collection cost are presented in Section 4. We summarize the findings in Section 5.

2. Study Design and Incentive Treatments

The NHES:2011 Field Test included a nationally representative sample, along with a supplemental or targeted sample of addresses that were more likely to contain Spanish speakers. In this paper we report the findings only from the nationally representative sample. This sample included a “pilot” group (a random subsample) that, by design, received a particular combination of treatments and was not part of the incentive experiments, so those cases were excluded from the analysis. The total sample size for this study was 36,260. This section describes the incentive, questionnaire version, and mail delivery treatments. All the other experiment factors are described in Montaquila et al., 2012) and crossed with the incentive treatments. All tests of statistical significance discussed in this paper are based on the Rao-Scott adjusted chi-square test, and all results reported to be statistically significant are significant at the 0.05 level. All response rates given here are AAPOR RR4 rates (AAPOR 2011).

2.1 Screener Treatments

All the sampled addresses were mailed an initial screener packet containing a screener questionnaire, an informational letter, a business return envelope and a token monetary incentive; the sampled addresses were randomly designated to receive either $2 or $5. Since the positive effect of prepaid incentive in single-phase surveys has been well established in the literature, we did not include a group with no incentive treatment in the screener phase. A thank-you/reminder postcard was mailed to all the addresses. Nonrespondents to the initial mailing were mailed a second screener packet, and the remaining nonrespondents were mailed a final screener packet. The initial mailing and first nonresponse follow-up mailing were sent through USPS First Class Mail. The second nonresponse follow-up mailing was sent using either FedEx delivery or Priority Mail and the cases were randomly assigned to one of the two treatments. No monetary incentive was provided during the two follow-up mailings.

Two screener questionnaire versions were tested. The Screen-out version was a very short questionnaire that focused solely on identifying children. The Engaging version was longer and included items aiming to interest target respondents. If no children were present in the sampled address, the household needed to answer only one item to complete the Screen-out version. In the Engaging version, the household was asked to respond to approximately 25 items about education and the household before reaching the items about the presence of children in the household. The sampled addresses were randomly assigned to receive either Screen-out or Engaging questionnaire during the initial mailing. During the screener follow-up mailings, half of the households were sent the same version as in the initial mailing, and the other half were sent the different version (i.e., Screen-out switched to Engaging, or Engaging switched to Screen-out). The
rationale behind the questionnaire version experiment is explained in Williams et al. (forthcoming).

2.2 Topical Treatments
One child was sampled from each screener responding household with either ECPP or PFI eligible children. The topical incentive and mail delivery method treatments were assigned randomly but depended on how quickly the household had responded to the screener questionnaire. In the descriptions below, households that responded to the initial mailing or first follow-up mailing are referred to as Screener-Early cases; households that responded to the second screener follow-up mailing are referred to as Screener-Late cases.

Exhibit 1 shows the topical incentive and mail delivery method treatments. The Screener-Early respondents were randomly assigned to six groups for the initial topical mailing – half of the cases were sent Priority Mail with no incentive; the remaining half were split into five groups to receive First Class Mail with either $0, $5, $10, $15, or $20. In contrast, the Screener-Late households had already received either a FedEx or Priority Mail mailing for the final screener nonresponse follow-up, so we did not use special mail delivery for these cases during the initial topical mailing. Instead, we assigned the Screener-Late cases randomly to five levels of incentive treatments (i.e., First Class Mail with $0, $5, $10, $15, or $20). Here treatment groups with no incentive (through either First Class or Priority Mail) were included because a connection had already been established with the target respondents during the screener phase, and we wanted to assess the effect of the incentive in the topical phase.

The first topical nonresponse follow-up mailing was sent to all topical nonrespondents through First Class Mail with no incentive. The treatment for the second follow-up mailing depended on the delivery method used in the initial topical mailing. Cases that were sent the initial mailing via Priority Mail received no monetary incentive then, so for the second follow-up mailing they were randomly assigned to receive either $5 or $15 (through First Class Mail) for testing the effectiveness of a higher monetary incentive for nonresponse follow-up. The question was whether a higher incentive level would be more effective in converting the nonrespondents at this late stage. On the other hand, cases that were sent the initial topical mailing via First Class Mail were already subject to incentive treatments, so the second nonresponse follow-up mailing was sent through Priority Mail with no incentive.

In a two-phase mail survey with the sequence of mailings used in the NHES:2011 Field Test, a household could receive up to six questionnaire packets, so we varied the incentive and delivery method treatments from one mailing to another to give the target respondents a fresh stimulus with each mailing. For example, one hypothesis was that if the delivery method for the initial topical mailing was different from the screener mailing the household responded to, the household would be more likely to distinguish the envelope and more likely to respond. The Screener-Early households had responded to First Class Mail packets during the screener, so half of the cases were sent Priority Mail during the initial topical mailing. The Screener-Late cases had been exposed to FedEx or Priority Mail during the screener, so their initial topical mailing was sent using First Class Mail. It is worth noting that the envelope featured the U.S. Department of Education sponsorship seal whenever First Class Mail was used, but the FedEx or Priority Mail envelope was standard and did not show any sponsorship information.
Exhibit 1: Topical Incentive and Delivery Method Treatments

3. Effects on Response Rates

One of the key measures of the effectiveness of the various treatments is response rate, so this section examines screener response rates and topical response rates (conditioning on screener response) by experimental treatments. Since the NHES:2011 Field Test targeted a specific subpopulation, we also report the eligibility rates from the screener phase – the proportion of screener responding households with eligible children. All the analyses and tabulations are weighted to account for the differential probabilities of selection.

3.1 Screener Incentives

Table 1 summarizes the effects of screener incentives on screener response rates, eligibility rates, and overall sample yield across both phases. The standard error of the estimate is given in parentheses following the estimate. For the screener phase, we present initial response and eligibility rates in addition to final response and eligibility rates. The initial rates reflect the successfulness of the initial screener mailing, during which either $2 or $5 was offered. The screener response rate was significantly higher for the $5 group (70.9%) than for the $2 group (66.5%). This difference was due to a higher response to the initial screener mailing (42.8% for the $5 group versus 36.3% for the $2 group). As a result, the higher incentive in the initial mailing saved some cost associated with nonresponse follow-up mailings.

A second quality measure is the screener eligibility rate – the proportion of completed screeners in which the household indicated the presence of an age-eligible child. The difference in screener eligibility rates between the $5 and $2 treatment groups was not statistically significant. The findings about screener response rates and eligibility rates hold for all types of addresses (i.e., city style, rural, highway, and P.O. Box addresses).

In a two-phase study, the screening survey serves to identify members of the target population, but the data needed for analysis comes from the topical responses from the
target population; thus, topical response rate is also important. The topical response rate (conditioning on screener response) was not significantly different between $2 (73.9\%)$ and $5 (71.9\%)$ screener treatments.

A more comprehensive measure of the effectiveness of the screener treatments across both phases of data collection is the ratio of the number of sampled addresses (excluding undeliverable addresses) to the number of topical completes. A lower ratio implies that we need to sample fewer cases to obtain a topical complete. The ratios are 6.4 for the $2$ screener incentive group and 6.2 for the $5$ screener incentive, and these are not significantly different. These ratios show that the higher screener response rate for the $5$ treatment does not result in higher topical complete yields because of losses in the percent eligible for the topical and the conditional topical response rates. This finding is consistent with that reported by Brick et al. (2005), who found that the positive effect of higher screener incentive was not carried over to the topical phase in the NHES:2003 landline RDD administration.

### Table 1: Screener Incentive Treatment Effects

<table>
<thead>
<tr>
<th></th>
<th>Screener $2$</th>
<th>Screener $5$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sample size</td>
<td>18,130</td>
<td>18,130</td>
</tr>
<tr>
<td><strong>Screener phase</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Final response rate *</td>
<td>66.5% (0.33%)</td>
<td>70.9% (0.36%)</td>
</tr>
<tr>
<td>Final eligibility rate</td>
<td>32.3% (0.46%)</td>
<td>32.4% (0.44%)</td>
</tr>
<tr>
<td>Initial response rate a</td>
<td>36.3% (0.39%)</td>
<td>42.8% (0.43%)</td>
</tr>
<tr>
<td>Initial eligibility rate</td>
<td>28.2% (0.62%)</td>
<td>28.8% (0.58%)</td>
</tr>
<tr>
<td><strong>Topical phase</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conditional response rate a</td>
<td>73.9% (0.86%)</td>
<td>71.9% (0.98%)</td>
</tr>
<tr>
<td><strong>Both phases</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of sampled addresses per topical complete b</td>
<td>6.4 (0.12)</td>
<td>6.2 (0.13)</td>
</tr>
</tbody>
</table>

Source: National Household Education Survey Field Test, 2011.

Note: Standard errors are shown in parentheses.

* $p$-value $< 0.05$.

a Topical response rates are calculated at the child level, conditioning on screener response.

b The ratios are calculated after accounting for undeliverable addresses.

As described earlier, two screener questionnaire versions were used – a very short questionnaire designed to limit respondent burden and a longer questionnaire with education-related questions designed to engage the target population. We found no interaction effect between screener incentives and questionnaire versions using the comprehensive ratios.

### 3.2 Topical Incentives and Mail Delivery Methods

One measure of the effectiveness of the topical incentive treatments is the topical response rate (conditioning on screener response). We conducted two comparisons across various treatment groups using this measure. The first comparison was based on the cases that were sent the initial topical mailing via First Class Mail. For this analysis, the Screener-Early cases that were sent the initial topical mailing via Priority Mail were excluded, and the remaining Screener-Early cases were weighted up to maintain the distribution of Screener-Early versus Screener-Late cases among all the screener respondents. We refer to this grouping and weighting mechanism as the “five-group comparison”, and it is used in several analyses and tabulation. This grouping was used to
compare the effectiveness of the different topical incentive levels regardless of the screener response time.

As shown in Figure 1, the conditional topical response rate for the $5 treatment was statistically and substantively higher than the no incentive treatment rate. No statistically significant difference was found between the $5 treatment and any of the higher incentive levels ($10, $15, or $20). Trussell and Lavrakas (2004) also found that the effect of monetary incentives is nonlinear, with the increase in response rates decreasing as the incentive amount increases.

The slopes in Figure 1 indicate that the marginal returns of additional mailings are approximately equivalent across different incentive levels. There was a steady increase in response rate with each follow-up mailing. It is worth noting that the effects of the second follow-up mailing due in part to Priority Mail, and a different pattern might hold if First Class Mail was used. Figure 1 also clearly shows the importance of repeated mailings, and the final response rate for the no incentive treatment is higher than the initial mailing response rates for all of treatments with incentives.

For all the cases in this analysis, the first and second topical follow-up mailings were sent with no incentive, via First Class Mail and Priority Mail respectively.

**Figure 1: Effects of Topical Incentives on Response Rates: Five-Group Comparison**

For the second comparison, the topical cases are divided into eleven groups based on screener response times; Table 2 shows the results for the Screener-Early and Screener-Late cases in separate columns. Three patterns are apparent. First, screener response time was a good indicator of topical response propensity. Regardless of the incentive amount, topical response rates are consistently higher for the Screener-Early cases than for the Screener-Late cases.

Second, the findings about different incentive levels from the five-group comparison hold for both the Screener-Early and the Screener-Late cases – $5 was effective relative to no incentive, but offering higher incentives did not result in further increases in the response rate. For the Screener-Late cases, although the topical response rates associated with $10, $15, and $20 were nominally higher than that of the $5 treatment, the differences are not statistically significant.
Third, for the Screener-Early cases that were not offered any monetary incentives during the initial topical mailing, there was no significant difference in the response rates between the Priority Mail treatment (73.6%) and the First Class Mail treatment (72.0%). This was true despite the fact that the Priority Mail cases were offered either $5 or $15 during the second nonresponse follow-up mailing. One possible explanation is that the official government envelope used for the First Class mailing might be about as effective as the Priority Mail envelope for the Screener-Early cases. The postage for the Priority Mail is approximately $5, so using the money as a prepaid cash incentive rather than for Priority Mail postage was the more effective approach to improve response.

Table 2: Topical Conditional Response Rates, by Topical Incentive Treatment and Screener Response Time

<table>
<thead>
<tr>
<th>Initial topical mailing treatment</th>
<th>Screener-Early cases</th>
<th>Screener-Late cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sample size</td>
<td>Topical conditional response rate</td>
<td>Sample size</td>
</tr>
<tr>
<td>Priority Mail, $0 a</td>
<td>2,530</td>
<td>73.6% (1.2%)</td>
</tr>
<tr>
<td>First Class Mail, $0 b</td>
<td>580</td>
<td>72.0% (2.1%)</td>
</tr>
<tr>
<td>First Class Mail, $5 b</td>
<td>570</td>
<td>84.6% (1.8%)</td>
</tr>
<tr>
<td>First Class Mail, $10 b</td>
<td>520</td>
<td>80.3% (2.3%)</td>
</tr>
<tr>
<td>First Class Mail, $15 b</td>
<td>500</td>
<td>84.5% (2.0%)</td>
</tr>
<tr>
<td>First Class Mail, $20 b</td>
<td>580</td>
<td>82.5% (2.2%)</td>
</tr>
</tbody>
</table>

Source: National Household Education Survey Field Test, 2011.
Note: Standard errors are shown in parentheses.

a The second topical follow-up mailing was sent through First Class Mail with either $5 or $15 incentive.
b The second topical follow-up mailing was sent through Priority Mail with no incentive.

Our final response rate analysis focuses on the effects of incentives used for nonresponse follow-up. The cases used for this analysis are those that were sent the initial mailing through Priority Mail with no incentive and did not respond to the first two topical mailings; thus it is restricted to the Screener-Late cases. A second nonresponse follow-up mailing was sent to these cases via First Class mail and the cases were randomly assigned to receive a prepaid cash incentive of either $5 or $15. The question was whether the higher incentive level would be more effective in converting the nonrespondents at this late stage. We calculated the conditional response rate to the second nonresponse follow-up mailing by incentive treatment as a measure of effectiveness. The difference between the $5 treatment (29.5%, n=490) and the $15 treatment (36.1%, n=458) was not statistically significant (p-value = 0.056). We cannot evaluate the effectiveness of the $5 incentive in the second nonresponse follow-up relative to no incentive, because the experiment design did not include a condition with no incentive at this stage. It is also worth noting that only the Screener-Early cases were subject to incentive treatments in the final nonresponse follow-up, so the findings may not apply to all the screener respondents.

For all the topical comparisons described above, we repeated the analyses for the ECPP and PFI children (younger and older children, respectively) separately and found similar results for both subgroups.
4. Effects on Sample Composition and Data Collection Cost

While overall response is important, incentives may be particularly effective in gaining cooperation from low response propensity persons and thus reduce nonresponse bias. To study these effects, we computed estimates of characteristics by incentive treatments using the unadjusted child sampling weights. The groups included in this analysis and the weighting method are the same as in the five-group comparison presented in Section 3.2, except that only the topical respondents were used to generate the estimates (the data were only available for respondents). We estimated ten demographic and SES characteristics for each of the five incentive groups. All the estimates were proportions and the variables were coded so that higher estimates indicated relatively higher response from minority and/or lower SES groups. Benchmark estimates of each of these characteristics were obtained from the American Community Survey and the National Health Interview Survey. We then calculated the ratio of the NHES estimate to the benchmark estimate for each of the ten variables; this ratio is a standardized measure that indicates the effectiveness of our survey in gaining the participation of minority and/or low SES groups.

Figure 2 shows these ratios by topical incentive level. We combined the $10, $15, and $20 treatments due to the similarity of the estimates. Although we could not directly gauge the reduction in nonresponse bias using this approach, Figure 2 clearly shows that compared to the no incentive treatment or the higher incentive levels, the $5 topical treatment estimates are generally closer to the benchmarks (a ratio of 1.0). In particular, the $5 topical incentive did consistently better in obtaining response from minority and/or low SES groups. One possible explanation is that the threshold for recruiting lower-income groups is lower than for those whose income is higher (Singer 2002), so when higher incentives ($10, $15, and $15) were offered, it attracted a higher percentage of the higher SES people. Another possibility is that the higher incentives invoked people to consider this an economic transaction, while the lower $5 incentive cause people feel obliged to return positive behavior as posited by social exchange theory. If the incentive is large, it might be viewed as a bribe or an undue pressure to comply; under those circumstances, compliance is inhibited (Groves et al. 1992). The higher incentive levels might be more likely to create this pressure for the lower SES groups.

A similar evaluation was conducted for the screener incentive treatments. We did not find any significant difference between the two screener incentive levels ($2 versus $5) for any of the ten variables, nor did we see any interaction effects between screener incentives and topical incentives on sample composition.
Next, we consider the effects of monetary incentives and mailing conditions on the cost of the data collection, specifically the direct cost of mailing and of the monetary incentives themselves. Because other treatments with cost implications (e.g., screener version) varied across cases, we examined the data collection costs for various incentive groups by calculating the unit cost – the average data collection cost across both phases per topical complete.

Table 3 shows that the $5 screener-phase treatment drove up the unit cost by approximately 20 percent compared to $2 treatment – This is true for both the screener-phase cost and the overall cost across both phases. This is partly due to the large amount of screening required to identify the subpopulation – households with children. For the topical phase, we used the five-group comparison described above. The topical-phase unit cost for the $5 incentive treatment is approximately the same as that for the no incentive group because offering $5 increased topical response rate substantially.
Table 3: Effects of Incentive Treatments on Data Collection Costs

<table>
<thead>
<tr>
<th>Treatment for incentive during initial mailing</th>
<th>Ratio of Unit Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Screener treatment</td>
<td></td>
</tr>
<tr>
<td>Screener-phase cost: $5 versus $2</td>
<td>1.2</td>
</tr>
<tr>
<td>Overall cost across both phases: $5 versus $2</td>
<td>1.2</td>
</tr>
<tr>
<td>Topical treatment</td>
<td></td>
</tr>
<tr>
<td>Topical-phase cost: $5 versus $0</td>
<td>1.0</td>
</tr>
<tr>
<td>Topical-phase cost: $10 versus $0</td>
<td>1.2</td>
</tr>
<tr>
<td>Topical-phase cost: $15 versus $0</td>
<td>1.4</td>
</tr>
<tr>
<td>Topical-phase cost: $20 versus $0</td>
<td>1.6</td>
</tr>
</tbody>
</table>

5. Conclusions

Our research extends the findings that token monetary incentives increase response rates in single-phase surveys. In two-phase mail surveys, the goal is to attain a high overall response rate across both phases and ensure sample representativeness. In the NHES:2011 Field Test, offering $5 at the screener phase increased the screener response rate compared to offering $2, but the positive effect did not carry over to the topical phase. The higher screener incentive drove up the data collection cost per complete without improving the overall response rate or sample composition across both phases.

Prepaid cash incentives during the initial topical mailing did help increase response rate, but the effect was nonlinear to incentive amount. The modest topical incentive of $5 was the most effective in achieving a high response rate and a sample with good representativeness while containing the data collection cost.

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