

# Methodology

## The American Trends Panel survey methodology

The American Trends Panel (ATP), created by Pew Research Center, is a nationally representative panel of randomly selected U.S. adults. Panelists participate via self-administered web surveys. Panelists who do not have internet access at home are provided with a tablet and wireless internet connection. The panel is being managed by Ipsos.

Data in this report is drawn from the panel wave conducted June 4 to June 10, 2020. A total of 9,654 panelists responded out of 11,013 who were sampled, for a response rate of 88%. This does not include two panelists who were removed from the data due to extremely high rates of refusal or straightlining. The cumulative response rate accounting for

nonresponse to the recruitment surveys and attrition is 4.7%. The break-off rate among panelists who logged on to the survey and completed at least one item is 1.6%. The margin of sampling error for the full sample of 9,654 respondents is plus or minus 1.6 percentage points.

The subsample from the ATP consisted of 11,013 ATP members that responded to the Wave 57 survey and were still active.

The ATP was created in 2014, with the first cohort of panelists invited to join the panel at the end of a large, national, landline and cellphone random-digit-dial survey that was conducted in both English and Spanish. Two additional recruitments were conducted using the same method in 2015 and 2017, respectively. Across these three surveys, a total of 19,718 adults were invited to join the ATP, of which 9,942 agreed to participate.

### American Trends Panel recruitment surveys

| Recruitment dates         | Mode                  | Invited       | Joined        | Active panelists remaining |
|---------------------------|-----------------------|---------------|---------------|----------------------------|
| Jan. 23 to March 16, 2014 | Landline/<br>cell RDD | 9,809         | 5,338         | 2,308                      |
| Aug. 27 to Oct. 4, 2015   | Landline/<br>cell RDD | 6,004         | 2,976         | 1,335                      |
| April 25 to June 4, 2017  | Landline/<br>cell RDD | 3,905         | 1,628         | 684                        |
| Aug. 8 to Oct. 31, 2018   | ABS/web               | 9,396         | 8,778         | 6,407                      |
| Aug. 19 to Nov. 30, 2019  | ABS/web               | 5,900         | 4,720         | 4,682                      |
|                           | <b>Total</b>          | <b>35,014</b> | <b>23,440</b> | <b>15,416</b>              |

Note: Approximately once per year, panelists who have not participated in multiple consecutive waves or who did not complete an annual profiling survey are removed from the panel. Panelists also become inactive if they ask to be removed from the panel.

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In August 2018, the ATP switched from telephone to address-based recruitment. Invitations were sent to a random, address-based sample (ABS) of households selected from the U.S. Postal Service's Delivery Sequence File. In each household, the adult with the next birthday was asked to go online to complete a survey, at the end of which they were invited to join the panel. For a random half-sample of invitations, households without internet access were instructed to return a postcard. These households were contacted by telephone and sent a tablet if they agreed to participate. A total of 9,396 were invited to join the panel, and 8,778 agreed to join the panel and completed an initial profile survey. The same recruitment procedure was carried out on August 19, 2019, from which a total of 5,900 were invited to join the panel and 4,720 agreed to join the panel and completed an initial profile survey. Of the 23,440 individuals who have ever joined the ATP, 15,416 remained active panelists and continued to receive survey invitations at the time this survey was conducted.

The U.S. Postal Service's Delivery Sequence File has been estimated to cover as much as 98% of the population, although some studies suggest that the coverage could be in the low 90% range.<sup>1</sup> The American Trends Panel never uses breakout routers or chains that direct respondents to additional surveys.

### Weighting

The ATP data was weighted in a multistep process that begins with a base weight incorporating the respondents' original selection probability. The next step in the weighting uses an iterative technique that aligns the sample to population benchmarks on the dimensions listed in the accompanying table.

Sampling errors and test of statistical significance take into account the effect of weighting. Interviews are conducted in both English and Spanish.

In addition to sampling error, one should bear in mind that question wording and practical difficulties in conducting surveys can introduce error or bias into the findings of opinion polls.

### Weighting dimensions

| Variable   | Benchmark source  |
|--|---|
| Gender   | 2018 American Community Survey  |
| Age  |   |
| Education  |   |
| Race/Hispanic origin                             |   |
| Country of birth among Hispanics                 |   |
| Years lived in the United States among Hispanics |   |
| Home internet access                             |   |
| Region x Metropolitan status                     | 2019 CPS March Supplement   |
| Volunteerism                                     | 2017 CPS Volunteering & Civic Life Supplement                           |
| Voter registration                               | 2018 CPS Voting and Registration Supplement                             |
| Party affiliation                                | Average of the three most recent Pew Research Center telephone surveys. |

Note: Estimates from the ACS are based on non-institutionalized adults. Voter registration is calculated using procedures from Hur, Achen (2013) and rescaled to include the total US adult population.

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<sup>1</sup> AAPOR Task Force on Address-based Sampling. 2016. "AAPOR Report: Address-based Sampling."

The following table shows the unweighted sample sizes and the error attributable to sampling that would be expected at the 95% level of confidence for different groups in the survey:

| <b>Group</b> | <b>Unweighted sample size</b> | <b>Plus or minus ...</b> |
|--------------|-------------------------------|--------------------------|
| Total sample | 9,654                         | 1.6 percentage points    |
| White        | 6,602                         | 1.8 percentage points    |
| Black        | 737                           | 5.3 percentage points    |
| Hispanic     | 1,645                         | 4.5 percentage points    |
| Asian        | 278                           | 8.2 percentage points    |

Sample sizes and sampling errors for other subgroups are available upon request. White, black and Asian adults include those who report being only one race and are non-Hispanic. Hispanics are of any race. Asian adults were interviewed in English only.

A note about the Asian American sample

This survey includes a total sample size of 278 Asian Americans. The sample includes English-speaking Asian Americans only and, therefore, may not be representative of the overall Asian American population (74% of our weighted Asian American sample was born in another country, compared with 77% of the Asian American adult population overall). Despite this limitation, it is important to report the views of Asian Americans on the topics in this study. As always, Asian Americans' responses are incorporated into the general population figures throughout this report. Because of the relatively small sample size and a reduction in precision due to weighting, we are not able to analyze Asian American respondents by demographic categories, such as gender, age or education.

## Categorization of COVID-19 county health impact in this report

This report uses the number of deaths attributed to COVID-19 in each respondent's county as a measure of the scale of the health impact of the outbreak for each individual in the survey. These numbers are then adjusted for differences in county population (per 100,000 residents). Counties are categorized as having a high, medium or low rate of COVID-19 deaths.

Counties are classified as "high" if they had 28 or more deaths per 100,000 people as of June 5, 2020. "Low" counties had fewer than roughly 8 deaths per 100,000 people. The remaining counties are classified as "medium" impact.

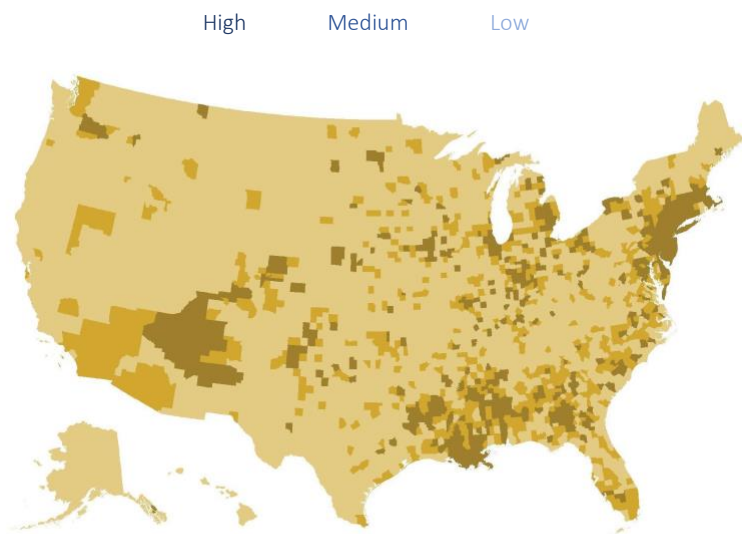
Data for deaths attributed to COVID-19 by county are taken from the 2019 Novel Coronavirus COVID-19 (2019-nCoV) Data Repository maintained at John Hopkins University (downloaded on June 10, 2020).

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### Categorization of COVID-19 death rate by county

Counties where COVID-19 has had a \_\_\_\_ impact on county health (as of June 5)



Note: COVID-19 county health impact based on number of deaths per 100,000 people reported in each county as of June 5, 2020.  
Source: John Hopkins University 2019 Novel Coronavirus COVID-19 (2019-nCoV) Data Repository.

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