**Subject: sick child observation - client weights**
Posted by emilywj on Thu, 21 May 2015 17:54:50 GMT
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Hi,

For the sick child observation, how were the client weights constructed?

Thanks
Emily

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**Subject: Re: sick child observation - client weights**
Posted by Sarah-DHS on Fri, 22 May 2015 14:41:59 GMT
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Dear Emily,

Here is a response from Senior Sampling Statistician, Ruilin Ren, and Data Processing Specialist, Claudia Marchena.

For sick child interviews or any other type of client, the total number of clients present at the facility on the day of the interview and the total number of clients that ended up being interviewed are taken in consideration to calculate weights. Both questionnaire of the interviewed client (the observation of the consultation and the exit interview) must be completed in order to have a weight for the client, otherwise 0 is assumed. The base weight for the clients is the provider's weight because the clients were selected among those their provider was observed (interviewed ).

Please let us know if this answers your question.
Thanks,
Sarah-DHS

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**Subject: Re: sick child observation - client weights**
Posted by emilywj on Wed, 27 May 2015 12:18:01 GMT
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Thanks, this was very helpful information.

Based on this response, frequencies across sick child observations should be weighted (pweight=clientwt) to account for unequal probabilities of selection given differences in client volumes on the interview date. Standard errors also need to account for data clustering at the provider level (based on a unique provider ID created by joining facil and provno numbers). Finally, the sample should also include only children/caregivers participating in both the observation and exit interview.

Is this a correct understanding?

Thanks again for your guidance on these various questions. It is greatly appreciated. SPA is such a wonderful resource!

With many thanks
Emily

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## Subject: Re: sick child observation - client weights
Posted by Sarah-DHS on Thu, 28 May 2015 13:07:24 GMT
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Dear Emily,

Here is a response from Senior Sampling Statistician, Ruilin Ren, and Data Processing Specialist, Claudia Marchena.

From a data processing perspective, frequencies could be weighted or un-weighted depending on what do you need them for. Regarding the weighting, it seems that you are trying to produce estimations of frequencies with sampling errors, so the use of sampling weight is recommended. Only the weighted estimations are unbiased. Regarding the question on standard error estimation counting for clustering, it is the health facility which should be declared as cluster, not the provider. In all the statistical software which can take clustering effects into account in variance estimation, the "cluster" means the "primary sampling unit", the PSU. In the SPA settings, the PSU should be the health facility, not the providers. Regarding the units should be included in the sick child analysis, it is indeed correct.

Please let us know if this answers your question.
Thanks,
Sarah-DHS

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## Subject: Re: sick child observation - client weights
Posted by emilywj on Thu, 04 Jun 2015 15:49:06 GMT
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Thanks, apologies for my confusion.

Final question on weights = similar to DHS, the SPA client weights (clientwt) needs to be divided by 1,000,000 before applying it to generate frequencies among sick children. Is this correct?

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Subject: Re: sick child observation - client weights
Posted by Liz-DHS on Thu, 04 Jun 2015 20:51:56 GMT
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Dear Emily,
Here is a response from Dr. Ruilin Ren:
Quote:The answer to the question is yes. We multiplied the sampling weight by 1,000,000 in both DHS and SPA recode files. Thanks.