Measures for Assessment of Functioning and Outcomes in Longitudinal Research on Child Abuse and Neglect Volume 4: Middle Adolescence (Age 16)

LONGSCAN

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Adolescent Father Form
LONGSCAN, 1998

Description of Measure

Purpose
To assess an adolescent male's history of fatherhood and involvement in pregnancies. Also assessed are intimate partner violence during a partner's pregnancy; involvement in and support of partner during pregnancy; use of birth control, and birth outcomes.
The Infant Characteristics Questionnaire, Six Month Form, is included in the measure.

Conceptual Organization
Initial items assess whether or not an adolescent male has ever gotten someone pregnant and at what age the first pregnancy occurred, whether he has any living children, pregnancy outcomes, and age of firstborn child. Intimate partner violence during, and immediately following, the pregnancy is assessed.

The ICQ-6 is comprised of 24 items describing infant behavior. The parent or primary caregiver ranks each item on a 7-point scale, indicating the level of perceived difficulty in dealing with the described behavior. Four subscales have been identified through principal components analyses: Fussy/Difficult, Unadaptable, Dull, and Unpredictable.

Item Origin/Selection Process
The majority of the pregnancy and birth-related items are drawn from the Pregnancy Risk Assessment Monitoring System (PRAMS) Core Questionnaire, Phase 4.
The items on the ICQ were suggested by Thomas and colleagues' temperament dimensions (Thomas, chess & Birch, 1968; Thomas et al, 1963)

Materials
LONGSCAN utilized an A-CASI administration.

Time Required
1-5 minutes

Administration Method
A-CASI

Training
Minimal

Scoring
The ICQ includes four subscales: Fussy/Difficult, Unadaptable, Dull and Unpredictable. Please see the LONGSCAN Measures Manual, Age 4, Infant Characteristics Questionnaire, Six Month Form, for additional information on scoring the ICQ.

Individual items may be used. There are no additional scoring recommendations for the PRAMS variables.

LONGSCAN Use

Data Points
Ages 16 & 18

Mnemonic and Version
AFFA

Respondent
Adolescent males

Results

Descriptive Statistics

Table 1 includes descriptive statistics for male adolescent reports of pregnancies at the age 16 and 18 interviews. At age 16, ten adolescent males (11%) either had children or had partners who were currently pregnant. These rates substantially increased by age 18.

Table 1. Age 16 and 18 male involvement in pregnancy & age at first birth

		Do you have a child as a result of any pregnancy you were involved in?			How old were you when you first got someone pregnant?								
	N	No % (n)	Yes % (n)	Yes, someone is currently pregnant with my child % (n)	< = 12 yrs n	13 yrs n	14 yrs n	15 yrs n	16 yrs n	17 yrs n	18 yrs n	19 yrs n	20 yrs n
Age 16	11	81.8 (9)	9.1 (1)	1 (9.1)	1	2	--	3	--	5	--	--	--
Age 18	68	45.6 (31)	32.3 (22)	22.1 (15)	1	1	--	4	12	25	14	7	2

Source. Based on data received at the Coordinating Center through February '11.

Publisher Information

Centers for Disease Control and Prevention: PRAMS Homepage (http://www.cdc.gov/prams/aboutprams.htm, visited 5/20/14)

References and Bibliography

Bates, J. E., Freeland, C. A., & Lounsbury M. L. (1979). Measurement of infant difficultness. Child Development, 50,794-803

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Adolescent Witnessed Violence
LONGSCAN, 2000

Description of Measure

Purpose
To assess an adolescent's self-reported history of witnessed violence in past year.

Conceptual Organization
Stem questions assess whether or not a respondent has witnessed any of seven increasingly serious types of witnessed violence; ranging from having seen someone arrested to witnessing murder or rape. Follow-up questions for most items include frequency of witnessing specific events, and perpetrator-victim combinations for each witnessed behavior. There are two form options that differ in length. The differences between the short and long forms of this measure, AWVA and HWVB respectively, are in the number and specificity of the victim-perpetrator follow-up items. The short form provides a single item assessing family involvement and non-family involvement in perpetration. The long form assesses family member involvement by specific relationship (i.e., father, step mother) as either a victim or a perpetrator, and non-family involvement.

Item Origin/Selection Process
The authors sought to capture a broad range of violence exposures and information on relationship of perpetrators and victims to respondent. These measures are revisions of the History of Witnessed Violence (HWVA) utilized at Ages 12 and 14. Stem items in the Age 16 measures have been condensed into fewer items relative to the HWVA, and the Age 16 timeframe assesses witnessing in past year rather than lifetime witnessing as assessed earlier.

Materials
A-CASI delivery system

Time Required
Administration takes between 1 and 7 minutes, based on the extent of a respondent's history of witnessed violence. The variation in length is due to the extensive branching in the measure and whether or not the long or short form is utilized.

Administration Method
A-CASI

Training
Minimal training is required given that the measure is delivered in an A-CASI format**.** Interviewers need to be thoroughly familiar with the item content should questions arise.

Scoring

There are several potential options for scoring this measure. Dichotomous indicators and frequency counts can be created for each item for type of violent act (e.g., someone being assaulted with gun or knife). Indicators/counts can also be derived separately for respondents' relationship to victims and perpetrators; the long form offers more options for scoring victim/perpetrator combinations than the short form. These indicators/counts can also be used to create indicators for witnessing any violent acts and total counts of violent acts witnessed. Severity of witnessed violence may also be assessed.

Norms and/or Comparative Data

None available at this time.

Psychometric Support

See Table 4 on convergent validity.

LONGSCAN Use

Data Point

Age 16

Respondent

Adolescent

Mnemonic and Version

Age 16: HWVB (long form); AWVA (short form)
Ages 12 & 14: HWVA (the HWVAincludes several overlapping stems with HWVB/AWVA, and is the source measure from which the Age 16 measures are derived)

Rationale

Comprehensive measurement of exposure to both witnessed and experienced violence was prioritized by the LONGSCAN investigators in order to understand the relative contributions of each, and the combined effects of both witnessing and experiencing violence. Numerous studies have linked exposure to witnessed violence to poor child outcomes.

Administration and Scoring Notes

The form is designed as an A-CASI form to assure maximum privacy for the respondent. The SW and NW sites administered the long form (HWVB*)*; the EA, MW, and SO sites administered the short form (AWVA).

Results

Descriptive Statistics

Table 1 provides frequencies for Age 16 *Adolescent Witnessed Violence* items. 83% reported having witnessed one or more violent acts in the last year. There were variations by site, with 11% of SO site participants and 22% of SW participants reporting having witnessed one or more violent acts.

Table 1. Age 16 Adolescent Witnessed Violence (N = 725†) by Gender and Site

	In the past year, respondent has seen someone…															
	Arrested		Slapped, kicked, hit, or beat		Pull gun, or knife		Stabbed		Shot		Killed		Sexually assaulted/ raped		Witnessed 1 or more Acts of Violence	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
In the last yr	517	71.2	490	67.6	199	27.4	122	16.8	64	8.8	36	5.0	36	5.0	727	83.2
Gender																
Male	252	34.7	239	32.9	113	15.6	73	10.1	42	5.8	24	3.3	14	1.9	289	39.7
Female	265	36.5	251	34.6	86	11.9	49	7.0	22	3.0	12	1.7	22	3.1	316	43.5
Study Site																
EA	127	17.5	122	16.8	59	8.1	43	5.9	27	3.7	18	2.5	9	1.2	139	19.1
MW	82	11.3	67	9.2	32	4.4	20	2.8	10	1.4	4	0.6	1	0.1	88	12.1
SO	61	8.4	62	8.6	28	3.9	12	1.7	7	1.0	6	0.8	6	0.8	81	11.1
SW	133	18.3	126	17.4	41	5.7	27	3.7	13	1.8	5	0.7	10	1.4	156	21.5
NW	114	15.7	113	15.6	39	5.4	20	2.8	7	1.0	3	0.4	10	1.4	141	19.4

Notes. Based on data received at the Coordinating Center through July '09.
† Sample N's may change across scores.

Table 2 provides means and standard deviations for individual items. Adolescents reported witnessing an average of 3.9 violent acts (SD = 4.6) in the last year, based on a sum of frequencies endorsed: 0 = Never, 1 = 1 time, 2 = 2-3 times, 3 = 4+ times.

Table 2. Means and Standard Deviations for the Age 16 Adolescent Witnessed Violence counts (N = 725†)

	# of times respondent saw someone…															
	Arrested		Slapped, kicked, hit, or beat		Pull gun, or knife		Stabbed		Shot		Killed		Sexually raped		Witnessed 1 or more Acts of Violence	
	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD
In the last yr	1.4	1.1	1.4	1.2	0.5	0.9	0.3	0.7	0.1	0.5	0.1	0.4	0.1	0.4	3.9	3.6
Gender																
Male	1.5	1.2	1.6	1.2	0.6	1.0	0.4	0.8	0.2	0.6	0.1	0.5	0.1	0.3	4.5	4.1
Female	1.3	1.1	1.3	1.1	0.4	0.7	0.2	0.5	0.1	0.4	0.0	0.3	0.1	0.4	3.4	3.1
Study Site																
EA	2.0	1.1	1.8	1.1	0.8	1.1	0.5	0.9	0.3	0.8	0.2	0.7	0.1	0.4	5.7	4.3
MW	1.6	1.1	1.4	1.3	0.5	0.9	0.3	0.7	0.2	0.5	0.0	0.3	0.0	0.2	4.1	3.7
SO	1.0	1.1	1.2	1.2	0.4	0.8	0.2	0.6	0.1	0.5	0.1	0.4	0.1	0.4	3.1	3.6
SW	1.5	1.1	1.4	1.1	0.4	0.8	0.2	0.6	0.1	0.5	0.0	0.3	0.1	0.4	3.8	3.3
NW	1.1	1.0	1.2	1.1	0.3	0.7	0.1	0.5	0.0	0.3	0.0	0.1	0.1	0.3	2.8	2.6

Notes. Based on data received at the Coordinating Center through July '09. † Sample N's may change across scores.

Table 3*:* At the Age 12 and 14 interviews, LONGSCAN utilized a longer version of the Age 16 *Adolescent Witnessed Violence* forms. Significant correlations are seen in Table 3 between the witnessed violence totals over time.

Table 3. Correlations between Witnessed Violence counts at Ages 12, 14, and 16

	N	# of violent acts witnessed (Age 16)
# of violent acts witnessed (Age 12)	584	.28***
# of violent acts witnessed (Age 14)	580	.44***

Notes. Based on data received at the Coordinating Center through July '09.

- <.05, ** <.01, *** <.001

Convergent Validity

Table 4: At Age 16, caregiver report of neighborhood chaos (which includes open drug activity, public drunkenness, crime and violence) and domestic violence as measured by the Physical Assault Mean Score on the CTS2 (Straus et al, 2003), are significantly correlated with witnessed violence self-reported by adolescents.

Table 4. Correlations between Age 16 Adolescent Witnessed Violence, Neighborhood Chaos Subscale, and Conflict Tactics Physical Assault Mean Score

	N	# of violent acts witnessed (Age 16)
Neighborhood Organization/Affiliation		
Neighborhood Chaos Subscale	683	.18***
Conflict Tactics: Partner to Partner		
Physical Assault Mean Score	332	.15**

Notes. 1) Based on data received at the Coordinating Center through July '09.

- <.05, ** <.01, *** <.001
- The Eastern and Southwestern sites did not administer the Partner-Partner CTS at Age 16

Publisher Information

The measure is free and available for use after the LONGSCAN Coordinating Center's receipt of a signed User Agreement for LONGSCAN Project-Developed Measures. Further information may be found at http://www.iprc.unc.edu/longscan/.

References and Bibliography

Hunter, W. M., Cox, C. E., Teagle, S., Johnson, R. M., Mathew, R., Knight, E. D., & Leeb, R.T. (2003). Measures for Assessment of Functioning and Outcomes in Longitudinal Research on Child Abuse. Volume 1: Early Childhood. Accessible at the LONGSCAN web site (http://www.unc.edu/depts/sph/longscan/).

Hunter, W. M., Cox, C.E., Teagle, S., Johnson, R. M., Mathew, R., Knight, E. D., Leeb, R. T., & Smith, J. B. (2003). Measures for Assessment of Functioning and Outcomes in Longitudinal Research on Child Abuse. Volume 2: Middle Childhood. Accessible at the LONGSCAN web site (http://www.unc.edu/depts/sph/longscan/).

Knight, E. D., Smith, J. S., Martin, L. M., Lewis, T., & the LONGSCAN Investigators (2008). Measures for Assessment of Functioning and Outcomes in Longitudinal Research on Child Abuse Volume 3: Early Adolescence (Ages 12-14). Accessible at the LONGSCAN web site (http://www.unc.edu/depts/sph/longscan/).

Straus, M.A., Hamby, S. L., Warren, W. L. (2003) The Conflict Tactics Scale Handbook. Western Psychological Services, Los Angeles, CA.

Adult Violence in the Home
LONGSCAN, 2000

Description of Measure

Purpose
To assess the level of violence between any adults in the home.

Conceptual Organization
Stem questions assess whether or not the caregiver has ever witnessed each of 8 increasingly serious acts of violence between adults in the home, ranging from having seen/heard/been apart of loud arguments to someone getting shot or raped. Follow-up questions for all items include frequency adolescent witnessing these incidents, and who was involved in the incident (e.g., caregiver themselves, a partner/ex-partner, or another adult in the home).

Item Origin/Selection Process
Items were developed to roughly parallel youth self-report measures of witnessed violence and caregiver report measures of conflict tactics used earlier in LONGSCAN.

Materials
A-CASI delivery system

Time Required
1-3 minutes

Administration Method
A-CASI

Training
Minimal training.

Scoring
Individual items may be utilized.

LONGSCAN Use

Data Points
Ages 16

Respondent
Caregiver

Mnemonic and Version
ADVA: Age 16

Rationale
Comprehensive measurement of exposure to both witnessed and experienced violence was prioritized by the LONGSCAN investigators in order to understand both the relative contributions of each, and the combined effects of both witnessing and experiencing violence. Numerous studies have linked exposure to witnessed violence to poor child outcomes.

Results

Descriptive Statistics

Table 1 provides frequencies for caregiver's report of adult violence in the home at Age 16, by demographics. Twenty three percent of caregivers (n=165) reported that adults engaged in loud arguments in the home in the last year, and of these 165 caregivers, 38% (n=63) said that they were involved while 57% (n=95) reported that their partner or ex-partner was involved in the loud arguments. Ten percent of caregivers (n=74) reported that the police have been called to the home on 1 or more occasions. 36% (n=27) of caregivers reported that this involved partners or ex-partners, while 40% (n=30) reported that the incidents involved other adults. 4% reported physical violence (e.g., adults being kicked, slapped, hit or beaten).

Table 1. Frequencies for Adult Violence in the Home at Age 16

		In the last year…							
	N	Adults engaged in arguments % (n)	Police were called to the home % (n)	Adult threatened harm to another adult % (n)	Adults slapped, kicked, hit, or beaten each other % (n)	Adult pulled a weapon % (n)	Adult cut or stabbed another adult % (n)	Adult shot another adult % (n)	Adult sexual assaulted/ raped anther adult % (n)
Overall	728	22.7 (165)	10.2 (74)	5.9 (43)	4.0 (29)	2.1 (15)	1.0 (7)	1.9 (14)	0.4 (3)
Child's Gender									
Male	348	11.9 (87)	4.8 (35)	3.2 (23)	2.3 (17)	0.7 (5)	0.4 (3)	0.7 (5)	0.1 (1)
Female	380	10.7 (78)	5.4 (39)	2.7 (20)	1.6 (12)	1.4 (10)	0.6 (4)	1.2 (9)	0.3 (2)
Study Site									
EA	154	3.8 (28)	1.6 (12)	1.1 (8)	0.7 (5)	0.4 (3)	0.1 (1)	0.8 (6)	0.4 (3)
MW	119	3.6 (26)	2.2 (16)	1.2 (9)	1.4 (10)	1.0 (7)	0.3 (2)	0.4 (3)	0.0 (0)
SO	115	4.0 (29)	1.2 (9)	1.5 (11)	1.0 (7)	0.4 (3)	0.3 (2)	0.1 (1)	0.0 (0)
SW	163	5.1 (37)	2.2 (16)	0.7 (5)	0.3 (2)	0.1 (1)	0.1 (1)	0.4 (3)	0.0 (0)
NW	177	6.2 (45)	2.9 (21)	1.4 (10)	0.7 (5)	0.1 (1)	0.1 (1)	0.1 (1)	0.0 (0)
Mean # of times teenager witnessed (SD) *		1.8 (0.9)	1.3 (1.0)	1.5 (1.1)	1.7 (1.1)	1.5(0.9)	1.1 (1.1)	0.4(0.6)	0.3 (0.6)

Notes. Based on data received at the Coordinating Center through July'09.
* Item is categorical in nature (i.e., '0 = Never';'1 = One time';'2 = 2 - 3 times';'3 = 4 or more times').

Publisher Information

The project developed items are free and available for use upon the receipt of a signed LONGSCAN Measurement Agreement.

Caregiver Demographics

LONGSCAN
1991

Description of Measure

Purpose
To gather demographic information from caregivers.

Conceptual Organization
The form includes items on the age, race, marital status and religious affiliation and involvement of the LONGSCAN primary caregiver. It also includes an item on how much the LONGSCAN participant child lives with the respondent. Also included are items on respondent's and partner's highest educational level, employment status and occupation, total family income, and per capital household income. The Hollingshead Occupational Scale (Hollingshead, 1975) may be coded from the educational level and occupation items.

Materials
LONGSCAN utilized an A-CASI administration.

Time Required
10 minutes

Administration Method
Interviewer-administered

Training
Minimal

Scoring

Score Types
Individual item scores are most useful. Occupational status is scored using the 9-point Hollingshead Occupational Scale (Hollingshead, 1975). Education was measured by number of years of schooling as well as by degrees or certification earned. Annual income was measured in $5,000 increments, up to more than $50,000 per year.

Score Interpretation
The Hollingshead Occupational Scale ranges from 1 (menial jobs) to 9 (major professional jobs) (Hollingshead, 1975). Explicit coding instructions are found in the LONGSCAN Administration Scoring/Administration manual.

LONGSCAN Use

Data Points
Pre-Age 4: MW & NW sites only
Age 4, 6, 8, 12, 14, & 16: all sites

Respondent
Primary maternal caregiver

Mnemonic and Version
DEMA (Pre-Age 4/Age 4)

DE6A (Age 6) - Modified to include questions about the educational status of the caregiver's partner. Also, the order of the questions was changed slightly.

DEA (Age 8) - Caregiver race is omitted.

DEMB (Ages 12, 14 & 16) - Racial/ethnic background is included. Also asks for the number of rooms in the caregiver's home.

Rationale
Information gathered on this form is needed to examine research questions related to the demographic characteristics of the child's caregiver(s). The Hollingshead Index (1975) is widely used as a measure of socioeconomic status.

Results

Descriptive Statistics
For descriptive statistics of the Age 4-14 Caregiver Demographics, please refer to the 1st, 2nd, and 3rd volumes of the measures manuals (Hunter et al., 2003; Knight et al. 2008).

Race/Ethnicity. Table 1 shows the racial distribution of caregivers at the Age 16 interview. As seen at the earlier ages, the majority of caregivers were African American at Age 16 (54%), followed by Caucasians (33%).

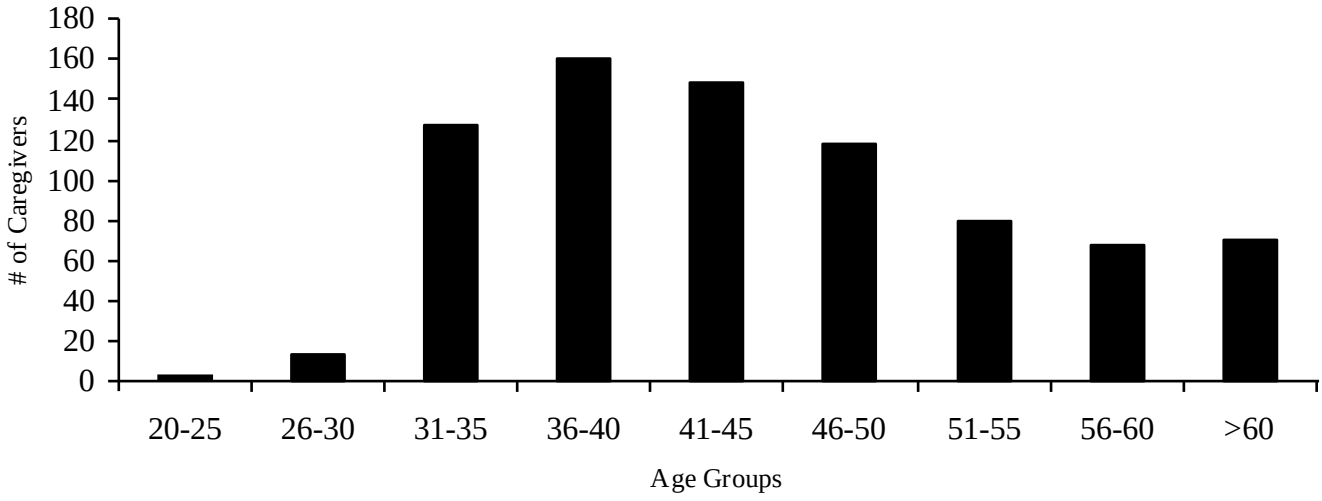
Table 1. Age 16 Caregiver Race/Ethnicity

		Age 16			
	N	White/ Caucasian % (n)	Black/ African American % (n)	Hispanic % (n)	Other* % (n)
Overall	799	33.5 (268)	53.6 (428)	7.5 (60)	5.4 (43)
Study Site					
EA	160	0.9 (7)	18.9 (151)	0.0 (0)	0.2 (2)
MW	120	2.9 (23)	8.8 (70)	2.6 (21)	0.7 (6)
SO	130	5.0 (40)	11.3 (90)	0.0 (0)	0.0 (0)
SW	204	9.6 (77)	9.6 (77)	4.4 (35)	1.9 (15)
NW	185	15.1 (121)	5.0 (40)	0.5 (4)	2.5 (20)

Source. Based on data received at the Coordinating Center through July '09.
* Includes Asian, Native American, and Mixed Races.

Age Distribution. Figure 1 displays the mean age of LONGSCAN caregivers at the Age 16 interview. Caregiver's at the Age 16 interview had an overall mean age of 45.3 (SD = 10.6).

Figure 1. Caregiver Age at the Age 16 Interview



Source. Based on data received at the Coordinating Center through July '09.

Educational Level. Table 2 shows highest caregiver educational level by race and study site, based on responses at the Age 16 interview. Slightly more than 76% of LONGSCAN caregivers had obtained a high school diploma or equivalency certificate (GED) at the Age 16 interview.

Table 2. Age 16: Caregiver Education

	Obtained H.S. Diploma/GED		Obtained Vocational Certificate	Obtained Associate Degree	Obtained Bachelor Degree	Masters and/or Doctorate Degree
	N	% (n)	N	% (n)	% (n)	% (n)
Overall	798	76.4 (610)	800	35.4 (283)	9.7 (78)	6.2 (50)	2.1 (17)
Race/Ethnicity							
White	267	28.2 (224)	266	10.0 (8)	3.6 (29)	3.4 (27)	1.4 (11)
Black	426	39.1 (311)	428	21.3 (170)	4.9 (39)	1.2 (10)	0.7 (6)
Hispanic	59	4.9 (39)	60	1.9 (15)	0.9 (7)	0.8 (6)	0.0 (0)
Other *	43	4.1 (33)	43	2.1 (17)	0.4 (3)	0.9 (7)	0.0 (0)
Study Site							
EA	159	14.0 (112)	160	7.7 (62)	1.2 (10)	0.4 (3)	0.2 (2)
MW	119	10.3 (82)	120	5.4 (43)	1.1 (9)	0.7 (6)	0.1 (1)
SO	132	11.0 (88)	130	4.0 (32)	1.4 (11)	0.1 (1)	0.1 (1)
SW	203	20.7 (165)	205	9.9 (79)	3.3 (26)	2.7 (22)	1.0 (8)
NW	185	20.4 (163)	185	8.4 (67)	2.7 (22)	2.2 (18)	0.6 (5)

Source. Based on data received at the Coordinating Center through July '09.
* Includes Asian, Native American, and Mixed Races.

Employment Status. Table 3 displays caregiver employment status for the Age 16 interview. Forty-six percent of caregivers were working full time at the Age 16 interview, while 32% of caregivers reported that they didn't work because they were either retired or disabled.

Table 3. Age 16 Caregiver Employment Status

	N	Work Full Time % (n)	Work Part Time % (n)	Other (i.e., student, work sometimes) % (n)	Unemployed % (n)	Don't work (i.e., retired, disabled) % (n)
Overall	802	45.6 (366)	10.2 (82)	4.1 (33)	7.7 (62)	32.3 (259)
Race/Ethnicity						
White	268	15.0 (120)	4.5 (36)	1.6 (13)	1.1 (9)	11.3 (9)
Black	428	25.0 (200)	3.6 (29)	2.4 (19)	5.6 (45)	16.9 (135)
Hispanic	60	4.0 (24)	1.0 (8)	0.1 (1)	0.6 (5)	2.7 (22)
Other *	43	2.5 (20)	1.1 (9)	0.0 (0)	0.2 (2)	1.5 (12)
Study Site						
EA	160	10.5 (84)	1.0 (8)	0.6 (5)	2.4 (19)	5.5 (44)
MW	120	6.0 (48)	2.0 (16)	0.5 (4)	1.9 (15)	4.6 (37)
SO	132	8.8 (71)	1.1 (9)	0.4 (3)	1.9 (15)	4.6 (37)
SW	205	10.1 (81)	3.2 (26)	1.2 (10)	0.7 (6)	10.2 (82)
NW	185	10.2 (82)	2.9 (23)	1.4 (11)	1.2 (10)	7.4 (59)

Source. Based on data received at the Coordinating Center through July '09.
* Includes Asian, Native American, and Mixed Races.

Marital Status. Table 4 provides descriptive statistics on caregiver marital status at Age 16, by race and study site. Overall, approximately 32% of the maternal caregivers at the Age 16 interview reported that they were single and had never married, while almost 39% were married.

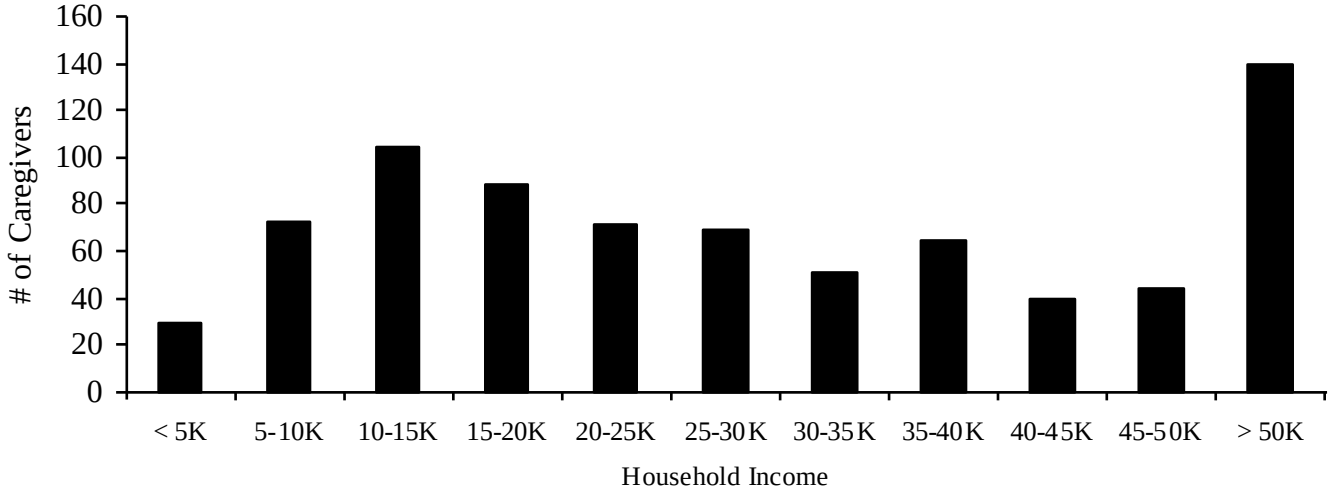
Table 4. Age 16 Caregiver Marital Status

	N	Married % (n)	Single, never married % (n)	Separated % (n)	Divorced % (n)	Widowed % (n)
Overall	801	38.8 (311)	31.5 (252)	7.2 (58)	16.7 (134)	5.7 (46)
Race/Ethnicity						
White	268	18.6 (148)	4.9 (39)	1.9 (15)	6.6 (53)	1.6 (13)
Black	427	14.5 (116)	22.9 (183)	4.3 (34)	8.0 (64)	3.8 (30)
Hispanic	60	4.0 (32)	2.4 (19)	0.2 (2)	0.7 (6)	0.1 (1)
Other *	43	1.9 (15)	1.1 (9)	0.9 (7)	1.2 (10)	0.2 (2)
Study Site						
EA	160	5.4 (43)	9.1 (73)	1.5 (12)	2.1 (17)	1.9 (15)
MW	119	4.4 (35)	6.2 (50)	1.1 (9)	2.4 (19)	0.7 (6)
SO	132	7.0 (56)	5.9 (47)	1.4 (11)	1.6 (13)	0.6 (5)
SW	205	12.4 (99)	4.7 (38)	2.2 (18)	4.5 (36)	1.7 (14)
NW	185	9.7 (78)	5.5 (44)	1.0 (8)	6.1 (49)	0.7 (6)

Source. Based on data received at the Coordinating Center through July '09.
* Includes Asian, Native American, and Mixed Races.

Income. Figure 2 displays the distribution for household income reported by primary caregivers at the Age 16 interview. On average, LONGSCAN families had slightly more than four household members dependent upon the family's total yearly income. The median annual family income for LONGSCAN households was between $25,000 and $30,000.

Figure 2. Household Income at the Age 16 Interview



Source. Based on data received at the Coordinating Center through July '09.

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Caregiver Health
LONGSCAN, 1991

Description of Measure

Purpose
To obtain a brief global self-report of a caregiver's recent health status.

Conceptual Organization
The measure consists of three times focused on current health status, major illnesses in the past year; and any illness or injury that affected the caregiver's ability to care for the LONGSCAN participant youth.

Item Origin/Selection Process
The global rating item was reported to be one of the most reliable and widely used indicators of physical health (Krause & Jay, 1994). The other items were selected as indicators of the caregiver's experience of morbidity, which has implications for the ability to provide adequate care to the participant youth.

Materials
A-CASI (Audio-Computer Assisted Self Interview) delivery system

Time Required
1 minute

Administration Method
A-CASI

Training
Minimal training is required given that the measure is delivered in an A-CASI format.

Scoring

Individual items can be utilized.

LONGSCAN Use

Data Points
Ages 12, 14, and 16

Respondent
Caregiver

Mnemonic and Version
MHL: Ages 12, 14, and 16

Rationale
A caregiver's health may affect his/her ability to care for her child.

Results

Descriptive Statistics

For descriptive statistics of Ages 12 and 14 caregiver health, see the 3rd volume of the Measures Manuals (Knight et al., 2008). Table 1 provides frequencies for items relating to caregiver health at the Age 16 interview. Sixty-eight percent of caregivers reported that they were in 'good' to 'excellent' health, while 33% reported that at some point during the past year they had to stop or cut down on regular work due to an illness or injury; 40% of these caregivers said that this affected their ability to care for their child(ren).

Table 1. Caregiver health at Age 16

	Compared to others your age, would you say your health is…?					Was there a time when you had to stop or cut down on your regular work because of an illness/injury?		Did this illness affect your ability to care for your child(ren)?	
	N	Excellent % (n)	Good % (n)	Fair % (n)	Poor % (n)	N	Yes % (n)	N	Yes % (n)
Overall	775	18.8 (146)	48.8 (378)	26.1 (202)	6.3 (49)	774	32.9 (255)	255	40.0 (102)
Child's Gender									
Male	370	8.9 (69)	24.1 (187)	11.5 (89)	3.2 (25)	370	15.2 (118)	118	18.8 (48)
Female	405	9.9 (77)	24.6 (191)	14.6 (113)	3.1 (24)	404	17.7 (137)	137	21.2 (54)
Study Site									
EA	159	4.3 (33)	11.6 (90)	4.0 (31)	0.6 (5)	159	6.1 (47)	47	8.6 (22)
MW	120	3.1 (24)	6.4 (50)	4.9 (38)	1.0 (8)	120	5.2 (40)	40	6.0 (15)
SO	132	4.0 (31)	6.7 (52)	4.9 (38)	1.4 (11)	132	4.5 (35)	35	3.9 (10)
SW	184	4.4 (34)	12.3 (95)	5.7 (44)	1.4 (11)	184	8.1 (63)	63	9.4 (24)
NW	180	3.1 (24)	11.7 (91)	6.6 (51)	1.8 (14)	179	9.0 (70)	70	12.2 (31)

Notes. Based on data received at the Coordinating Center through July'09.

Publisher Information

This measure is free and available for use upon the receipt of a signed User Agreement for LONGSCAN Project-Developed Measures.

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Duke-UNC Functional Social Support Questionnaire
Broadhead, W. E., Gehlbach, S. H., DeGruy, F. V., and Kaplan, B. H.
1988

Description of Measure

Purpose
To measure an individual's perception of the amount and type of personal social support they receive.

Conceptual Organization
The original instrument included 14 items, grouped into 4 subscales: Quantity of Support, Confidant Support, Affective Support, and Instrumental Support.

Item Origin/Selection Process
The 14 items were derived from a larger questionnaire developed from a review of the literature for content validity and pretested for reliability (Broadhead, Gehlbach, DeGruy, & Kaplan, 1988; 1989).

Materials
See Broadhead, Gehlbach, DeGruy, & Kaplan, 1988.

Time Required
5 minutes

LONGSCAN Administration Method
A-CASI administered

Training
Minimal

Scoring

Score Types
The item response options are on a 5-point scale ranging from '1=much less than I would like' to '5=as much as I would like'. Items 1-10 can be summed for an overall caregiver social support score.

Score Interpretation
Higher scores reflect greater perceived social support.

Norms and/or Comparative Data

The Duke-UNC Functional Social Support Questionnaire (FSSQ) was developed and tested on 401 randomly selected patients attending a family medical clinic in Durham, NC. The population was primarily white, female, and of high SES. Mean item scores on the 14-item instrument for this group ranged from 3.54 to 4.34 on a 5-point scale (Broadhead, Gehlbach, DeGruy, & Kaplan, 1988).

Psychometric Support

Reliability

Test-retest reliability was evaluated over a 2-week time period, and a correlation coefficient of .66 was found. Item-remainder correlations were used to assess internal consistency and ranged from .50 for useful advice, to .85 for help around the house (Broadhead, Gehlbach, DeGruy, & Kaplan, 1989). The Instrumental Support items had the poorest internal consistency. Factor analysis supported the cohesiveness of the a priori scales describing Confidant Support and Affective Support, while Instrumental Support items did not load together on a single factor. "Help when I'm sick in bed" loaded with the Affective Support items. To improve instrument reliability the original 14-item scale was reduced to eight items.

Validity
Construct validity was demonstrated by significant correlations of individual items with measures of symptom status and emotional function. These measures have been shown to relate to social support. Concurrent validity was supported by significant correlations with 3 out of 4 activities measures (Broadhead et al., 1983).

Reliability and validity of the scale are supported by a study in Spain (N = 656) (Bellon Saameno, Delgado Sanchez, Luna del Castillo, & Lardilli, 1996). Factor analysis replicated the results of Broadhead and colleagues in yielding two factors Confidant Support and Affective Support. Low social support was significantly related to living alone, worse subjective health, greater chronic morbidity, mental health disorder, and poorer family functioning (measured by Family APGAR).

In another study using the Duke-UNC Functional Social Support Questionnaire (Williams, Williams & Griggs, 1990), social support was again shown to be strongly correlated with family functioning (measured in this instance by FACES and FCOPES).

LONGSCAN Use

Data Points
Ages 4, 6, and 16

Respondent
Caregiver

Mnemonic and Version
SSQB: Ages 4 and 6
SSCC: Age 16

Rationale
Social support received by caregivers may be an important protective factor for children at risk for maltreatment. The measure was selected because it is brief, simple to administer, and has acceptable reliability and validity.

Administration and Scoring Notes
LONGSCAN used a slightly modified version of the FSSQ, comprised of 10 items and 3 a priori scales: Confidant Support, Affective Support, and Instrumental Support. Seven items are from the

original scale and were selected because of their demonstrated reliability and validity by the author. The other three items were developed by LONGSCAN in an attempt to enhance measurement of instrumental support. These items are:

- Help when I need transportation
- Help with cooking and housework
- Help taking care of my children

Results

Descriptive Statistics

For descriptive statistics of the age 4 and 6 Caregiver Social Support scores, please refer to the 1st and 2nd volumes of the measures manuals (Hunter et al., 2003). Table 1 provides descriptive statistics for the age 16 Caregiver Social Support scores by sample demographics.

Table 1. Descriptive Statistics for Age 16 Caregiver Social Support Score by Demographics

		Caregiver Social Support Sum Sore			
	N	M (SD)	Min	Max	Median
Overall	795	40.4 (8.1)	10.0	50.0	42.0
Child's Gender					
Male	385	40.2 (8.3)	10.0	50.0	42.0
Female	410	40.6 (7.8)	12.0	50.0	42.0
Study Site					
EA	159	42.1 (8.1)	10.0	50.0	44.0
MW	132	39.8 (8.1)	16.0	50.0	40.5
SO	116	41.8 (6.4)	13.0	50.0	43.0
SW	205	40.2 (8.1)	11.0	50.0	42.0
NW	183	38.6 (8.5)	13.0	50.0	40.0

Source. Based on data received at the Coordinating Center through February '10.

Reliability

Internal consistency for the Caregiver Social Support Score sample was excellent (Cronbach Alpha = .88).

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Center for Epidemiologic Studies Depression Scale (CES-D)

Radloff, L. S.

1977

Description of Measure

Purpose

To measure self-reported symptoms associated with depression that have been experienced in the past week (Hunter et al, 2003).

Conceptual Organization

The CES-D includes 20 items comprising six scales that reflect the major dimensions of depression: depressed mood, feelings of guilt and worthlessness, feelings of helplessness and hopelessness, psychomotor retardation, loss of appetite, and sleep disturbance (Hunter et al, 2003).

Item Origin/Selection Process

The items were selected from a pool of items from previously validated depression scales (e.g., Beck, Ward, Mendelson, Mock, & Erbaugh, 1961; Gardner, 1968; Raskin, Schulterbrandt, Reatig, & McKeon, 1969; Zung, 1965). The main components of depressive symptomatology (depressed mood, feelings of guilt and worthlessness, feelings of helplessness and hopelessness, psychomotor retardation, loss of appetite, and sleep disturbance) were identified from clinical literature and factor analyses (Hunter et al, 2003).

Materials

LONGSCAN utilized an A-CASI delivery system for the Age 16 interview. More typically, the measure is self or interviewer administered using paper and pencil forms.

Time Required

5 minutes

Administration Method

A-CASI

Training

Minimal.

Scoring

Score Types

Response categories indicate the frequency of occurrence of each item, and are scored on a 4-point scale ranging from 0 (rarely or none of the time) to 3 (most or all of the time). Scores for items 4, 8, 12, and 16 are reversed before summing all items to yield a total score. Total scores can range from 0 to 60 (Radloff, 1977).

Score Interpretation

Higher scale, and item-level scores with the exception of the reverse scored items, indicate more depressive symptoms. A score of 16 or higher has been used extensively as the cut-off point for high depressive symptoms on this scale (Radloff, 1977). However, false positives on the order of 15% to 20% have resulted from use of this cut-off point, leading some researchers to suggest that

a higher cut-off point be used (Boyd, Weissman, Thompson, & Myers, 1982; Zich, Attkisson, & Greenfield, 1990) (Hunter et al, 2003).

Psychometric Support

Reliability
The CES-D has been shown to be a reliable measure for assessing the number, types, and duration of depressive symptoms across racial, gender, and age categories (Knight, Williams, McGee & Olaman, 1997; Radloff, 1977; Roberts, Vernon, & Rhoades, 1989). High internal consistency has been reported with Cronbach's alpha coefficients ranging from .85 to .90 across studies (Radloff, 1977). (Hunter et al, 2003)

Validity
Concurrent validity by clinical and self-report criteria, and substantial evidence of construct validity, have been demonstrated (Radloff, 1977). However, there is evidence that the CES-D, while a useful measure of the level of depressive symptoms, may not be a good tool for screening for clinical depression or major depression (Roberts, Vernon, & Rhoades, 1989). (Hunter et al., 2003)

LONGSCAN Use

Data Points
Pre-Age 4: MW & NW sites only
Ages 4, 6, 12, 14 & 16: all sites

Respondent
Primary maternal caregiver

Mnemonic and Version
DEPA: Pre-age 4, age 4 & 6
DEPB: Ages 12, 14, & 16 item-level data
CESS: Age 12, 14, and 16 scored data

Rationale
Depression is a well-established risk factor for compromised parenting (Downey & Coyne, 1990). The CES-D was selected for the LONGSCAN study because it is one of the best known and most widely used measures of depressive symptomatology in the general population, with documented reliability and validity in the published literature (Hunter et al, 2003).

Administration and Scoring Notes
The CES-D was administered to primary caregivers in the LONGSCAN consortium starting with the Age 12 interview using an audio-computer administered self-interview (A-CASI). Prior administration utilized interviewer-administered paper and pencil format. A study comparing the administration of the CES-D by conventional versus the computerized method found no significant differences between reported means and variances of the two methods. Equivalent form reliability and internal consistency of the two CES-D forms were both very high (Gonzaelez, Spiteri, & Knowlton, 1995).

Results

Descriptive Statistics

For descriptive statistics of the Ages 4 -14 Center for Epidemiologic Studies Depression Scale, please refer to the 1st, 2nd, and 3rd volumes of the measures manuals (Hunter et al., 2003 & 2003; Knight, 2008). Table 1 provides descriptive statistics for the Age 16 CES-D total scores, including the percent of caregivers scoring 16 or higher, and mean total scores. 30% of caregivers in the LONGSCAN sample scored 16 or above, reflecting rates similar to those reported at Ages 12-14.

Table 1. Descriptive Statistics for Age 16 CES-D Total Scores

		Age 16 CES-D Total	
	N	n (%) >/=16	M (SD)
Overall	773	235 (30.4)	12.0 (10.2)
Caregiver Race			
Caucasian	266	88 (11.4)	12.5 (10.9)
African American	422	126 (16.4)	11.9 (9.9)
Hispanic	53	12 (1.6)	11.4 (8.7)
Other	42	8 (1.0)	11.4 (9.8)
Study Site			
EA	160	39 (5.0)	10.8 (8.9)
MW	120	43 (5.6)	13.8 (10.9)
SO	132	49 (6.3)	13.2 (11.0)
SW	189	46 (6.0)	10.5 (10.0)
NW	186	58 (7.5)	12.7 (10.0)

Source. Based on data received at the Coordinating Center through July'09.

Reliability

Consistent with previous findings by other researchers (see section on psychometric support), we observed evidence of high internal consistency for the CES-D (age 16 α = .90).

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Child's Life Events
LONGSCAN
1992

Description of Measure

Purpose
To document significant events in a child's life in the past year.

Conceptual Organization
The instrument contains 31 items covering events including changes in family composition, upheavals in living arrangements, sickness or death of people close to the child, sickness or injury experienced by the child, school changes, legal problems in the child's family, child's exposure to violence, and family accomplishments. The respondent answers yes/no to whether each event occurred. For most events, a "yes" response leads to follow-up questions about the event. At age 16, the participant child is included among the possible subject or object of the life event (i.e., s/he may have had a baby).

Item Origin/Selection Process
Coddington (1972) developed a set of instruments called Life Event Records for preschool-, elementary school-, junior high school-, and senior high school-aged children for the purpose of quantifying events requiring a readjustment on the part of the individual. Because children's lives are directly affected by the actions of family members, many of the items selected focus on caregiver or family events. At age 16, the child's own life events are included.

LONGSCAN added items that may occur in low-income samples (e.g., homelessness, eviction) and items capturing the child's exposure to violent events. Prior to age 16, care was taken to include only items that represent events that occurred independent of the child's functioning (e.g., we did not include items describing school failure, relationship problems, etc.). To address the concern that the questionnaire was heavily weighted toward negative events, the form concludes with some positive or neutral items. It was also observed that caregivers may perceive being able to answer "no" to negative items as a more positive experience than answering "yes" to positive items.

Materials
Non-copyrighted LONGSCAN form is included in this manual.

Time Required
10-15 minutes

LONGSCAN Administration Method
A-CASI administered

Training
Minimal

Scoring
Score Types

Events can be summed in different ways, depending on the objective of the analysis. For example, the total number of life events can be obtained by summing all responses. Alternatively, items can be summed separately for life events deemed positive and negative, with ambiguous items excluded.

Sandler and Block (1979), using a modified version of Coddington's Life Events Scale for children, tested various scoring methods (including a simple count of all events experienced, separate scores for positive and negative, and weighted sum scores) and found that the simple count correlated highly with the weighted sum score, and was the strongest predictor of a child's adjustment.

Score Interpretation
Higher scores indicate more life events experienced in the past year.

LONGSCAN Use

Data Points
Age 6, 7, 8, 9, 10, 11, 12, 14, 16

Respondent
Caregiver

Mnemonic and Version
LECA: Age 6, 7.

LEB: Age 8, 9, 10, and 11. No modifications. Form version changed due to change in data entry system.

LECC: Age 12 and 14. Select follow-up questions asking for more detail about particular events were eliminated.

LECD: Age 16. In recognition of his/her likely increasing autonomy, the child's own life events were added to the measure. The wording of some items were changed to accommodate the child's age and select items included in earlier forms were deleted.

Rationale
Holmes and Rahe (1967) postulated that any change (positive or negative) requires readjustment and thus produces some stress. Children who experience multiple major life events, especially within a short time frame, are at risk for behavioral and academic difficulties (Compas, 1987; Dubow & Tisak, 1989; Wertlieb, Weigel, & Feldstein, 1987). Many life events (e.g., births, deaths, marriages, divorces, accidents, illnesses, moves, school changes, financial changes, jailing or imprisonment, etc.) overlap with other life events (Coddington, 1972). Life events are tracked each year to account for significant experiences in the subject child's life that might have an impact on development or functioning.

Administration and Scoring Notes
Care must be taken in scoring items 22 and 30. In Item 22 the life event is represented by either "began new school" or "changed schools". In Item 24, if household finances got worse or better, the item is scored as a life event.

Results

Descriptive Statistics

For descriptive statistics of the earlier life events scores/items, please refer to the 1st, 2nd, and 3rd volumes of the measures manuals (Hunter et al., 2003; Knight et al., 2008). Table 1 shows mean scores and frequencies for life events reported at the Age 16 interview, by demographics. The mean number of life events experienced by LONGSCAN children during the preceding year was close to 5. The ten most common events experienced by all LONGSCAN children, in descending order of frequency were: starting school or changing schools (31%), someone close to the child having a serious illness/accident (26%), someone close to the child dying (24%), child moving with family to a new place (20%), child having to go to court (19%), someone in the household moving out (18%), someone in the household graduating (17%), someone in the household being arrested (15%), someone in the household going to jail (15%) and someone moving in (13%).

Table 1. Descriptive Statistics for Age 16 Life Events by Demographics

			Ten Most Endorsed Life Events (in the past year)									
	N	Total Life Events M (SD)	Did anyone move out f? %	Did anyone move in? %	Did child move with family to new place? %	Anyone close to child get illness/accident? %	Did anyone close to child die? %	Did child have to go to court? %	Was anyone in household arrested? %	Was anyone in household jailed? %	Did child begin/change to a new school? %	Did anyone in household graduate? %
Overall	788	4.6 (2.6)	17.8	13.1	19.7	26.4	24.3	18.6	15.1	15.1	30.5	16.5
Child's Gender												
Male	381	4.6 (2.5)	9.0	7.4	8.6	11.0	10.5	10.7	8.4	7.9	14.2	7.9
Female	407	4.6 (2.6)	8.8	5.7	11.0	15.4	13.7	7.9	6.7	7.2	16.2	8.6
Study Site												
EA	160	4.0 (2.2)	2.3	1.4	3.2	3.6	5.7	2.7	2.5	2.2	5.7	4.1
MW	120	4.4 (2.5)	2.8	1.9	4.2	3.2	3.3	2.3	2.0	1.6	4.8	3.3
SO	117	3.0 (2.1)	1.1	1.0	2.9	1.9	3.1	1.5	1.1	1.0	3.9	0.4
SW	205	5.6 (2.7)	5.6	4.4	3.7	10.3	7.7	7.2	4.3	5.8	9.4	6.1
NW	186	5.2 (2.5)	6.0	4.3	5.7	7.4	4.4	4.8	5.1	4.4	6.6	2.7

Source. Based on data received at the Coordinating Center through July '09.

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Conflict Tactic Scales: Parent to Child (CTSPC)

Straus, M. 1979

Straus, M.A., Hamby, S.L., Finkelhor, D., Moore, D.W., & Runyan, D.K. 1998

Description of Measure

Purpose

To measure the extent to which caregivers use reasoning and nonviolent discipline, verbal aggression, or physical aggression in response to the behavior of the adolescent participant.

Conceptual Organization

The Conflict Tactic Scales (CTS) were designed to measure the range of tactics used in response to conflict with a family member and the frequency with which respondents use specific tactics, focusing on "acts" rather than "injuries." Several different CTS were developed for use in different types of relationships; this entry focuses on the revised parent-child version of the scale.

In this revision of the instrument, the CTSPC (Straus et al., 1998), the Reasoning dimension is re-conceptualized as Non-violent Discipline, with the addition of punitive behavior items to better reflect tactics commonly used by contemporary parents. This version also divides physical assault into minor, severe, and very severe, and presents the items in a random interspersed order.

Item Origin/Selection Process

The original CTS items were selected through factor analyses (Straus, 1974, 1979), and modifications and additions were derived through discussions among the authors of the CTSPC and their colleagues (Straus et al. 1998).

Materials

LONGSCAN utilized an A-CASI administration.

Time Required

3-5 inutes

Administration Method

LONGSCAN utilized an A-CASI administration.

Training

Minimal training was required given that the measure was delivered in an A-CASI format. For more information about training for administration of the measure without an A-CASI system, please see the Conflict Tactics Scales Handbooks (Straus, M.A., Hamby, S.L. & Warren, W.L., 2003)

Scoring

Score types

Please see the Conflict Tactics Handbook (Straus, M.A., Hamby, S. L. & Warren, W.L. (2003)for additional scoring information.

There are 22 items on CTSPC that ask about the frequency of specific nonviolent and violent parent-child interactions that have occurred in the past year. When scored these items are broken down into 3 scales

(Non-Violent Discipline, Psychological Aggression, and Physical Assault) and 3 physical assault subscales (minor, severe, extreme). Scales and answer sets are also shown below.

- Non-violent Discipline: Items 1, 2, 5, 17
- Psychological Aggression: Items 6, 10, 12, 14, 21
- Physical Assault: Items 3, 4, 7, 8, 9, 11, 13, 15, 16, 18, 19, 20, 22
    - Minor Assault: Items 3, 4, 8, 16, 18, 22
    - Severe Assault: Items 7, 15, 20
    - Assault: Items 9, 11, 13, 19

Table 1. Values for original answer set and recoded values used for subscale scores

Answer Set	*Original Values*	*Past Year Score Values*	*Past Year Item Count Values*	*Lifetime (but not past year) Values*
This has never happened	0	0	0	0
Once in the past year	1	1	1	0
Twice in the past year	2	2	1	0
3 to 5 times in the past year	3	4	1	0
6 to 10 times in the past year	4	8	1	0
11 to 20 times in the past year	5	15	1	0
More than 20 times in the past year	6	25	1	0
Not in the past year, but it did happen before that	7	0	0	1

Three types of scores are derived using the original values as noted in Table 1: Past Year Scores, Past Year Item Counts, and Lifetime (but not past year) Scores. Original values are then recoded as noted above, and individual subscale scores are created by taking the sum of the recoded values from Table 1. These sum scores can then be used to create dichotomous indicators for whether or not the discipline method was utilized (separately by time point).

Score Interpretation
Individual item and subscale scores represent the frequency of the occurrence of a particular type of behavior (e.g., slapping).

LONGSCAN Use

Data Points
Ages 12, 14, and 16
The CTS were also administered at Ages 4, 6 and 8.

Respondent
Caregiver

Mnemonic and Version
PCCT: Ages 12, 14 and 16 (item level) - *Note: The CTSC and CTSD were combined to make up the PCCT*.
PCCS: Ages 12, 14 and 16 (scored datasets)

Rationale
The CTSPC focuses on actions rather than attitudes toward violence or child outcomes subsequent to experienced violence. The focus on actions permits investigation of the covariates and impacts of particular types of conflict tactics used with adolescents. Furthermore, Straus' Conflict Tactics Scales are widely used

and reputable measures of parent to child conflict response, and the presence of parent to child violence.

Results

For descriptive statistics of the age 12 and 14 CTSPC Scores, please refer to the 3rd volume of the measures manuals (Knight et al., 2008). Table 2 provides descriptive statistics for CTSPC Non-Violent Discipline scores/indicators at the Age 16 interview. Almost all caregivers (95%) reported using non-violent forms of discipline with their adolescent in the past year.

Table 2. CTSPC: Non-Violent Discipline at Age 16

		Non-Violent Discipline				
	N	Past Year Score M (SD)	Occurred in Past Year %Yes (n)	Ever Occurred %Yes (n)	Lifetime Score M (SD)	Occurred in Lifetime (but not the past year) %Yes (n)
Overall	693	23.1 (21.7)	95.2 (660)	97.5 (676)	0.5 (0.8)	35.2 (244)
Child's Gender						
Male	330	24.5 (23.0)	45.3 (314)	46.3 (321)	0.5 (0.9)	16.7 (116)
Female	363	21.8 (20.4)	49.9 (246)	51.2 (355)	0.5 (0.8)	18.5 (128)
Study Site						
EA	151	17.6 (19.8)	19.6 (136)	20.2 (140)	0.4 (0.7)	6.3 (44)
MW	79	17.9 (18.0)	11.1 (77)	11.3 (78)	0.5 (0.9)	3.6 (25)
SO	129	24.6 (22.0)	17.9 (124)	18.3 (127)	0.6 (0.8)	7.1 (49)
SW	160	25.1 (22.0)	22.2 (154)	22.7 (157)	0.5 (0.8)	7.6 (53)
NW	174	27.3 (23.0)	24.4 (169)	25.1 (174)	0.6 (0.9)	10.5 (73)

Notes. Based on data received at the Coordinating Center through February '10.

Table 3 provides descriptive statistics for CTSPC Psychological Aggression scores/indicators at the Age 16 interview. The majority of caregivers (69%) reported using forms of psychological aggression with their adolescent in the past year. More psychological aggression was used with girls (36%) than boys (33%) in the past year.

Table 3. CTSPC: Psychological Aggression at Age 16

		Psychological Aggression				
	N	Past Year Score M (SD)	Occurred in Past Year %Yes (n)	Ever Occurred %Yes (n)	Lifetime Score M (SD)	Occurred in Lifetime (but not the past year) %Yes (n)
Overall	699	10.9 (17.1)	69.2 (484)	79.8 (558)	0.4 (0.8)	26.9 (188)
Child's Gender						
Male	332	11.6 (18.1)	33.1 (231)	36.9 (258)	0.4 (0.9)	11.6 (81)
Female	367	10.3 (16.2)	36.2 (253)	42.9 (300)	0.4 (0.8)	15.3 (107)
Study Site						
EA	150	11.1 (19.4)	13.2 (92)	15.3 (107)	0.3 (0.7)	3.9 (27)
MW	79	7.7 (11.6)	7.7 (54)	8.3 (58)	0.4 (0.8)	2.3 (16)
SO	131	16.2 (22.1)	14.7 (103)	17.0 (119)	0.7 (1.0)	7.7 (54)
SW	163	9.4 (13.3)	16.2 (113)	18.7 (131)	0.4 (0.8)	5.2 (36)
NW	176	9.8 (15.2)	17.4 (122)	20.5 (143)	0.5 (0.8)	7.9 (55)

Notes. Based on data received at the Coordinating Center through February '10.

Table 4 provides descriptive statistics for CTSPC Physical Assault scores/indicators at the Age 16 interview. Twenty-four percent of caregivers reported using physical assault in response to conflict in the past year.

Table 4. CTSPC: Physical Assault at Age 16

		Physical Assault				
	N	Past Year Score M (SD)	Occurred in Past Year %Yes (n)	Ever Occurred %Yes (n)	Lifetime Score M (SD)	Occurred in Lifetime (but not the past year) %Yes (n)
Overall	198	2.3 (11.3)	24.5 (171)	49.1 (343)	0.9 (1.5)	35.4 (247)
Child's Gender						
Male	332	3.1 (14.9)	11.9 (83)	23.6 (165)	1.0 (1.7)	17.5 (122)
Female	366	1.6 (6.6)	12.6 (88)	25.5 (178)	0.7 (1.4)	17.9 (125)
Study Site						
EA	152	3.3 (20.7)	4.0 (28)	8.2 (57)	0.6 (1.3)	5.7 (40)
MW	79	1.7 (7.9)	2.0 (14)	3.6 (25)	0.7 (1.8)	2.4 (17)
SO	130	2.9 (7.9)	6.4 (45)	12.9 (90)	1.5 (1.8)	10.2 (71)
SW	163	1.5 (4.7)	5.3 (37)	11.5 (80)	0.7 (1.4)	7.4 (52)
NW	174	2.1 (6.7)	6.7 (47)	13.0 (91)	0.9 (1.5)	9.6 (67)

Notes. Based on data received at the Coordinating Center through February '10.

Table 5 provides descriptive statistics for CTSPC Minor Physical Assault scores/indicators at the Age 16 interview. Twenty-two percent of caregivers reported using forms of minor physical assault with their child in the past year.

Table 5. CTSPC: Minor Physical Assault at Age 16

		Minor Physical Assault				
	N	Past Year Score M (SD)	Occurred in Past Year %Yes (n)	Ever Occurred %Yes (n)	Lifetime Score M (SD)	Occurred in Lifetime (but not the past year) %Yes (n)
Overall	699	1.8 (7.4)	22.0 (154)	46.3 (324)	0.7 (1.2)	33.6 (235)
Child's Gender						
Male	333	2.5 (9.6)	11.0 (77)	22.3 (156)	0.8 (1.3)	16.4 (115)
Female	366	1.1 (4.5)	11.0 (77)	24.0 (168)	0.6 (1.1)	17.2 (120)
Study Site						
EA	153	2.0 (10.7)	4.0 (28)	7.7 (54)	0.4 (0.9)	5.0 (35)
MW	79	1.5 (7.0)	1.9 (13)	3.4 (24)	0.4 (1.0)	2.4 (17)
SO	130	2.5 (7.6)	6.0 (42)	12.6 (88)	1.2 (1.4)	10.0 (70)
SW	163	1.3 (4.5)	4.6 (32)	10.6 (74)	0.6 (1.2)	7.2 (50)
NW	174	1.6 (6.2)	5.6 (39)	12.0 (84)	0.8 (0.2)	9.0 (63)

Notes. Based on data received at the Coordinating Center through February '10.

Table 6 provides descriptive statistics for CTSPC Severe Physical Assault scores/indicators at the Age 16 interview. Five percent of caregivers reported using forms of severe physical assault with the participant child in the past year. Slightly more girls (3%) than boys (2%) experienced severe physical assault by caregivers in the past year.

Table 6. CTSPC: Severe Physical Assault at Age 16

		Severe Physical Assault				
	N	Past Year Score M (SD)	Occurred in Past Year %Yes (n)	Ever Occurred %Yes (n)	Lifetime Score M (SD)	Occurred in Lifetime (but not the past year) %Yes (n)
Overall	702	0.3 (2.6)	5.0 (35)	12.9 (91)	0.1 (0.4)	8.8 (62)
Child's Gender						
Male	334	0.3 (2.9)	1.8 (13)	6.8 (48)	0.1 (0.4)	5.8 (41)
Female	368	0.3 (2.3)	3.1 (22)	6.1 (43)	0.1 (0.3)	3.0 (21)
Study Site						
EA	153	0.7 (5.2)	0.8 (6)	2.0 (14)	0.1 (0.4)	1.3 (9)
MW	79	0.1 (0.9)	0.6 (4)	1.6 (11)	0.1 (0.5)	1.0 (7)
SO	131	0.3 (1.3)	1.4 (10)	4.4 (31)	0.2 (0.5)	3.4 (24)
SW	163	0.1 (0.8)	0.8 (6)	2.3 (16)	0.1 (0.3)	1.6 (11)
NW	176	0.2 (0.9)	1.3 (9)	2.7 (19)	0.1 (0.3)	1.6 (11)

Notes. Based on data received at the Coordinating Center through February '10.

Table 7 provides descriptive statistics for CTSPC Extreme Physical Assault scores/indicators at the Age 16 interview. Three percent of caregivers reported using extreme physical assault with their participant child in the past year.

Table 7. CTSPC: Extreme Physical Assault at Age 16

		Extreme Physical Assault				
	N	Past Year Score M (SD)	Occurred in Past Year %Yes (n)	Ever Occurred %Yes (n)	Lifetime Score M (SD)	Occurred in Lifetime (but not the past year) %Yes (n)
Overall	701	0.2 (3.1)	2.6 (18)	4.8 (34)	0.0 (0.3)	2.7 (19)
Child's Gender						
Male	333	0.4 (4.3)	1.1 (8)	2.3 (16)	0.0 (0.3)	1.6 (11)
Female	368	0.1 (1.1)	1.4 (10)	2.6 (18)	0.0 (0.3)	1.1 (8)
Study Site						
EA	152	0.6 (6.2)	0.6 (4)	1.3 (9)	0.1 (0.4)	1.0 (7)
MW	79	0.1 (0.5)	0.1 (1)	0.4 (3)	0.1 (0.6)	0.4 (3)
SO	131	0.1 (0.5)	0.7 (5)	1.1 (8)	0.0 (0.3)	0.4 (3)
SW	163	0.0 (0.4)	0.4 (3)	0.7 (5)	0.0 (0.1)	0.3 (2)
NW	176	0.3 (2.3)	0.7 (5)	1.3 (9)	0.0 (0.2)	0.6 (4)

Notes. Based on data received at the Coordinating Center through February '10.

Reliability

Table 14 provides statistics for the internal reliability for CTSPC scores at the Age 16 interviews.

Table 14. Cronbach Alphas for CTSPC Discipline Scores at Ages 16

	Non-Violent Discipline		Psych Aggression		Physical Assault		Minor Physical Assault		Severe Physical Assault		Extreme Physical Assault	
	N	α	N	α	N	α	N	α	N	α	N	α
Age 16	693	.68	699	.71	698	.82	699	.72	702	.54	701	.76

Notes. Based on data received at the Coordinating Center through February '10.

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The Revised Conflict Tactics Scales (CTS2): Partner-to-Partner
Straus, M., et al., 1996

Description of Measure

Purpose
To assess the type and severity of conflict tactics used between the child's primary caregiver and their partner during the past year, or ever used.

Conceptual Organization
The Conflict Tactic Scales (CTS, CTS2) were designed to measure the range of tactics used in response to conflict with a family member and the frequency with which respondents use specific tactics to solve conflicts. CTS were developed for use with (1) partners reporting on a dating, cohabiting, or marital relationship; (2) parents reporting on behavior towards their children; (3) children reporting on the behavior of parents toward each other; (4) children reporting on the behavior of parents towards them; (5) children reporting on their interaction with siblings; (6) adults reporting on the behavior of parents toward them when they were children; and (7) adults reporting on behavior of parents toward each other when they were children.

The 78-item scale (39 behaviors or experiences, each asked once for respondent and once for partner) is comprised of five subscales, including Negotiation (cognitive and emotional); Psychological aggression (minor and major); Physical Assault (minor and severe); Injury (minor and severe); and Sexual Coercion (minor and severe). Items are interspersed by severity.

The response categories gauge the frequency with which acts were used during conflict with a partner in the past year using a 6-point scale ranging from "never" to "20 or more times"(7). There are also response options of "Never in the last year, but it did happen before that," and "This has never happened."

Item Origin/Selection Process
The theoretical basis of all versions of the CTS is conflict theory, which assumes that conflict is inevitable and essential to bringing about positive change, but high levels of conflict, particularly when the means by which it is addressed involve hostile behaviors, can adversely affect the welfare of those involved (Straus, 1979). The conceptual framework of the CTS comes from the "catharsis theory" of violence control, which posits three modes of dealing with conflict: rational discussion and reasoning, verbal and nonverbal acts which symbolically hurt the other party, and the use of physical force as a means of resolving the conflict (Straus, 1974; 1979). The original CTS were developed within this framework through the use of a modeling technique analogous to a factorial design experiment (Straus, 1979). The revised CTS, the CTS2, includes new scales (Sexual Coercion and Injury), additional items added to the original three scales, some item refinement, and improved operationalization of minor and severe levels of conflict tactics. The original CTS items appeared in hierarchical order (least to most severe), while the CTS2 intersperses item-level severity.

Materials
The instruments are available through Western Psychological Services, Los Angeles, CA.

Time Required
About 7 minutes

LONGSCAN Administration Method
Interviewer-administered for the early interviews. For the age 12 and subsequent interviews, LONGSCAN utilized an A-CASI administration

Training
Minimal. Please see the CTS Handbook for additional information on training (Straus, M.A., Hamby, S.L. & Warren, W.L., 2003)

Scoring
Score Types
Subscales are comprised of the following items. :

- Negotiation (items 1, 2, 7, 20, 30, and 39).
  - Negotiation can be separated into two subscales, emotional (items 1, 7, and 20) and cognitive (items 2, 30, and 39).

- Psychological Aggression (items 3, 13, 15, 18, 25, 33, 34, and 35).
  - Psychological Aggression can be separated into two subscales, minor (items 3, 18, 25, and 34) and severe (items 13, 15, 33, and 35).

- Physical Assault (items 4, 5, 9, 23, 27, 11, 14, 17, 19, 22, 31, and 37).
  - Physical Assault can be separated into two subscales, minor (items 4, 5, 9, 23, and 27) and severe (items 11, 14, 17, 19, 22, 27, and 31).

- Sexual Coercion (items 8, 26, 32, 10, 29, 24, and 38).
  - Sexual Coercion can be separated into two subscales, minor (items 8, 26, and 32) and severe (items 10, 29, 24, and 38).

- Injury (items 6, 36, 12, 16, 21, and 28).
  - Injury can be separated into two subscales, minor (items 6 and 36) and severe (items 12, 16, 21, and 28).

There are several methods of scoring the Conflict Tactics Scales. The simplest is to add the response category code values for each scale to create a sum score. A mean score can also be created by taking the average of all items within a particular scale/subscale. Behaviors, or types of behaviors, can also be scored dichotomously as "present" or "not present." Dichotomized scores are used in the calculation of rates. See data dictionary on internal website (http://www.iprc.unc.edu/databook/computing/dictionaries) for additional information regarding scoring.

Score Interpretation
Higher scores indicate more use of the tactic or of a domain of tactics.

Norms and/or Comparative Data
The Conflict Tactics Scale has been used in national incidence studies of family violence (Straus & Gelles, 1986, 1988), and rates characterizing a specific group can be compared to a representative sample of the U.S. population.

Psychometric Support

Reliability
The author reports internal consistency reliability of the subscales ranging from .79 to .95.

Validity
Construct validity of the CTS has been demonstrated in a number of studies (Straus, 1990c). Concurrent validity has been examined by comparing reports obtained separately from husbands and wives. Husband-wife correlations are reported to range from .19 to .80, with a mean of approximately .40 (Straus, 1979). Correlations are lowest for Reasoning and highest for Physical Aggression. The authors suggest that because the CTS and the CTS2 are fundamentally the same conceptually and methodologically, the evidence supporting the validity of the CTS also applies to the CTS2 (Straus, 1996).

LONGSCAN Use

Data Points
Ages 12, 14, 16

The CTS was used at ages 6 and 8.

Respondent
Primary maternal caregiver

Mnemonic and Version
Item –level data:
- Age 6: CTPA (includes both spouse/partner to respondent & respondent to spouse/partner behavior)
- Age 8: CTB (includes only spouse/partner to respondent behavior)
- Ages 12, 14 & 16: CTPC (includes only spouse/partner to respondent behavior)

Scored Data:
- Age 6: CTPS
- Age 8: CTS
- Ages 12, 14, and 16: CPSS

Rationale
Children who live in households where domestic violence is taking place often witness this violence and are at higher risk for being victims of neglect or abuse themselves (Campbell & Lewandowski, 1997; Wright, Wright, & Isaac, 1997). These data were collected to allow examination of the mental and physical effects of intimate partner violence on women and their children.

LONGSCAN Administration and Scoring Notes
At the age 6 and age 8 interviews, maternal caregivers provided data for this measure only if they were currently living with a spouse or partner. At age 12 however, an "ever occurred" option was added to the response set in order to let all caregivers provide data for this measure. The original seven-point response set was reduced to 4 points ranging from 0 (never) to 3 (more than 5 times in the past year). The response set also included a 7 (not in the past year, but it did happen before that) to capture whether or not any behaviors ever occurred.

Results

Descriptive Statistics

For descriptive statistics of the age 6, 8, 12, and 14 Conflict Tactics Scales, please refer to the 1st, 2nd, and 3rd volumes of the measures manuals (Hunter et al., 2003; Knight et al., 2008). Table 1 provides descriptive statistics for the age 16 Conflict Tactics Mean scores for the 5 scales. The percent of those caregivers who endorsed any item (ever occurred) for a given scale is also presented in Table 1.

At age 16, 22% of caregivers reported that they had experienced some sort of physical assault, while 17% reported some sort of injury occurring. A majority of caregivers (61%) reported experiencing psychological aggression, while 18% reported experiencing sexually coercive behaviors. Single parents reported higher percentages on all of the scales. For instance, 15% of single parents reported experiencing physical assault as compared to 6% of caregivers in two parent households.

Table 1. Descriptive Statistics for the Age 16 Conflict Tactics Scale (Partner to Partner) Mean Scores (in the past year) and endorsement of any item for "ever occurred" by Demographics

		Negotiation		Physical Assault		Injury		Psychological Aggression		Sexual Coercion	
	N †	%	M (SD)	%	M (SD)	%	M (SD)	%	M (SD)	%	M (SD)
Overall	340	86.9	1.54 (1.06)	21.9	0.02 (0.14)	16.8	0.01 (0.09)	60.9	0.28 (0.44)	18.1	0.04 (0.18)
Family struct											
Single parent	179	50.9	1.21 (1.05)	15.3	0.02 (0.11)	12.8	0.01 (0.10)	34.7	0.20 (0.38)	12.5	0.03 (0.13)
Two parents	106	36.8	2.11 (0.78)	6.4	0.02 (0.15)	4.6	0.01 (0.09)	29.1	0.39 (0.44)	5.4	0.05 (0.21)
Study Site											
EA	121	29.9	1.50 (1.05)	5.7	0.01 (0.50)	4.5	0.00 (0.04)	18.5	0.19 (0.35)	4.5	0.02 (0.11)
MW	66	16.3	1.36 (1.00)	3.9	0.01 (0.07)	3.0	0.02 (0.10)	11.9	0.23 (0.39)	2.1	0.00 (0.05)
NW	151	40.8	1.65 (1.08)	12.3	0.04 (0.20)	9.3	0.02 (0.12)	30.4	0.37 (0.50)	11.4	0.07 (0.25)

Notes. Based on data received at the Coordinating Center through July '09.
% represents endorsement of ANY item (ever occurred).
† Sample N's may change across scores.
The Southern (SO) and Southwestern (SW) sites did not collect CTS data at age 16.

Reliability

As can be seen in Table 3, internal consistency for the Conflict Tactics scales using the LONGSCAN sample was very good (ranging from .79 to .93).

Table 3. Cronbach Alphas for the Age 16 Conflict Tactics Items

	Negotiation	Physical Assault	Injury	Psychological Aggression	Sexual Coercion
	α	α	α	α	α
Age 16	.90	.93	.79	.87	.88

Notes. Based on data received at the Coordinating Center through July '09.

Affect on Child Functioning

Tables 4 and 5 provide correlations between the Conflict Tactics Scales and other select age 16 outcomes (i.e., T scores from the Child Behavior Checklist, Trauma Symptom Checklist, and Youth Self Report Form).

Table 4. Correlations between Age 16 Conflict Tactics Mean Scores and other Select Age 16 Outcomes

	N	Negotiation	Physical Assault	Injury	Psychological Aggression	Sexual Coercion
Child Behavior Checklist T Scores						
Internalizing Problems	340	.02	.07	.07	.19***	.17**
Externalizing Problems	340	.07	.01	.05	.15**	.06
Total Problems	340	.05	.02	.05	.17**	.10*
Trauma Symptom Checklist T Scores						
Anger	310	-.04	-.02	-.05	.02	.01
Anxiety	310	-.01	.00	-.00	.06	.04
Depression	310	.03	.01	-.02	.03	.10
PTSD	310	-.05	.01	-.01	.00	.05
Dissociation	310	.02	.02	-.02	.01	.10

Notes. Based on data received at the Coordinating Center through July '09.
* <.05, ** <.01, *** <.001

Publisher Information

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Delinquent and Violent Behavior
Adapted from Huizinga, Esbensen & Weiher
1991

Description of Measure

Purpose
This self report measure was originally created for use in the Denver Youth Study to assess a child's or adolescent's involvement in delinquent and violent behavior.

Conceptual Organization
The original scale included five subscales, including theft offenses, assault offenses, status and public disorder offenses, and other offenses, as well as a total delinquency index.

Item Origin/Selection Process
The items were developed for use in the Denver Youth Study and the Causes and Correlates of Delinquency studies, and were based on a measure developed for use in the National Youth Survey (please see http://www.ncjrs.gov/pdffiles1/fs99100.pdf visited 6/2010 for more information on the Causes and Correlates studies). Items were developed based upon review of incidence and prevalence data nationally, and include a comprehensive array of offenses.

Materials & Administration
Self report forms. LONGSCAN used an A-CASI administration.

Time Required
3-5 minutes

Training
Minimal training is required for the A-CASI adaptation given that items are highly structured with forced response sets.

Scoring
For information on scoring the original scales, and discussion of validity and reliability concerns that should be addressed when analyzing composite or scaled scores related to self reported violent and delinquent behavior, please see Huizinga et al, 1991, and Elliott & Huizinga, 1983.

LONGSCAN Use

LONGSCAN simplified the original measure by truncating follow-up items (in order to accommodate the A-CASI delivery system) and by slightly revising the wording of some items. LONGSCAN also modified scoring procedures.

Data Points
Ages 16 and 18

Respondent
Youth

Mnemonic and Version
DELA: Ages 16 & 18

Rationale
Aggressive, violent, and delinquent behaviors are important potential outcomes related to maltreatment and other adverse childhood experiences. Youth self report of delinquent and violent behaviors has prove to be reliable and valid in prior studies (Elliott & Huizinga, 1983).

Scoring
Three severity subscales were developed by LONGSCAN, including minor, moderate and severe delinquency. These were modifications of the original author's subscales, made on the basis of preliminary factor analysis of LONGSCAN data. A composite delinquency score or total score may derived by taking the mean of all 26 items. Individual investigators may choose to use alternative scoring.

Minor Delinquency (5 items):
DELA1: Last yr/ # times carried a hidden weapon
DELA2: Last yr/ # times been unruly in a public place
DELA3: Last yr/ # times made obscene calls
DELA7: Last yr/ # times avoided paying for things
DELA9: Last yr/ # times stole things < $5

Moderate Delinquency (11 items):
DELA4: Last yr/ # times drunk in public place
DELA5: Last yr/ # times purposely damaged property
DELA10: Last yr/ # times stole things $5-50
DELA13: Last yr/ # times snatched purse
DELA14: Last yr/ # times bought/held/sold stolen goods
DELA15: Last yr/ # times gone joyriding
DELA17: Last yr/ # times used slug/fake money
DELA18: Last yr/ # times used checks without permission
DELA19: Last yr/ # times cheated someone by selling something worthless or fake
DELA21: Last yr/ # time hit to hurt
DELA23: Last yr/ # times throw objects at people

Serious Delinquency (10 items):
DELA6: Last yr/ #times purposely set fire house
DELA8: Last yr/ # times steal from building
DELA11: Last yr/ # times stole things $50-100
DELA12: Last yr/ # times stole things $>$100
DELA16: Last yr/ # times stole motor vehicle
DELA20: Last yr/ #times attacked with weapon
DELA22: Last yr/ # times used weapon to get money or things from others
DELA24: Last yr/ # times been involved in gang fights
DELA25: Last yr/ # times paid for sexual relations
DELA26: Last yr/ # times physically hurt someone for sex

Results

Descriptive Statistics

Table 1 below provides descriptive statistics for the 26 stem items on the Age 16 Delinquent and Violent Behavior measure. Roughly 17% of adolescents reported that they carried a hidden weapon (of these, 70% carried a pocket knife; 25% carried another kind of knife; while 15% carried a gun). When asked about other delinquent behaviors, 28% of adolescents reported that they got in trouble for being 'loud, rowdy, or unruly in a public place'; while 9% reported having been in trouble for being drunk in a public place. Petty theft was reported by 11-14% of adolescents; while 4-8% reported stealing things worth greater than $5. When looking at violent behavior, 14% of adolescents reported that they hit someone to 'hurt them badly' and 12% reportedly had been involved in gang fighting.

Table 1. Age 16 Delinquent and Violent Behavior

DELA Stem Items (# of times in the last year)	N	# of times † M (SD)	Endorsed 1 or more times n (%)
Carried a hidden weapon	737	0.3 (0.7)	16.6 (122)
Been loud, unruly in a public place	737	0.4 (0.7)	27.7 (204)
Made obscene calls	736	0.1 (0.4)	10.7 (79)
Was drunk in public place	736	0.1 (0.5)	9.2 (68)
Purposely damaged property	735	0.1 (0.4)	7.5 (55)
Purposely set fire house	735	0.0 (0.3)	3.0 (22)
Avoided paying for things	734	0.2 (0.6)	14.4 (106)
Stole from a building	733	0.1 (0.4)	7.8 (57)
Stole things < $5	732	0.2 (0.5)	11.6 (85)
Stole things between $5-50	731	0.1 (0.4)	8.5 (62)
Stole things between $50-100	733	0.1 (0.3)	4.2 (31)
Stole things > $100	733	0.1 (0.3)	4.1 (30)
Snatched someone's purse	734	0.0 (0.1)	0.5 (4)
Bought/held/sold stolen goods	733	0.1 (0.3)	7.6 (56)
Gone joyriding	732	0.1 (0.4)	6.3 (46)
Stole a motor vehicle	732	0.0 (0.2)	3.7 (27)
Used slug/fake money	733	0.0 (0.2)	2.3 (17)
Used checks without permission	734	0.0 (0.1)	1.5 (11)
Cheat by selling something worthless or fake	734	0.1 (0.4)	5.3 (39)
Attacked with weapon	734	0.1 (0.3)	5.3 (39)
Hit someone to hurt them badly	733	0.2 (0.5)	13.8 (101)
Used weapon to get money/things	734	0.0 (0.2)	2.6 (19)
Threw objects at people	733	0.1 (0.3)	6.3 (46)
Involved in gang fights	733	0.2 (0.5)	11.6 (85)
Paid for sexual relations	732	0.0 (0.1)	1.2 (9)
Physically hurt someone	733	0.0 (0.1)	0.7 (5)

Notes. Based on data received at the Coordinating Center through February '10.

† Responses ranged from 0 = 'never'; 1 = '1 or 2 times; 2 = 'between 3-9 times'; 3 = '10 or more times'.

Delinquency Mean Scores

Table 2 below provides descriptive statistics for the Age 16 delinquency mean scores by sample demographics. A large percentage of respondents reported participating in minor (43%) and moderate (33%) acts of delinquency, while 24% reported engaging in more severe acts of delinquency. Boys were more likely to report acts of delinquency than girls, on all three levels. The SW and NW sites (those with the most official reports of abuse) reported higher levels of delinquency than the other three LONGSCAN sites (EA, MW, and SO).

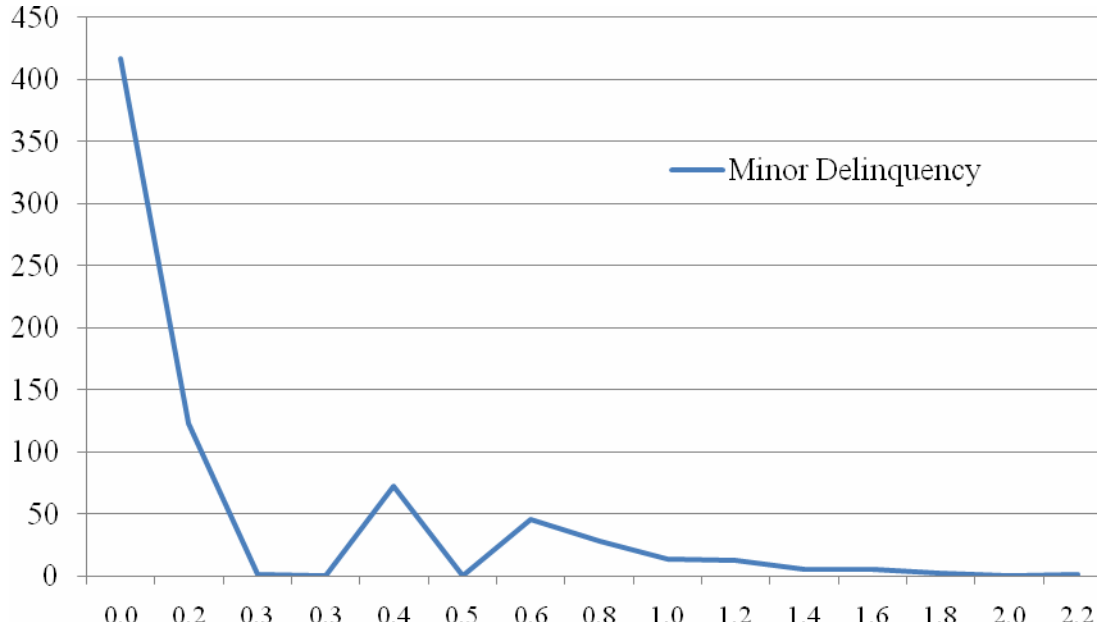
Table 2. Age 16 Delinquency Mean Scores

	Minor Delinquency			Moderate Delinquency			Severe Delinquency		
	N	M (SD)	% (n)	N	M (SD)	% (n)	N	M (SD)	% (n)
Overall	738	0.2 (0.4)	43.5 (321)	738	0.1 (0.2)	32.7 (241)	737	0.1 (0.2)	23.9 (176)
Youth's Gender									
Male	349	0.3(0.4)	22.2 (164)	349	0.1 (0.2)	17.1 (126)	349	0.1 (0.2)	12.6 (93)
Female	389	0.2 (0.3)	21.3 (157)	389	0.1 (0.2)	15.6 (115)	388	0.0 (0.1)	11.3 (83)
Study Site									
EA	146	0.1 (0.3)	6.4 (47)	147	0.0 (0.1)	4.2 (31)	147	0.0 (0.1)	3.7 (27)
MW	121	0.3 (0.4)	8.0 (59)	121	0.1 (0.2)	5.6 (41)	121	0.1 (0.2)	3.5 (26)
SO	111	0.2 (0.3)	5.0 (37)	111	0.1 (0.1)	4.9 (36)	111	0.0 (0.1)	3.3 (24)
SW	178	0.3 (0.4)	12.2 (90)	178	0.1 (0.2)	10.2 (75)	178	0.1 (0.2)	6.6 (49)
NW	182	0.2 (0.4)	11.9 (88)	181	0.1 (0.2)	7.9 (58)	180	0.1 (0.2)	6.8 (50)

Source. Based on data received at the Coordinating Center through February '10.

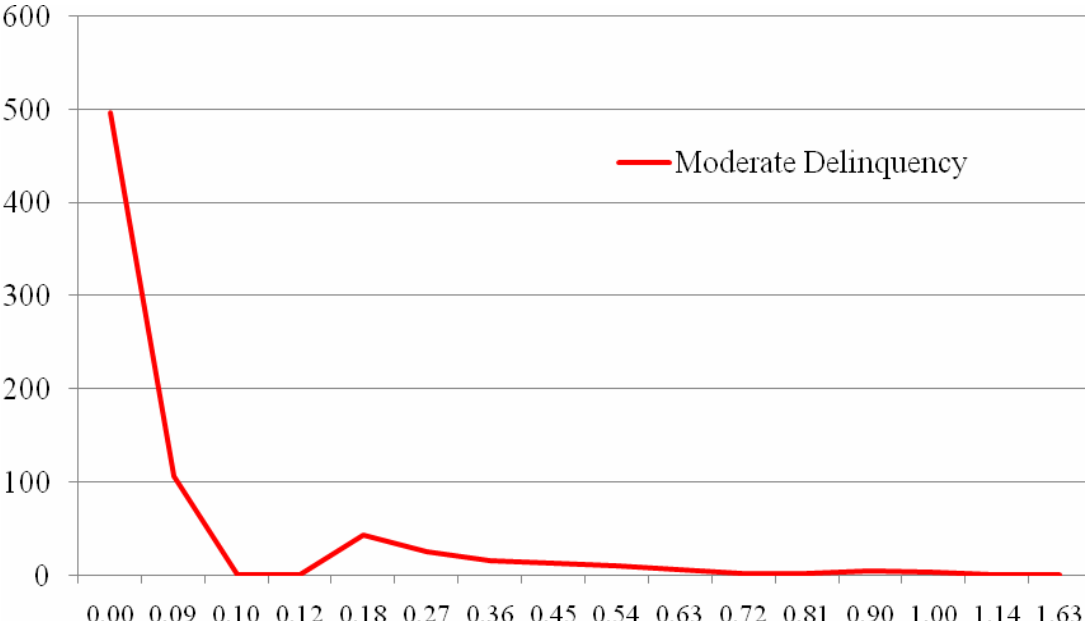
Figures 1-3 provide the distribution of the mean scores for minor, moderate and severe delinquency scales in the Age 16 LONGSCAN sample.

Figure 1. Distribution of Minor Delinquency Mean Scores (N = 738)



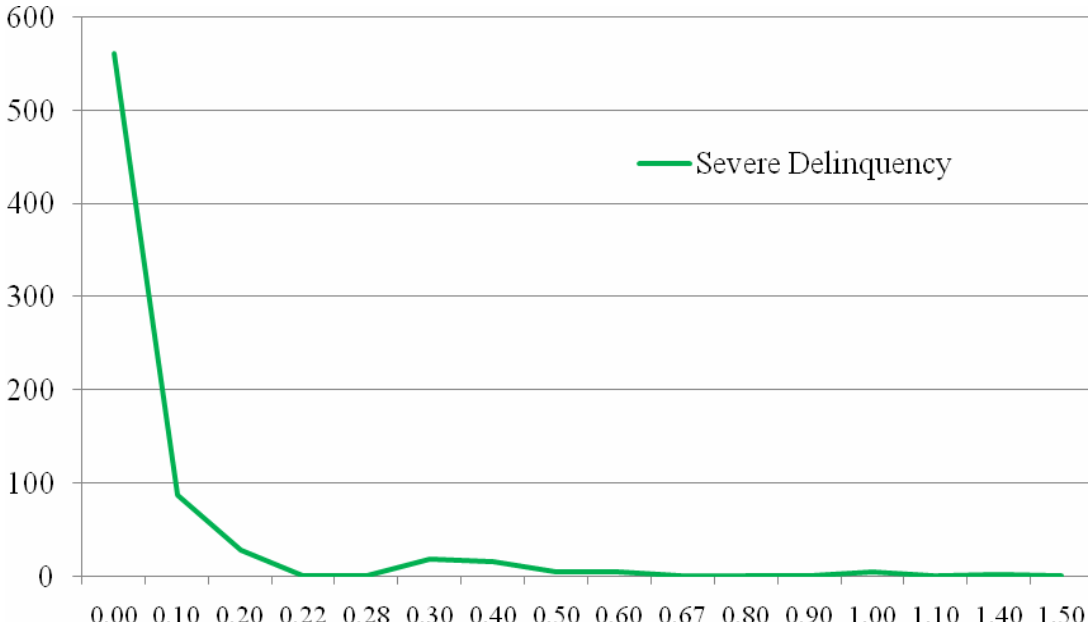
Mean Score

Figure 2. Distribution of Moderate Delinquency Mean Scores (N = 738)



Mean Score

Figure 3. Distribution of Severe Delinquency Mean Scores (N = 737)



Reliability

Internal consistency for the Age 16 Delinquency mean scores were moderate (Minor Delinquency α = .65) to good overall (Moderate and Severe Delinquency α = .73).

Publisher Information

Please refer to Huizinga & Esbensen, 1991 for the original measure.

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Everyday Stressors Index
Hall, L.
1983

Description of Measure

Purpose
To assess the problems faced on a daily basis by low-income mothers, and their perception of how much these problems bother them, as a measure of chronic daily stressors.

Conceptual Organization
The Everyday Stressors Index (ESI) includes 20 items covering five problem areas: role overload, financial concerns, parenting worries, employment problems, and interpersonal conflict. Respondents are asked to rate how much each problem bothers them using a four point scale ranging from 1 to 4. LONGSCAN modified the author's original values of 0=not at all bothered to 3=extremely bothered to 1=not at all bothered to 4=bothered a great deal.

Item Origin/Selection Process
The 20 items were based on items in the 117-item Daily Hassles Scale developed by Kanner and colleagues (Hall, 1983; see also Kanner, Coyne, Schaeffer, & Lazarus, 1981).

Time Required
2-3 minutes

Administration Method
A-CASI at Age 16*;* Interviewer-administered at Age 6.

Training
Minimal

Scoring
LONGSCAN response options include: 1= not at all bothered; 2=a little bothered; 3=somewhat bothered; 4=bothered a great deal; and 5=don't know. See section on Conceptual Organization for information on the author's original response set.

After recoding 'don't know' answers to missing, a mean score of everyday stressors can be derived by taking the mean responses to all items. Possible scores range from 0-4. Some studies have used a total score rather than the mean score.

Score Interpretation
A higher score indicates a higher level of daily stress.

Psychometric Support

Reliability
The author reports high internal consistency of the index, with a Cronbach's alpha of .83 (Hall, Williams, & Greenberg, 1985).

Validity
Construct validity of the ESI was supported by discrimination of everyday stressors from measures of maternal depression and psychosomatic symptoms using factor analytic procedures (Hall, 1983). Also, Hall and Farel (1988) reported that scores on the ESI were positively and significantly associated with depressive symptoms and psychosomatic symptoms among a sample of unmarried mothers.

LONGSCAN Use

Data Points
Ages 6 and 16

Mnemonic and Version
ESIA (Age 6)
ESIB (Age 16)

Rationale
While life events and daily stressors have both been shown to predict aspects of child, parent and family well-being, an index of daily stressors appears to be the more powerful measure of stress (From Hunter et al, 2003; Crnic & Greenberg, 1990; Hall & Farel, 1988). Use of the ESI at Ages 6 and 16 allowed LONGSCAN investigators to examine parental stress as a predictor of maltreatment.

Respondent
Caregiver

Results

Descriptive Statistics
For descriptive statistics on the Age 6 Everyday Stressors Inventory, please refer to the 2nd volume of the measures manuals (Hunter et al., 2003). Table 1 provides descriptive statistics for ESI mean scores at the Age 16 interview, by gender and study site.

Table 1. Age 16 Everyday Stressors Index Mean Score

		Everyday Stressors Index Mean Score	
	N	M	SD
Overall	798	1.8	0.5
Child's Gender			
Male	387	1.8	0.5
Female	411	1.9	0.6
Study Site			
EA	160	1.7	0.5
MW	132	1.9	0.6
SO	116	1.7	0.5
SW	205	1.8	0.5
NW	185	1.9	0.5

Source. Based on data received at the Coordinating Center through February '10.

Reliability
Internal consistency for the Age 16 ESI mean score was excellent (α = .86).

Validity

Validity was examined by assessing the relationship between the caregivers' report of everyday stressors and her self-reported depression score from the Center for Epidemiologic Studies Depression Scale (CES-D; Radloff, 1977). A statistically significant correlation coefficient (.54; $p < .0001$) was seen between the CES-D depression score and the Everyday Stressors mean score.

Publisher Information
For more information, see Hall (1983).

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Female Adolescent Parent
LONGSCAN, 1998

Description of Measure

Purpose
To assess an adolescent's pregnancy and birth history. Also assessed are intimate partner violence during a partner's pregnancy; involvement in and support of partner during pregnancy; use of birth control, and birth outcomes. The infant characteristics questionnaire, 6th month form, is included in this measure.

Conceptual Organization
Initial items assess whether or not an adolescent has ever been pregnant and at what age her first pregnancy occurred, whether she has any living children, pregnancy outcomes, and age of firstborn child. Intimate partner violence during, and immediately following, the pregnancy is assessed.

The ICQ-6, administered to adolescents who have children, is comprised of 24 items describing infant behavior. The parent or primary caregiver ranks each item on a 7-point scale, indicating the level of perceived difficulty in dealing with the described behavior. Four subscales have been identified through principal components analyses: Fussy/difficult, unadaptable, dull, and unpredictable.

Item Origin/Selection Process
The majority of the pregnancy and birth-related items are drawn from the Pregnancy Risk Assessment Monitoring System (PRAMS) Core Questionnaire, Phase 4.
The items on the ICQ were suggested by Thomas and colleagues' temperament dimensions (Thomas, Chess, & Birtch, 1968; Thomas et al. 1963).

Materials
LONGSCAN utilized an A-CASI administration.

Time Required
5-10 Minutes

Administration Method
A-CASI

Training
Minimal

Scoring
The ICQ includes four subscales: Fussy/Difficult, Unadaptable, Dull and Unpredictable. Please see the LONGSCAN Measures Manual, Age 4, Infant Characteristics Questionnaire, Six Month

Form, for additional information on scoring the ICQ. Individual items may be used. There are no additional scoring recommendations for the PRAMS variables.

LONGSCAN Use

Data Points
Ages 16, 18

Mnemonic and Version
FAPA

Respondent
Adolescent females who earlier had endorsed having been pregnant on the Adolescent Sexual Experiences Survey.

Results

Descriptive Statistics

Table 1 below provides descriptive statistics for female adolescent reports of their first pregnancy at the age 16 and 18 interviews.

	1st Birth: Baby living now?			Gender of 1st child?			Age of 1st baby?			Did the baby live with you as an infant?			
		No	Yes		Boy	Girl	< 1 yr	1-2 yrs	3yrs +	Most	Some	Not at All	Died
	N	n	n	N	n	n	n	n	n	n	n	n	N
Age 16	11	2*	9	9	6	3	--	7	2	9	--	--	--
Age 18	59	2*	57	59	30	29	20	28	9	54	2	1	1

Sources. Based on data received at the Coordinating Center through February '12.
Note. * these babies were stillborn.

Table 2. Age 16 and 18 female reports of first pregnancy (continued)

	Did you have a partner or husband?			During this pregnancy, did you live with your partner?					
		No	Yes		None of time	A Little	Some of time	Most of time	All of time
	N	n	n	N	n	n	n	n	n
Age 16	11	2	9	9	6	2	-	-	1
Age 18	59	11	48	48	19	6	6	7	10

Source. Based on data received at the Coordinating Center through February '12.

Violence before or during pregnancy at the Age 18 Interview (n = 54)

In the year prior the pregnancy, 17% of females (n = 9) reported having been physically hurt (i.e., push, hit, slapped, kicked, or choked) by their partner, while 11% (n = 6) reported that she had physically hurt her partner.

During the pregnancy, 9% of females (n = 5) reported having been hurt by their partners and 4% (n = 2) reported that they had hurt their partners. One respondent had been forced into sexual activity during the pregnancy. After the baby was born, 6% (n=3) had been physically hurt by their partner after the baby was born, and 6% had hurt their partner after the baby was born.

Publisher Information

Centers for Disease Control and Prevention: PRAMS Homepage (http://www.cdc.gov/prams/aboutprams.htm, visited 5/20/14)

References and Bibliography

Bates, J. E., Freeland, C. A., & Lounsbury M. L. (1979). Measurement of infant difficultness. Child Development, 50,794-803.

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Thomas, A., Chess, S., Birch, H. G., Hertzig, M. E., & Korn, S. (1963). Behavioral individuality in early childhood. New York: New York University Press.

Thomas, A., Chess, S., & Birch, H. G. (1968). Temperament and behavior disorders in children. New York: New York University Press. Wyman, P. A., Cowen, E. L., Work, W. C., & Park.

Future Events Questionnaire
LONGSCAN, 1998

Description of Measure

Purpose
To assess an adolescent's future expectations in the areas of education, employment, and family.

Conceptual Organization
In this 10-item measure, three a priori conceptual subscales assess an adolescent's future expectations in the areas of education, employment, and family. Factor analysis confirmed these three factors, but also found that select items loaded on scales somewhat differently than expected. Adolescents are asked to respond with how likely it is that a specified outcome will occur in their future using a five point scale (1=very unlikely, 5=very likely).

Item Origin/Selection Process
Items were project developed following a review of existing measures and relevant literature. Items were informed by those used in the Add Health study and Michigan Study of Adolescent and Life Transitions.

Materials
Paper and pencil or computerized form

Time Required
1-2 minutes

Administration Method
Computer assisted interviewer administered

Training
Minimal training is required

Scoring

The questionnaire includes 10 items, each using a 5-point likert scale (1 = "very unlikely" to 5 = "very likely").

Higher scores indicate an adolescent's belief that the events or situations queried will occur in his or her life. A principal components analysis (PCA) using a varimax rotation was examined to see how the items loaded. Three factors emerged, as seen in Table 1 below. *Please note that these subscales are representative of the LONGSCAN sample; results may vary for other populations.*

Table 1. Rotated Factor Loadings for Items on Age 16 Future Events Questionnaire

		Factor1 (Education & Career)	Factor2 (Financial Stability)	Factor3 (Family)
Item 1	Likely: have children	0.03	0.13	**0.89**
Item 2	Likely: get married	0.17	-0.06	**0.83**
Item 3	Likely: have children without being married	0.01	**0.71**	0.22
Item 4	Likely: that you will get divorced	0.02	**0.77**	-0.01
Item 5	Likely: you will go on welfare sometime	-0.17	**0.72**	-0.05
Item 6	Likely: graduate high school/get GED	**0.70**	-0.04	0.16
Item 7	Likely: got to college	**0.75**	-0.13	0.01
Item 8	Likely: get other training (e.g., vocational)	**0.70**	0.06	0.01
Item 9	Likely: get the job you want	**0.76**	-0.18	0.08
Item 10	Likely: be unemployed sometime	-0.11	**0.56**	-0.02
Variance Explained by Each Factor		*2.21*	*2.02*	*1.58*

Using the PCA results from Table 1, mean scores were derived for three subscales. Factor 1, labeled 'Education & Career,' includes items 6, 7, 8, and 9. Factor 2, labeled 'Financial Stability,' includes items 3, 4, 5, and 10. Factor 3, labeled 'Family,' includes items 1 and 2. Internal consistency for each subscale is shown in Table 3 below.

LONGSCAN Use

Data Points
Ages 14
Age 16 FEQB

Respondent
Adolescent

Mnemonic and Version
FEQA: Age 14
FEQB: Age 16. T*wo items from the Age 14 measure were dropped (likelihood of scholarship for college, loosing job)*

Rationale
Positive future orientation and expectations for the future have been found to be protective for adolescents raised in urban, impoverished environments, although for some younger adolescents, there may be a "fantasy" or "substitutive" aspect to the positive orientation that diminishes over time (Nuttin, 1985; MCCabe & Barnett, 2000).

Results

Descriptive Statistics
For descriptive statistics of the Age 14 Future Events Questionnaire, please refer to the 3rd volume of the measures manuals (Knight et al., 2008). Table 2 provides descriptive statistics for the Age 16 Future Events Questionnaire by demographics. Girls were found to have higher expectations for career-oriented goals than boys did. When compared to other sites, the EA and MW sites reportedly had higher expectations related to education and career.

Table 2. Age 16 Future Events Questionnaire by Gender and Study Site

	Education & Career		Financial Stability		Family	
	N	M (SD)	N	M (SD)	N	M (SD)
Overall	750	4.06 (0.75)	751	2.41 (0.74)	751	3.79 (0.97)
Child's Gender						
Male	350	3.93 (0.78)	351	2.41 (0.73)	351	3.74 (0.99)
Female	400	4.16 (0.70)	400	2.41 (0.75)	400	3.83 (0.96)
Study Site						
EA	148	4.22 (0.73)	148	2.37 (0.72)	148	3.61 (1.01)
MW	107	4.18 (0.74)	107	2.43 (0.78)	107	3.78 (0.89)
SO	118	3.95 (0.76)	118	2.44 (0.75)	118	3.68 (1.01)
SW	196	4.01 (0.71)	196	2.40 (0.74)	196	3.86 (0.98)
NW	181	3.95 (0.76)	182	2.42 (0.72)	182	3.93 (0.94)

Notes. Based on data received at the Coordinating Center through July '09.

Reliability

As can be seen in Table 3, internal consistency for the Age 16 Future Event Questionnaire derived subscales using the LONGSCAN sample was moderate to good (ranging from .65 to .72).

Table 3. Cronbach Alphas for the Age 16 Future Event Questionnaire Subscales

	Education & Career	Financial Stability	Family
	α	α	α
Age 14	.72	.65	.71

Source. Based on data received at the Coordinating Center through July '09.

Publisher Information

This measure is free and available for use upon the receipt of a signed User Agreement for LONGSCAN Project-Developed Measures available at: www.iprc.unc.edu/longscan/

References and Bibliography

Knight, E. D., Smith, J. S., Martin, L. M., Lewis, T., & the LONGSCAN Investigators (2008). Measures for Assessment of Functioning and Outcomes in Longitudinal Research on Child Abuse Volume 3: Early Adolescence (Ages 12-14). Accessible at the LONGSCAN web site (http://www.iprc.unc.edu/longscan/).

Nuttin, J. (1985). Future time perspective and motivation: Theory and research method. Hillsdale, JH: Lawrence Erlbaum Associates.

McCabe, K. M., & Barnett, D. (2000). The relationship between familial factors and the future orientation of urban, African American sixth graders. *Journal of Child and Family Studies, 9*, 491-508.

Household Composition and Family Chart
LONGSCAN, 1991

Description of Measure

Purpose
The purpose of the Household Composition and Family Chart is to determine the number of people living in the adolescent participant's household, and the relationship of each household member to the adolescent.

Conceptual Organization
Data on household composition are recorded using the Family Chart. The chart allows the interviewer to list, with the respondent's help, every member of the current household, as well as each household member's age, gender, and relationship to the adolescent participant.

Materials
Non-copyrighted forms are included in this manual.

Time Required
Less than 10 minutes, depending on the number of people in the household.

Administration Method
Interviewer-administered. The age, role and relationship to the adolescent participant of each household member are recorded on the family chart.

Training
Minimal

Scoring

Score Types
Number of adults, adult/child ratio, presence of unrelated individuals, and household size are among the possible variables that may be derived from this data. The scored dataset includes several key indicators of household composition, including indicators for single or two parent household, and multigenerational household. Individual items may also be used.

LONGSCAN Use

Data Points
Pre-Age 4, 4, 6, 8, 12, 14, & 16

Respondent
Primary maternal caregiver

Mnemonic and Version & Datasets
Pre-Age 4, 4, and 6: HOMA

Age 8: FCA. Administered as item 1 of the DEA (caregiver demographics) form

Ages 12, 14, & 16: FCHB. Due to the considerable length of the face-to-face interview at Age 14, it

was recommended that this form be administered by telephone prior to the interview.

Derived Household Composition Dataset: DHC. The DHC includes scored data for all time points (i.e., pre-age 4, 4, 6, 8, 12, 14, 16, and 18). The variables included in this dataset were derived using household composition and demographic measures, and the interview coversheets.

Rationale

Household composition (including number and type of household members, number and ages of children, child-adult ratio, and the presence of unrelated males and of multiple generations within the household) and relationship of the caregiver to the child (e.g., foster parent vs. non-foster parent) may have an effect on child functioning or risk for maltreatment.

Results

All of the data presented in this section are from the Age 16 DHC, the Derived Household Composition scored dataset. For descriptive statistics of the early interview time points, please refer to the 1st, 2nd, and 3rd volumes of the measures manuals (Hunter et al., 2003; Knight et al., 2008). Table 1 provides frequencies for the relationship of the primary caregiver respondents to the adolescents at the Age 16 interview. The majority of respondents were biological mothers (61%), followed by adoptive mothers (11%), while fathers made up less than 7% of primary caregivers. *Please note: The DHC also includes individual indicators for the relationship of each person living in the home.*

Table 1. Types of Primary Caregivers at Age 16

Relationship of Primary Caregiver	Age 16 % (n)
Biological Mother	60.8 (487)
Adoptive Mother	10.9 (87)
Stepmother	0.6 (5)
Grandmother	9.5 (76)
Other Female Relative	6.2 (50)
Foster Mother	--
Non-Kin Foster Mother	1.7 (14)
Kinship Foster Mother	--
Biological Father	3.6 (29)
Adoptive Father	1.5 (12)
Stepfather	--
Grandfather	0.9 (7)
Other Male Relative	0.2 (2)
Foster Father	--
Non-Kin Foster Father	0.1 (1)
Kinship Foster Father	0.1 (1)
Other Female	0.7 (6)
Other Male	0.4 (3)
Legal Guardian (female)	2.5 (20)
Legal Guardian (male)	0.1 (1)
Other	--
Total N	801

Source. Based on data received at the Coordinating Center through February 2010.

Table 2 provides descriptive statistics for household size and related variables for the Age 16 interview. The average number of children per household was greater (2.4) than the average number of adults (2.0).

Table 2. Age 16: Household size and related variables

		Number of Adults in Household			Number of Children in Household			Number of People in Household			Ratio of Adults to Total in Home		
	N	M (SD)	Min	Max	M (SD)	Min	Max	M (SD)	Min	Max	M (SD)	Min	Max
Overall	795	2.0 (0.9)	1	7	2.4 (1.4)	1	10	4.4 (1.7)	2	13	0.5 (0.2)	0.1	0.9
Child's Gender													
Male	386	2.1 (0.9)	1	7	2.4 (1.4)	1	9	4.4 (1.6)	2	13	0.5 (0.2)	0.1	0.9
Female	410	2.0 (0.9)	1	7	2.4 (1.5)	1	10	4.4 (1.7)	2	12	0.5 (0.2)	0.1	0.8
Study Site													
EA	160	2.1 (0.9)	1	6	2.4 (1.4)	1	9	4.5 (1.7)	2	13	0.5 (0.2)	0.2	0.8
MW	132	2.1 (1.1)	1	7	2.7 (1.5)	1	7	4.7 (1.8)	2	11	0.4 (0.2)	0.1	0.9
SO	116	1.8 (0.8)	1	5	2.3 (1.2)	1	8	4.1 (1.3)	2	8	0.5 (0.2)	0.1	0.8
SW	203	2.1 (0.9)	1	5	2.4 (1.5)	1	10	4.4 (1.7)	2	12	0.5 (0.2)	0.1	0.8
NW	185	2.0 (0.9)	1	5	2.3 (1.4)	1	8	4.2 (1.7)	2	10.0	0.5 (0.2)	0.1	0.8

Source. Based on data received at the Coordinating Center through February '10.

Table 3 provides descriptive statistics for variables related to household structure for the Age 16 interview. Nineteen percent of the Age 16 LONGSCAN sample households were considered multigenerational, defined by at least one grandparent present in the home, and 59% of primary caregivers were single parents.

Table 3. Family/Household Structure at Age 16

	Age 16 % (n)
Multigenerational Household	
No	81.5 (651)
Yes	18.5 (148)
Parent Configuration	
Single parent, no partner	58.9 (405)
Single parent, cohabitating	2.2 (15)
Stepfamily	12.7 (87)
Both biological parents	13.9 (96)
Both adoptive parents	7.6 (52)
Both foster parents	1.0 (7)
Both grandparents	3.8 (26)

Source. Based on data received at the Coordinating Center through February '10.

Publisher Information
This measure is free and available for use upon the receipt of a signed User Agreement for LONGSCAN Project-Developed Measures available at (http://www.iprc.unc.edu/longscan/).

References and Bibliography

Hunter, W. M., Cox, C. E., Teagle, S., Johnson, R. M., Mathew, R., Knight, E. D., & Leeb, R.T. (2003). Measures for Assessment of Functioning and Outcomes in Longitudinal Research on Child Abuse. Volume 1: Early Childhood. Accessible at the LONGSCAN web site (http://www.iprc.unc.edu/longscan/).

Hunter, W. M., Cox, C.E., Teagle, S., Johnson, R. M., Mathew, R., Knight, E. D., Leeb, R. T., & Smith, J. B. (2003). Measures for Assessment of Functioning and Outcomes in Longitudinal Research on Child Abuse. Volume 2: Middle Childhood. Accessible at the LONGSCAN web site (http://www.iprc.unc.edu/longscan/).

Knight, E. D., Smith, J. B., Martin, L. M., Lewis, T., & the LONGSCAN Investigators (2008). Measures for Assessment of Functioning and Outcomes in Longitudinal Research on Child Abuse Volume 3: Early Adolescence (Ages 12-14). Accessible at the LONGSCAN web site (http://www.iprc.unc.edu/longscan/).

Interviewer Ratings of Caregiver
LONGSCAN, 1998

Description of Measure

Purpose
This rating form captures the interviewer's observations of the caregiver during the interview, as well as the interviewer's perceptions of the condition of the residence and the safety of the neighborhood if the interview was administered in the participant's home. Also assessed are the level of privacy maintained during the interview, and the caregiver's response to, and ability to use, the Audio-Computer Assisted Self Interview (A-CASI) system.

Conceptual Organization
Observations of caregiver = 4 items
Privacy of interview setting = 1 item
Caregiver's response to A-CASI system = 2 items
Condition of residence = 3 items (asked at Ages 12 and 14 only)
Safety of neighborhood = 1 item (asked at Ages 12 and 14 only)

Item Origin/Selection Process
Items were written by project investigators to capture the post-interview observations and perceptions from the interviewer about the caregiver, and the caregiver's ability to utilize the A-CASI system. At ages 12 and 14, interviewers were also asked to rate

Materials
Non-ACASI computerized form. .

Time Required
1-2 minutes

Administration Method
Self-administered by interviewer

Training
Moderate, given that basic inter-rater reliability should be established.

Scoring
Individual items may be utilized. Each of the first ten items is rated with an item-specific five point rating scale. Higher item-level scores indicate less positive interviewer perceptions (i.e., item 9, privacy of interview scores range from '1=privately, without external interruptions', to '5=with extensive interruptions/in a chaotic environment').

LONGSCAN Use

Data Points
Ages 12, 14, 16: at the Age 16 interview, questions about the condition of the caregiver's residence and neighborhood (regarding cleanliness and safety) were not included.

Respondent
Interviewer

Mnemonic and Version
IRRB: Ages 12, 14, and 16 (Ratings of Caregiver)

Rationale
Interviewer ratings are used to assess the respondent's level of engagement with the interview and to obtain the interviewer's perception of the home and neighborhood in which the LONGSCAN participant is living.

A caregiver's attitude towards and ability to use the A-CASI system could potentially affect the validity of the interview and may be of interest in and of itself given that the A-CASI was anew data collection method introduced at age 12.

Results

Descriptive Statistics
For descriptive statistics of the Age 12 and Age 14 Interviewer Ratings of Caregiver, please refer to the 3rd volumes of the measures manuals (Knight et al., 2008). Table 1 provides descriptive statistics for the interviewer's perceptions of the caregiver at the Age 16 interview. According to Table 1, means ranged favorably between 1.5 and 1.7 for interviewer impressions of the caregiver's cooperativeness, truthfulness, openness, and level of comprehension during the interview. The NW site had higher means when compared to the other sites, with the NW site's caregivers rated as being more uncooperative, dishonest, guarded, and uncomprehending.

Table 1. Descriptive Statistics for items for interviewer's impression of caregiver at the Age 16 Interview

		Caregiver is…			
		Cooperative (1) to Uncooperative (5)	Truthful (1) to Dishonest (5)	Open (1) to Guarded (5)	Comprehending (1) to Not Comprehending (5)
	N	M (SD)	M (SD)	M (SD)	M (SD)
Overall	794	1.5 (0.9)	1.6 (0.9)	1.6 (0.9)	1.7 (0.9)
Child's Gender					
Male	384	1.5 (0.8)	1.6 (0.9)	1.6 (0.9)	1.7 (0.9)
Female	410	1.6 (0.9)	1.6 (0.9)	1.6 (0.9)	1.7 (0.9)
Study Site					
EA	156	1.1 (0.5)	1.2 (0.6)	1.2 (0.6)	1.2 (0.6)
MW	131	1.1 (0.6)	1.0 (0.3)	1.0 (0.3)	1.2 (0.6)
SO	129	1.3 (0.9)	1.4 (0.9)	1.3 (0.9)	1.3 (0.9)
SW	207	1.6 (0.7)	1.7 (0.7)	1.8 (0.8)	1.8 (0.7)
NW	171	2.3 (0.9)	2.5 (0.8)	2.5 (0.8)	2.6 (0.7)

Notes. Based on data received at the Coordinating Center through February '10.

Publisher Information

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Interviewer Ratings of Child
LONGSCAN, 1998

Description of Measure

Purpose
This rating form captures information about the method of interview administration and the interviewer's observations of the child during the interview, including how well the child seemed to be reading. Also assessed are the privacy of the interview environment, the child's comfort level and ability to use the Audio-Computer Assisted Self-Interview (A-CASI) system. The last section of the form is designed to capture validity concerns on the part of the interviewer. At Age 14, items were added to assess whether the interview was completed in one session, how many breaks were taken, how much time the interview took to complete, and to provide a place for the interviewer to record any additional comments the interviewer has about the interview or the child.

Conceptual Organization
Method of interview administration = 2 items
Assessment of child = 3 items
Assessment of interview environment = 2 items
Validity concerns = 2 items

At Age 14-18:
Other interview circumstances = 3 items
Interviewer comments = 1 item

Item Origin/Selection Process
Items were written by project investigators to capture post-interview observations, perceptions and validity concerns as described above in the *Purpose* section.

Materials
Laptop computer loaded with interview form set.

Time Required
4 -5 minutes

Administration Method
Self-administered.

Training
Interviewers were trained to recognize potential validity issues.

Scoring

Individual items may be utilized. In most cases (all but '3f', the Underweight/Overweight item) higher item-level scores indicate more positive interviewer perceptions (e.g., attentiveness scores range from 1=Not attentive at all, to 5=Very attentive).

LONGSCAN Use

Data Points
Age 12 , 14 & 16

Respondent
Interviewer

Mnemonic and Version
IRCB: Age 12
IRCC: Age 14
IRCD: Age 16

Rationale
Interviewer ratings of validity, and related interview and child characteristics, may be important variables to consider when constructing a dataset. Given that the interview was administered using an A-CASI, and that the A-CASI was a relatively new methodology for use with 12-year olds at the time the interview was developed, assessing respondents' ability to use the system was of interest. Respondents highly rated on specific characteristics (i.e., very anxious or very inattentive) may respond differently to the interview and individual items than would respondents less highly rated on these characteristics. Interviewer ratings of specific child characteristics, such as weight, may be of interest as both predictor and outcome variables.

Results

Descriptive Statistics

For descriptive statistics of the Age 12 and Age 14 Interviewer Ratings of the Child, please refer to the 3rd volumes of the measures manuals (Knight et al., 2008). Table 1 provides descriptive statistics for the interviewer's perceptions of the child at the Age 16 interview. According to Table 1, means ranged between 4.1 and 4.3 for interviewer impressions of the child's: attentiveness, being relaxed, restfulness, cleanliness, and cooperativeness. The NW site had lower means when compared to the other sites, with the NW site's children rated as being less attentive, relaxed, rested, groomed, and cooperative.

Table 1. Descriptive statistics for interviewer's impression of child at Age 16

	Child is…									
	Not attentive (1) to attentive (5)		Anxious (1) to relaxed (5)		Very tired (1) to rested (5)		Poorly groomed (1) to groomed (5)		Resistant (1) to cooperative (5)	
	N	M (SD)	N	M (SD)	N	M (SD)	N	M (SD)	N	M (SD)
Overall	740	4.2 (0.9)	725	4.2 (0.9)	710	4.1 (0.9)	688	4.1 (0.9)	739	4.3 (0.8)
Child's Gender										
Male	346	4.1 (0.9)	338	4.1 (0.9)	334	4.0 (0.9)	324	4.0 (1.0)	345	4.3 (0.9)
Female	394	4.2 (0.9)	387	4.2 (0.9)	376	4.1 (0.9)	364	4.2 (0.9)	394	4.4 (0.8)
Study Site										
EA	154	4.5 (0.8)	154	4.5 (0.7)	153	4.5 (0.7)	154	4.6 (0.7)	154	4.8 (0.5)
MW	121	4.5 (1.0)	107	4.6 (0.9)	96	4.6 (0.9)	78	4.6 (1.0)	121	4.6 (0.9)
SO	101	4.6 (0.8)	100	4.7 (0.8)	100	4.6 (0.8)	100	4.4 (0.9)	100	4.7 (0.7)
SW	198	4.1 (0.7)	198	3.9 (0.8)	195	3.9 (0.7)	190	4.0 (0.8)	198	4.3 (0.7)
NW	166	3.4 (0.7)	166	3.6 (0.8)	166	3.2 (0.6)	166	3.4 (0.7)	166	3.6 (0.8)

Note. Based on data received at the Coordinating Center through February '10.

Table 2 provides descriptive statistics for the interviewer's impression of additional child characteristics, his/her ability to use a computer and reading ability at the Age 16 interview. According to Table 2, means

ranged between 3.1 and 3.8 for interviewer impressions of the child's weight and level of cheerfulness. A majority of interviewers had high ratings for the child's ability to use a computer (M = 4.3) as well as reading ability (M = 4.0).

Table 2. Descriptive statistics for interviewer's impression of child at Age 16

	Child is…				*Child with computer…*		*Child reads…*	
	Underweight (1) to overweight (5)		Depressed (1) to cheerful (5)		Not able to use (1) to very comfortable (5)		Poorly (1) to very well (5)	
	N	M (SD)	N	M (SD)	N	M (SD)	N	M (SD)
Overall	690	3.1 (0.6)	732	3.8 (0.9)	695	4.3 (1.0)	686	4.0 (1.0)
Child's Gender								
Male	324	3.1 (0.5)	341	3.8 (0.9)	329	4.2 (1.0)	324	3.8 (1.1)
Female	366	3.2 (0.6)	391	3.9 (0.9)	366	4.3 (0.9)	362	4.1 (1.0)
Study Site								
EA	154	3.2 (0.7)	154	4.0 (1.0)	154	4.7 (0.9)	154	3.9 (1.2)
MW	80	3.2 (0.6)	114	4.3 (1.0)	90	4.2 (1.5)	78	4.5 (0.9)
SO	100	3.0 (0.7)	100	4.4 (0.8)	98	4.9 (0.4)	99	4.5 (0.8)
SW	190	3.1 (0.5)	198	3.6 (0.8)	187	4.3 (0.7)	189	3.9 (0.9)
NW	166	3.1 (0.5)	166	3.2 (0.5)	166	3.5 (0.7)	166	3.5 (1.0)

Note. Based on data received at the Coordinating Center through February '10.

Validity of individual Age 16 interview administrations

Ninety-eight percent of interviewers had no major concerns about the overall validity of individual Age 16 interviews. Two percent of interviewers (n = 18) reported either major or minor concerns about the interview, while only 1.3% had concerns about the validity of a specific measure (see Table 5 below).

Table 5. Age 16 Interview: Interviewer's measures-specific validity ratings (includes only those where an interviewer had concerns)

	Concerns about the validity of a specific instrument?	
Instruments	Minor Concerns	Major Concerns
	n	n
WRAT-3 Reading Test	1	1
Youth Demographics	2	--
Network of Relationships Inventory	2	1
Youth Employment	1	--
Adolescent Self Report of Physical Abuse	--	1
Adolescent Self Report of Psychological Abuse	1	--
Adolescent Self Report of Sexual Abuse	--	1

Notes. Based on data received at the Coordinating Center through February '10.
These are not mutually exclusive (i.e., an interviewer may have concerns with more than one measure).

Additional questions focus on how the interview was conducted (i.e., privately with/without interruptions, with an adult present, how long the interview took, # of breaks taken), child's responses to the A-CASI portion of the interview, and the child's success in learning to use the A-CASI interview system.

Publisher Information

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References

Knight, E. D., Smith, J. B., Martin, L. M., Lewis, T., & the LONGSCAN Investigators (2008). Measures for Assessment of Functioning and Outcomes in Longitudinal Research on Child Abuse Volume 3: Early Adolescence (Ages 12-14). Accessible at the LONGSCAN web site (http://www.iprc.unc.edu/longscan/).

Quality of Neighborhood, Residential Stability & Organizational and Religious Affiliation
Adapted from Coulton et al., 1996 & Sampson & Earls, 1997

Description of Measure

Purpose
To assess the caregiver's perception of the quality of his or her neighborhood, the length of time the caregiver and adolescent have lived in the neighborhood, and how often the caregiver and adolescent have moved the last five years. The items on length of residence and number of moves are asked separately for the caregiver and adolescent. The civic, community and religious/spiritual engagement of the caregiver are also assessed.

Conceptual Organization
Thirty items include three subscales intended to assess the neighborhood's collective efficacy, chaos and stability. The Collective Efficacy Score is made up of 11 items asking the caregiver about neighborhood cohesion, and willingness to intervene (e.g., 'People around here help their neighbors',' Neighbors can be trusted'). The Chaos score is made up of 14 items asking the caregiver about problems in their neighborhood. The Stability score is made up of five items asking the caregiver about people moving in and out of the neighborhood (e.g., 'People don't live in neighborhood long',' Most of the people are renters'). Three single items assess *residential stability* (how long the caregiver has lived in the neighborhood, how long the adolescent has lived in the neighborhood, and how often the adolescent has moved in the past five years). The caregiver's recent *community engagement/activities* are measured with nine yes/no items on participation in civic, volunteer, athletic, and arts activities. *Religious or spiritual engagement* is measured with four items on importance of beliefs in child rearing, religious or spiritual affiliation, service attendance and participation in religious group activities.

Item Origin/Selection Process
The items on neighborhood quality (items 3-32) are adapted from the work of Coulton, Korbin & Su (1996), and Sampson, Raudenbush & Earls (1997). Other items are project developed. The community activities items were intended to parallel, in an age-appropriate way, the activities items found in the adolescent Resilience Factors self report measure used at Ages 12-16.

Materials
Interviewer-assisted computerized interview. May be administered face-to-face using paper and pencil.

Time Required
3-5 minutes

Administration Method
Interviewer-assisted computerized interview.

Training
Minimal.

Scoring

Individual items may be utilized. A principal components analysis was performed on items 3-32 using a PROMAX rotation. Three factors were retained (i.e., Neighborhood Chaos, Neighborhood Collective Efficacy, and Neighborhood Stability). Mean scores can be derived using these factors as outlined below.

For each subscale, scores range from 1-4.

Neighborhood Chaos: Mean of items 3R*, 7, 9, 12, 13, 15, 19, 21, 24, 25R, 26, 27, 31, and 32.

Response options range from '1 = Strongly Disagree' to '4=Strongly Agree.'

Higher scores indicate greater neighborhood chaos.

Neighborhood Collective Efficacy: Mean of items 5, 6, 8, 11, 14, 17, 18, 20, 23, 29, and 30.

Response options range from '1 = Strongly Disagree' to '4 Strongly Agree'.

Higher scores indicate higher degrees of collective efficacy.

Neighborhood Stability: Mean of items 4, 10, 16, 22R, and 28R.

Response options range from '1 = Strongly Disagree' to '4 Strongly Agree'.

Higher scores indicate lower neighborhood stability.

*Please note: Items with an 'R' were reversed prior to scoring.

A community activities sum score can be created by taking the sum of items 33-41. Higher scores indicate a caregiver's participation in more activities. Scores range from 0-9.

Items assessing spiritual or religious engagement include 40, 43, 44, and 45. Not being registered to vote and frequency of voting in local, state and national elections are assessed in item 42.

LONGSCAN Use

Data Points
Ages 12, 14, 16

Respondent
Caregiver

Mnemonic and Version
NOAA: Ages 12, 14, 16

Rationale
Assessment of neighborhood quality addresses an important aspect of the community or exosystem level of the LONGSCAN ecological model. The neighborhood in which a child resides may provide both risk and protective factors for healthy development. Collective efficacy, defined as "…social cohesion among neighbors combined with their willingness to intervene on behalf of the common good…" has been found to be associated with reductions in violence (Sampson, Raudenbush & Earls, 1997), and externalizing behavior among neglected youth (Yonas et al., 2010). Neighborhood support and regular church attendance, have been found to contribute to healthy development among two to five year-old children within the LONGSCAN sample (Runyan et al., 1998).

Results

Descriptive Statistics

For descriptive statistics of the Ages 12 and 14 Neighborhood Organizational and Religious Affiliation, please refer to the 3rd volume of the measures manuals (Knight et al., 2008). Table 1 provides frequencies for residential stability at the Age 16 interview by demographics. A majority of LONGSCAN caregivers (62%) had lived in the same neighborhood for 3 years or more, while 16% had lived in their neighborhood for less than one year.

Table 1. Residential stability at Age 16

		Length of residence in neighborhood: caregiver					Length of residence in neighborhood: adolescent			
	N	< 1 year % (n)	1-2 years % (n)	3-5 years % (n)	>= 5 years % (n)	N	< 1 year % (n)	1-2 years % (n)	3-5 years % (n)	>= 5 years % (n)
Overall	775	15.7 (122)	21.4 (166)	17.8 (138)	45.0 (349)	775	18.7 (145)	22.3 (173)	16.9 (131)	42.1 (326)
Child's Gender										
Male	375	7.2 (56)	10.2 (79)	9.9 (77)	21.0 (163)	373	8.7 (67)	10.6 (82)	9.7 (75)	19.2 (149)
Female	400	8.5 (66)	11.2 (87)	7.9 (61)	24.0 (186)	402	10.1 (78)	11.7 (91)	7.2 (56)	22.8 (177)
Study Site										
EA	154	2.6 (20)	3.7 (29)	4.5 (35)	9.0 (70)	155	3.1 (24)	3.7 (29)	4.1 (32)	9.0 (70)
MW	120	3.3 (26)	4.4 (34)	3.0 (23)	4.8 (37)	119	3.9 (30)	4.0 (31)	2.6 (20)	4.9 (38)
SO	113	2.9 (23)	1.9 (15)	3.3 (18)	7.3 (57)	113	3.0 (23)	2.2 (17)	2.2 (17)	7.2 (56)
SW	205	2.3 (18)	5.9 (46)	3.3 (26)	14.8 (115)	205	3.6 (28)	6.1 (47)	3.5 (27)	13.3 (103)
NW	183	4.5 (35)	5.4 (42)	4.6 (36)	9.0 (70)	183	5.2 (40)	6.3 (49)	4.5 (35)	7.6 (59)

Notes. Based on data received at the Coordinating Center through July'09.

Table 2 provides descriptive statistics for the Neighborhood Stability, Chaos, Collective Efficacy scores, and Community Activities score at the Age 16 interview.

Table 2. Quality of Neighborhood Subscale Mean and Activities Scores at Age 16

	Neighborhood Chaos		Collective Efficacy		Neighborhood Stability		Sum of Activities	
	N	M (SD)	N	M (SD)	N	M (SD)	N	M (SD)
Overall	775	1.9 (0.5)	773	2.9 (0.5)	772	2.0 (0.6)	774	1.4 (1.6)
Child's Gender								
Male	374	1.9 (0.5)	373	2.9 (0.5)	374	2.0 (0.6)	373	1.5 (1.6)
Female	401	1.9 (0.5)	400	3.0 (0.5)	398	2.0 (0.6)	401	1.4 (1.5)
Study Site								
EA	154	2.1 (0.6)	154	2.8 (0.5)	154	2.1 (0.6)	154	1.6 (1.6)
MW	119	2.0 (0.5)	118	2.9 (0.5)	118	2.0 (0.5)	120	1.3 (1.5)
SO	113	1.9 (0.5)	113	2.9 (0.5)	113	2.1 (0.6)	113	1.1 (1.5)
SW	205	1.8 (0.5)	205	3.0 (0.5)	205	1.9 (0.6)	205	1.7 (1.5)
NW	184	1.7 (0.5)	183	3.0 (0.6)	182	1.9 (0.7)	182	1.4 (1.5)

Notes. Based on data received at the Coordinating Center through July'09.

Table 3 provides frequencies regarding caregivers' voter registration status, voting habits and the importance they attach to religious beliefs in childrearing at the Age 16 interview. Sixty-one percent of

caregivers reported voting most to all of the time, while 16% were unregistered. A majority of caregivers (74%) said that their religious beliefs were very important in raising their children.

Table 3. Caregiver voting habits and the importance of religious beliefs in raising children at Age 16

		How often do you vote in local, state, or national elections?						How important are religious or spiritual beliefs in the way you raise your children?		
	N	Not Register-ed % (n)	Almost Never % (n)	Occasion-ally % (n)	Most of the time % (n)	All of the time % (n)	N	Not Import-ant % (n)	Somewhat Important % (n)	Very Import-ant % (n)
Overall	774	16.0 (124)	9.6 (74)	13.0 (101)	20.7 (160)	40.7 (315)	773	3.9 (30)	21.9 (169)	74.3 (574)
Child's Gender										
Male	373	7.6 (59)	5.7 (44)	6.6 (51)	9.6 (74)	18.7 (145)	373	1.9 (15)	10.5 (81)	35.8 (277)
Female	401	8.4 (65)	3.9 (30)	6.5 (50)	11.1 (86)	21.9 (170)	400	1.9 (15)	11.4 (88)	38.4 (297)
Study Site										
EA	154	2.4 (19)	2.4 (19)	3.2 (25)	2.9 (23)	8.8 (68)	153	0.4 (3)	3.5 (27)	15.9 (123)
MW	120	1.5 (12)	1.5 (12)	2.7 (21)	3.1 (24)	6.6 (51)	120	0.3 (2)	3.1 (24)	12.1 (94)
SO	113	3.5 (27)	1.3 (10)	1.7 (13)	3.4 (26)	4.8 (37)	113	0.1 (1)	3.1 (24)	11.4 (88)
SW	205	3.7 (29)	2.3 (18)	2.8 (22)	5.0 (39)	12.5 (97)	205	0.5 (4)	5.4 (42)	20.6 (159)
NW	182	4.8 (37)	1.9 (15)	2.6 (20)	6.2 (48)	8.0 (62)	182	2.6 (20)	6.7 (52)	14.2 (110)

Notes. Based on data received at the Coordinating Center through July'09.

Religious denomination

Fifty-six percent of caregivers at the Age 16 interview identified themselves as 'Protestant/other Christian denomination', and 9% were Catholic. Twenty-nine percent reported having no denomination. Thirty percent of caregivers reported attending religious or spiritual services at least once a week in the last year.

Reliability

Internal consistency for the neighborhood mean scores for the LONGSCAN sample was excellent: Chaos ($\alpha = .93$); Collective Efficacy ($\alpha = .91$); and Stability ($\alpha = .84$).

Publisher Information

This measure is free and available for use upon the Coordinating Center's receipt of a signed User Agreement for Project-developed LONGSCAN Measures. Further information may be found at http://www.iprc.unc.edu/longscan/.

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Network of Relationships Inventory
Adapted from Furman & Burhmester, 1985

Description of Measure

Purpose
The Networks of Relationship Inventory (NRI) was originally developed to "examine a broad array of relationship characteristics across a number of different types of personal relationships," (Furman & Buhrmester, 1985 & Questionnaire Manual). There are three versions of the NRI: The NRI-Social Provisions Version (SPV), the NRI-Behavioral Systems Version, (BSV), and the NRI-Relationship Qualities Version (RQV).

Conceptual Organization
Across the three versions of this measure, up to 10 three item-subscales assess relationship characteristics such as companionship, conflict, instrumental aid, satisfaction, antagonism, intimacy, nurturance, affection, punishment, admiration, relative power, and reliable alliance for each type of relationship. Relationships across the three versions include mother, father, sibling, relative, boy/girlfriend, best friend of same sex and best friend of opposite sex. Additional relationships may also be included. The respondent is asked to rate each of the significant relationships on each of the items. The development of the original NRI was informed by Robert Weiss's (1974) and Harry Stack Sullivan's (1953) theory of social provisions and attachment (Furman & Burhmester, Questionnaire Manual). Please see references below for additional information on the conceptual organization of each of the three versions.

Materials and Administration
Paper and pencil forms may be interviewer administered. LONGSCAN utilized a computer-assisted administration.

Time Required
5-30 minutes depending upon the number of subscales utilized and relationships assessed.

Training
Training of face-to-face interviewers is moderate given the structured nature of the items.

Scoring

Subscale scores can be derived by taking the mean of each of the three items. The author recommends not calculating scores for any subscale missing more than one item. Social support and negative interchanges overall scores may also be calculated. For more information, please see the authors' instructions for scoring (Furman & Buhrmester, Network of Relationships Questionnaire Manual)

Score Interpretation
Higher scores indicate higher rates of the dimension assessed. Scores range from 1-5.

Psychometric Support

Reliability
The authors report satisfactory internal consistency with Alphas of all scale scores for all relationships greater than .60 except for two instances (Furman & Buhrmester, Questionnaire Manual). Another study utilizing an abridged version of the NRI reported a mean Cronbach's Alpha of .81 for the abridged version (East, 1991).

Validity
East's 1991 study found that NRI scores corresponded to groupings used to identify peer-withdrawn, peer-aggressive and sociable children (East, 1991).

LONGSCAN Use

Rational
Peer relationships are a critical aspect of adolescent development. The NRI is a widely-used, concise, theoretically based self report measure that permitted a computer-assisted administration. Peer relationships were the domain of interest and therefore LONGSCAN did not include assessment of non-peer relationships using the NRI.

Administration and Scoring Notes
LONGSCAN utilized slightly revised scales adapted from both the NRI- Social Provisions Version and the NRI-Relationship Qualities Version. LONGSCAN revised 1) the wording of the original introduction to focus it exclusively on peer relationships, 2) introductory items, including adding structured items to obtain peer ages and an item asking the sex of boy/girlfriend (primarily so that the computer could deliver sex-appropriate wording in subsequent items), and 3) some response sets. LONGSCAN focused exclusively on the following relationships: best friend of same sex; best friend of opposite sex (other than sibling or boy/girlfriend); and boy or girlfriend.

LONGSCAN utilized a face-to-face, computer assisted administration.

Data Points
Ages 16 and 18

Mnemonic and Version
Age 16: NRIA
Age 18: NRIB

Respondent
Adolescent

Scoring
Mean scores can be derived for each subscale (Companionship, Conflict, Satisfaction, and Intimacy) and for each relationship (best friend of same sex, best friend of opposite sex who is not a sibling or romantic partner, and boy or girlfriend). Each subscale has three items as outlined below.
The authors recommend that subscales should be set to missing if there is more than one missing item per scale (Furman & Burhmester, Quesionnaire Manual).
Scores range from 1-5, with higher scores indicating higher levels of the quality in that specific relationship.

*Companionship: Items 4, 8, 12
*Conflict: Items 5, 9, 13
*Satisfaction: Items 6, 11, 14
* Intimacy: Items 7, 10, 15

Results

Descriptive Statistics
Table 1 describes the ages of best same-sex friends and length of time being friends for respondents to the Age 16 Interview. A majority of respondents (83%) reported that their best friend of the same sex was close to their own age (between 15 and 17); 86% had been friends with the individual for over a year. More than half (55%) went to the same school (data not presented here).

Table 1. Descriptive Statistics for Best Same-Sex Friend

		How old is this person?					How long have you been friends?				
	N	<12 yrs %	12-14 yrs %	15-17 yrs %	18-20 yrs %	21+ yrs %	N	<= 1 mo %	2-6 mos %	7 mos to 1 yr %	1 year + %
Overall	758	0.8	6.5	82.8	7.8	2.1	757	0.7	5.9	7.0	86.4
Child's Gender											
Male	357	0.3	3.6	38.0	4.5	0.8	356	0.4	2.4	3.2	41.1
Female	401	0.5	2.9	44.8	3.3	1.3	401	0.3	3.6	3.8	45.3
Study Site											
EA	146	0.0	2.0	14.6	2.2	0.4	146	0.0	1.6	0.8	16.9
MW	122	0.3	0.9	13.5	1.3	0.1	122	0.0	1.2	1.2	13.7
SO	116	0.3	0.5	12.0	1.8	0.7	115	0.1	0.8	1.7	12.5
SW	196	0.1	1.1	22.6	1.6	0.5	196	0.4	1.3	2.5	21.7
NW	178	0.1	2.0	20.2	0.8	0.4	178	0.1	1.1	0.8	21.5

Source. Based on data received at the Coordinating Center through February '10.

Table 2 describes the ages and length of friendship for best friend of the opposite sex (other than boyfriend/girlfriend or sibling) for Age 16 Interview respondents. Overall, these friends were similar in age to LONGSCAN respondents, and had been friends for over a year (75%). More than half of the respondents (54%) went to the same school as their best friend of the opposite sex.

Table 2. Descriptive Statistics for Best Friend of Opposite Sex

		How old is this person?					How long have you been friends?				
	N	<12 yrs %	12-14 yrs %	15-17 yrs %	18-20 yrs %	21+ yrs %	N	<= 1 mo %	2-6 mos %	7 mos to 1 yr %	1 year + %
Overall	731	0.1	6.7	78.5	12.4	2.2	731	2.3	10.8	11.6	75.4
Child's Gender											
Male	345	0.1	4.5	38.3	3.0	1.2	345	1.2	4.4	5.9	35.7
Female	386	0.0	2.2	40.2	9.4	1.0	386	1.1	6.3	5.7	39.7
Study Site											
EA	142	0.1	2.1	13.7	3.1	0.4	142	1.0	2.6	2.2	13.7
MW	107	0.0	1.2	12.6	0.5	0.3	107	0.1	3.0	1.8	9.7
SO	116	0.0	0.5	11.6	3.0	0.7	116	0.1	1.0	2.6	12.2
SW	193	0.0	1.0	20.8	4.1	0.6	193	0.3	2.2	3.1	20.8
NW	173	0.0	1.9	19.8	1.6	0.3	173	0.8	1.9	1.9	19.0

Source. Based on data received at the Coordinating Center through February '10.

Table 3 illustrates that forty seven percent (n = 356) of respondents reported having a boyfriend or girlfriend. Most of these were similar in age to the 16 year-old respondents (79%). 13.5% of girls reported that their boyfriends were older than they were. More than half (53%) reported that they have been boy/girlfriends with this person for over a year, and 62% reported that their boyfriend/ girlfriend went to a different school (data not presented here).

Table 3. Descriptive Statistics for Boyfriends/Girlfriends

		How old is your boyfriend/girlfriend?					How long have you been friends?				
	N	<12 yrs %	12-14 yrs %	15-17 yrs %	18-20 yrs %	21+ yrs %	N	<= 1 mo %	2-6 mos %	7 mos to 1 yr %	1 year + %
Overall	356	0.0	3.6	79.2	15.7	1.4	356	4.8	25.8	16.3	53.1
Child's Gender											
Male	163	0.0	3.6	39.6	2.2	0.3	163	3.6	12.4	6.7	23.0
Female	193	0.0	0.0	39.6	13.5	1.1	193	1.1	13.5	9.5	30.1
Study Site											
EA	89	0.0	0.8	20.8	3.1	0.3	89	2.0	7.3	4.8	11.0
MW	63	0.0	0.6	15.4	1.7	0.0	63	0.6	6.7	2.2	8.1
SO	48	0.0	0.6	9.0	3.4	0.6	48	0.3	2.8	3.1	7.3
SW	90	0.0	0.8	19.4	4.8	0.3	90	0.6	5.3	3.4	16.0
NW	66	0.0	0.8	14.6	2.8	0.3	66	1.4	3.6	2.8	10.7

Source. Based on data received at the Coordinating Center through February '10.

The final section of the version of the NRI used by LONGSCAN includes the four subscales (Companionship, Conflict, Satisfaction, and Intimacy) for each type of relationship (best same sex friend, best opposite sex friend who is not a sibling or boy/girlfriend, and boyfriend/ girlfriend). Higher scores indicate higher levels of the quality being assessed.

Table 4 provides descriptive statistics for the Companionship mean scores by gender and study site. Higher companionship mean scores are seen for friends of the same sex (3.7) and boyfriends/girlfriends (3.8), when compared to friends of the opposite sex (2.9).

Table 4. Age 16 NRI: Companionship Mean Scores

	Best Friend (Same Sex)			Best Friend (Opposite Sex)			Boyfriend / Girlfriend		
	N	M	SD	N	M	SD	N	M	SD
Overall	755	3.7	0.8	730	2.9	0.9	355	3.8	0.8
Child's Gender									
Male	355	3.6	0.8	346	3.0	0.8	162	3.7	0.7
Female	400	3.7	0.9	384	2.9	0.9	193	3.8	0.8
Study Site									
EA	147	3.7	0.9	142	3.1	0.8	89	3.7	0.7
MW	122	3.8	0.8	107	3.1	0.8	63	3.9	0.7
SO	116	3.4	0.8	117	2.5	0.8	48	3.7	0.8
SW	193	3.6	0.8	191	3.0	0.8	89	3.7	0.9
NW	177	3.8	0.8	173	2.9	0.9	66	3.9	0.7

Source. Based on data received at the Coordinating Center through February '10.

Table 5 provides descriptive statistics for the Conflict mean scores by gender and study site. Higher conflict mean scores are seen for boyfriend/girlfriends (2.5) when compared to friends of either sex (2.1 - 2.2).

Table 5. Age 16 NRI: Conflict Mean Scores

	Best Friend (Same Sex)			Best Friend (Opposite Sex)			Boyfriend / Girlfriend		
	N	M	SD	N	M	SD	N	M	SD
Overall	755	2.2	0.8	729	2.1	0.8	355	2.5	0.9
Child's Gender									
Male	355	2.2	0.8	345	2.0	0.8	162	2.3	0.9
Female	400	2.2	0.8	384	2.2	0.8	193	2.7	0.9
Study Site									
EA	147	2.4	0.9	142	2.4	0.8	89	2.8	0.9
MW	122	2.2	0.7	107	2.2	0.8	63	2.6	0.9
SO	116	2.1	0.7	116	2.1	0.8	48	2.5	0.9
SW	193	2.1	0.9	191	2.0	0.8	89	2.6	1.0
NW	177	2.2	0.8	173	2.0	0.8	66	2.2	0.9

Source. Based on data received at the Coordinating Center through February '10.

Table 6 provides descriptive statistics for the Satisfaction mean scores by gender and study site. Respondents endorsed higher levels of satisfaction with friends of the same sex, followed by satisfaction with boyfriends/girlfriends (4.3), while the lowest level of satisfaction was in relationships with friends of the opposite sex (3.9).

Table 6. Age 16 NRI: Satisfaction Mean Scores

	Best Friend (Same Sex)			Best Friend (Opposite Sex)			Boyfriend / Girlfriend		
	N	M	SD	N	M	SD	N	M	SD
Overall	754	4.2	0.8	728	3.9	0.8	354	4.3	0.7
Child's Gender									
Male	354	4.0	0.8	344	3.8	0.8	161	4.3	0.7
Female	400	4.3	0.7	384	3.9	0.8	193	4.4	0.7
Study Site									
EA	147	4.0	0.8	142	3.8	0.8	89	4.2	0.7
MW	122	4.2	0.7	107	3.9	0.6	63	4.3	0.7
SO	116	4.0	0.8	116	3.7	0.9	47	4.3	0.8
SW	192	4.2	0.8	190	4.0	0.8	89	4.4	0.6
NW	177	4.2	0.7	173	3.9	0.7	66	4.4	0.6

Source. Based on data received at the Coordinating Center through February '10.

Table 7 provides descriptive statistics for the Intimacy mean scores by gender and study site. Respondents rated relationships with boy or girlfriends as the most intimate (3.8), followed by best friends of the same sex (3.6). Relationships with best friends of the opposite sex were rated as the least intimate of the three relationship types (2.9).

Table 7. Age 16 NRI: Intimacy Mean Scores

	Best Friend (Same Sex)			Best Friend (Opposite Sex)			Boyfriend / Girlfriend		
	N	M	SD	N	M	SD	N	M	SD
Overall	755	3.6	1.1	729	2.9	1.1	354	3.8	1.0
Child's Gender									
Male	355	3.1	1.1	345	2.9	1.0	161	3.7	0.9
Female	400	4.1	0.9	384	2.9	1.1	193	3.9	1.0
Study Site									
EA	147	3.5	1.2	142	2.9	1.1	89	3.7	1.0
MW	122	3.7	1.0	107	.9	1.0	63	3.8	0.9
SO	116	3.4	1.1	116	2.4	1.0	47	3.6	1.1
SW	193	3.7	1.1	191	3.1	1.1	89	3.9	1.0
NW	177	3.7	1.1	173	3.0	1.0	66	4.0	0.8

Source. Based on data received at the Coordinating Center through February '10.

Publisher Information

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Parent-Child Relationship: Adolescent Report
Adapted from National Longitudinal Study on Adolescent Health
(Add Health; Resnick et al., 1997)

Description of Measure

Purpose
This measure is intended to assess the adolescent's perception of the quality of the relationship with his or her maternal and paternal caregivers and the level of their recent involvement, as well as the adolescent's impressions of the caregivers' educational aspirations for the adolescent. Parallel measures exist for primary caregiver report on the relationship with his or her adolescent.

Conceptual Organization
Two broad domains of relationship quality are assessed, including the adolescent's perception of the overall quality of the relationship with his or her caregivers, and the nature and extent of recent shared activities. Dimensions of quality of relationship assessed include level of closeness, understanding, trust, shared decision making, caring and getting along. Two items assess the adolescent's perception of each caregiver's educational aspirations for the adolescent. Parallel items are asked about each caregiver separately. Residential caregivers are given priority in the event the adolescent has multiple maternal or paternal caregivers.

Item Origin/Selection Process
The items were adapted from those used in the Add Health Study (Resnick et al., 1997).

Materials
A-CASI delivery system

Time Required
2-3 minutes

Administration Method
A-CASI

Training
Minimal training is required given that the measure is delivered in an A-CASI format.

Scoring and Score interpretation

The measure includes three subscales.
The *Quality of Relationship* subscale is created using the mean score of the six relationship quality items. Scores range from one to five, with higher scores indicating an overall better quality of relationship. Individual items may also be utilized.

The *Level of Recent Involvement* subscale is the sum of the number of activities done together in the last month. Scores range from zero (no shared activities) to nine (nine shared activities).

The Educational Aspirations subscale includes two items asking how disappointed they thought each caregiver would be if she or he did not graduate from high school and college. Scores range from one (not disappointed at all) to five (really disappointed), with higher scores indicating higher educational aspirations for the adolescent.

LONGSCAN Use

Data Points
Ages 12, 14, 16, and 18

Respondent
Adolescent

Mnemonic, Version and Dataset
FCCA: Age 12 & 14 (Father)
MCCA: Age 12 & 14 (Mother)
QRPA: Age 16
QRPB: Age 18

Rationale
The quality of an adolescent's relationships with his or her parents has been found to be predictive of adolescent mental health, peer relationships, and risk taking behaviors.

Results
The data described below combines residential and non-residential caregivers.

Descriptive Statistics
For descriptive statistics of Ages 12 and 14 Quality of Parent-Child Relationship items, see the 3rd volume of the Measures Manuals (Knight et al., 2008). Table 1 illustrates that overall the Quality of Relationship scores were slightly higher for maternal caregivers than paternal caregivers at Age 16. Adolescents reported higher levels of parental involvement in the form of shared activities with their maternal caregivers.

Table 1. Age 16 Adolescent Report of Quality of Relationship and Level of Recent Involvement

	Maternal Caregiver			Paternal Caregiver		
	N	Quality of Relationship Mean Score M (SD)	Parental Involvement Sum Score M (SD)	N	Quality of Relationship Mean Score M (SD)	Parental Involvement Sum Score M (SD)
Overall	735	4.0 (0.7)	4.8 (2.5)	524	3.8 (0.9)	3.7 (2.8)
Child's Gender						
Male	342	4.1 (0.7)	4.6 (2.6)	252	3.9 (0.9)	3.9 (2.7)
Female	393	4.0 (0.8)	5.0 (2.5)	272	3.8 (0.9)	3.5 (2.9)
Study Site						
EA	142	4.3 (0.7)	5.1 (3.0)	111	4.1 (0.8)	3.7 (3.0)
MW	120	4.2 (0.6)	5.2 (2.4)	78	3.9 (0.8)	4.2 (3.0)
SO	116	4.0 (0.8)	4.8 (2.6)	71	3.5 (2.7)	3.5 (2.7)
SW	179	3.9 (0.8)	4.5 (2.5)	138	3.7 (0.9)	3.5 (2.8)
NW	178	4.0 (0.7)	4.6 (2.2)	126	3.8 (0.9)	3.5 (2.5)

Notes. Based on data received at the Coordinating Center through February '10.

A slight longitudinal decline occurs in the Quality of Relationship scores for respondents with data from each of the three time points, as illustrated in Figure 1.

Figure 1. Longitudinal Quality of Relationship

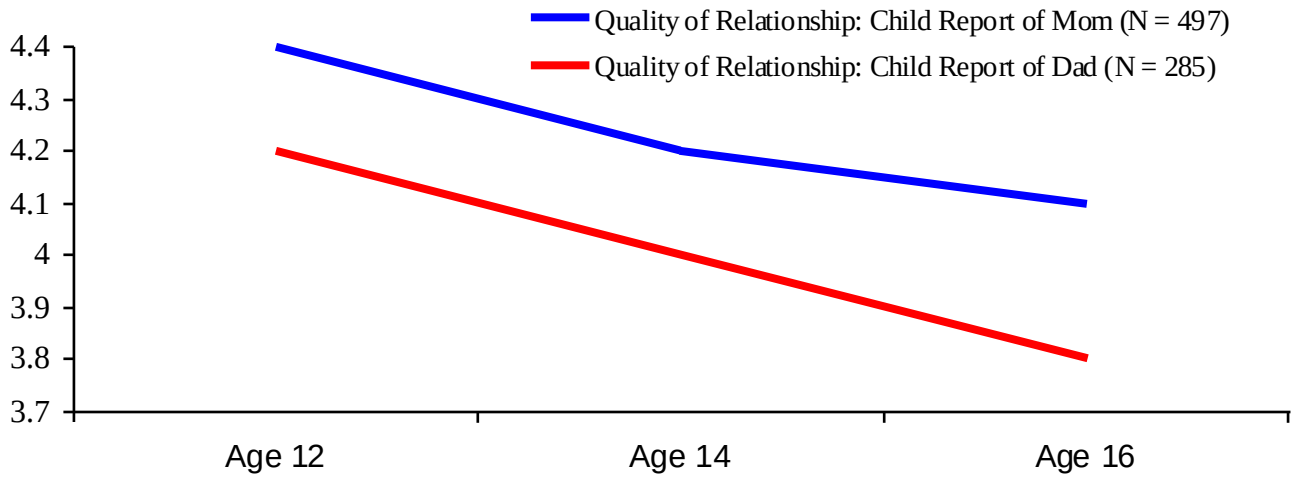
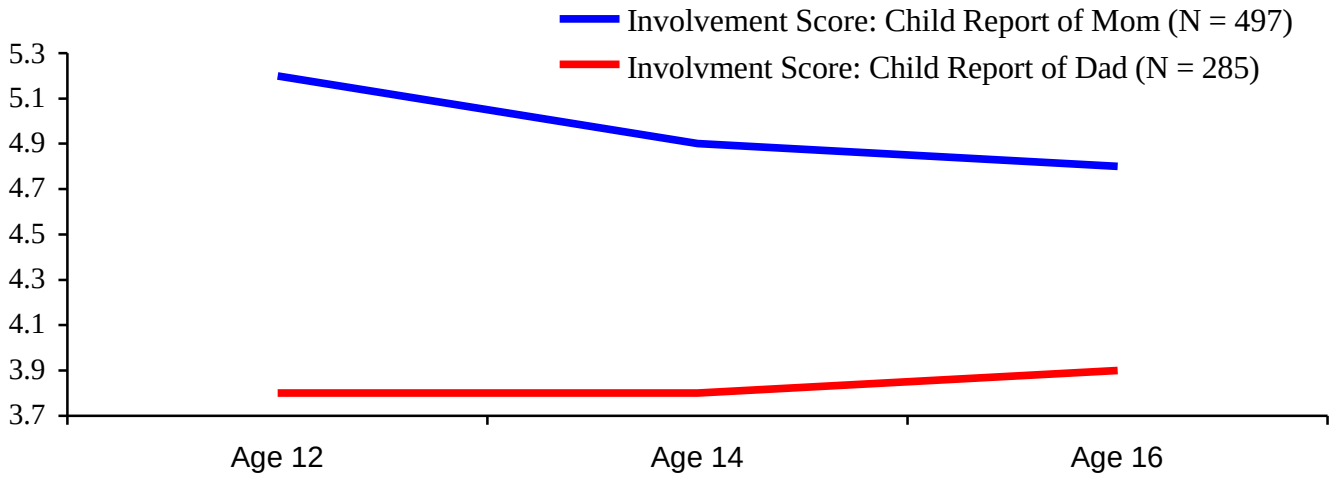


Figure 2 illustrates change in the Level of Recent Involvement scores at Ages 12, 14 and 16 for respondents with data at each of the three time points. A slight decline is seen overtime in shared activities with maternal caregivers, while the number of shared activities with paternal caregivers remains fairly stable.

Figure 2. Longitudinal Level of Recent Involvement



Educational Aspirations for Adolescent

At Age 16, most adolescents reported that both their maternal and caregivers would be either "somewhat" or "really" disappointed if they did not graduate from high school. Scores for level of disappointment were much higher for high school graduation (90-93%), than they were for college (66-69%).

Reliability
Internal consistency for the Age 16 Quality of Relationship scores for the LONGSCAN sample was good (maternal caregivers α = .85; paternal caregivers α = .89). Internal consistency for the Age 16 Level of Recent Involvement scores was also good (maternal caregivers α = .65; paternal caregivers = .72).

Validity
Significant correlations are seen when looking across all three time points (Ages 12, 14, and 16) for the Quality of Relationship scores for both caregivers, as seen in Table 2.

Table 2. Longitudinal Correlations for Quality of Relationship Scores

	Quality of Relationship: Maternal Caregiver			Quality of Relationship: Paternal Caregiver		
	Age 12	Age 14	Age 16	Age 12	Age 14	Age 16
Age 12	--			--		
Age 14	.45***	--		.36***	--	
Age 16	.32***	.53***	--	.37***	.52***	--

Notes. Based on data received at the Coordinating Center through February '10.
*** p < .0001

Significant correlations are seen across all three time points (Ages 12, 14, and 16) for the Level of Recent Involvement scores for both caregivers, as seen in Table 3.

Table 3. Correlations Over Time for Parental Involvement Sum Scores

	Parental Involvement: Maternal Caregiver			Parental Involvement: Paternal Caregiver		
	Age 12	Age 14	Age 16	Age 12	Age 14	Age 16
Age 12	--			--		
Age 14	.40***	--		.40***	--	
Age 16	.25***	.26***	--	.26***	.29***	--

Notes. Based on data received at the Coordinating Center through February '10.
*** p < .0001

Publisher Information

This measure is free and available for use upon the receipt of a signed User Agreement for LONGSCAN Project-Developed Measures available at (http://www.iprc.unc.edu/longscan/).

References and Bibliography

Knight, E. D., Smith, J. B., Martin, L. M., Lewis, T., & the LONGSCAN Investigators (2008). Measures for Assessment of Functioning and Outcomes in Longitudinal Research on Child Abuse Volume 3: Early Adolescence (Ages 12-14). Accessible at the LONGSCAN web site (http://www.iprc.unc.edu/longscan/).

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http://www.cpc.unc.edu/projects/addhealth

Parent-Child Relationship
Adapted from National Longitudinal Study of Adolescent Health
(Add Health; Resnick et al., 1997)

Description of Measure

Purpose
This measure assesses a primary caregiver's perception of the quality of the relationship with his or her adolescent and the level of their recent involvement, as well as the caregiver's educational aspirations for the adolescent. There is a parallel measure for adolescent report on the relationship with his or her mother and father figures.

Conceptual Organization
Two broad domains of relationship quality are assessed, including the caregiver's perception of the overall quality of the relationship with his or her adolescent, and the nature and extent of recent shared activities. Dimensions of quality of relationship assessed include level of closeness, understanding, trust, shared decision making, caring and getting along. The measure includes nine yes/no items asking if, in the last four weeks, the caregiver and adolescent did specific things together, like shopping, playing a sport, or talking about school. Two items assess the caregiver's educational aspirations for the child.

Item Origin/Selection Process
The items were adapted from those used in the Add Health Study (Resnick et al., 1997).

Materials
A-CASI delivery system

Time Required
2-3 minutes

Administration Method
A-CASI

Training
Minimal training is required given that the measure is delivered in an A-CASI format.

Scoring

Parent-Child Relationship includes three subscales: Quality of Relationship, Level of Recent Involvement, and Caregiver's Educational Aspirations for Child**.**

Quality of Relationship: The Quality of Relationship mean score is created using the mean of the six items listed in Tables 1 and 2 below. Each item assesses a dimension of the relationship using a five- point likert scale (1= never to 5 = always, or 1= not at all to 5=very much). Individual items may also be utilized.

Level of Recent Involvement: Nine yes/no items assess the nature and extent of shared activities in the last month. The subscale score is created by summing these items. There is a range of 0 to 9 shared activities.

Educational Aspirations: Two items ask how disappointed the caregiver would be if the adolescent did not graduate from high school or college, using a five-point likert scale. Higher scores indicate higher educational aspirations.

Score Interpretation
Higher scores indicate higher levels of relationship quality, recent parent/child involvement, and educational aspirations.

LONGSCAN Use

Data Points
Ages 12, 14, and 16

Respondent
Parental caregiver; parallel measures exist for adolescent self report of quality of relationship with mother and father-figures (Ages 12 and 14 - MCCA, FCCA; Age 16 – combines the MCCA and FCCA items into one form, the QRPA).

Mnemonics and Datasets
PCPA: Ages 12 and 14
PCPB: Age 16

Rationale
The quality of an adolescent's relationship with his or her parents has been found to be predictive of adolescent mental health, peer relationships, and risk taking behaviors.

Results

Descriptive Statistics

For descriptive statistics from the Ages 12 and 14 Quality of Parent-Child Relationship, see the 3rd volume of the Measures Manuals (Knight et al., 2008). Table 1 provides the mean scores of the Quality of Relationship at Age 16. The majority of caregivers rate the quality of their relationship as four or above, out of a possible high score of five, ($\underline{M}$ = 4.2, SD = 0.6).

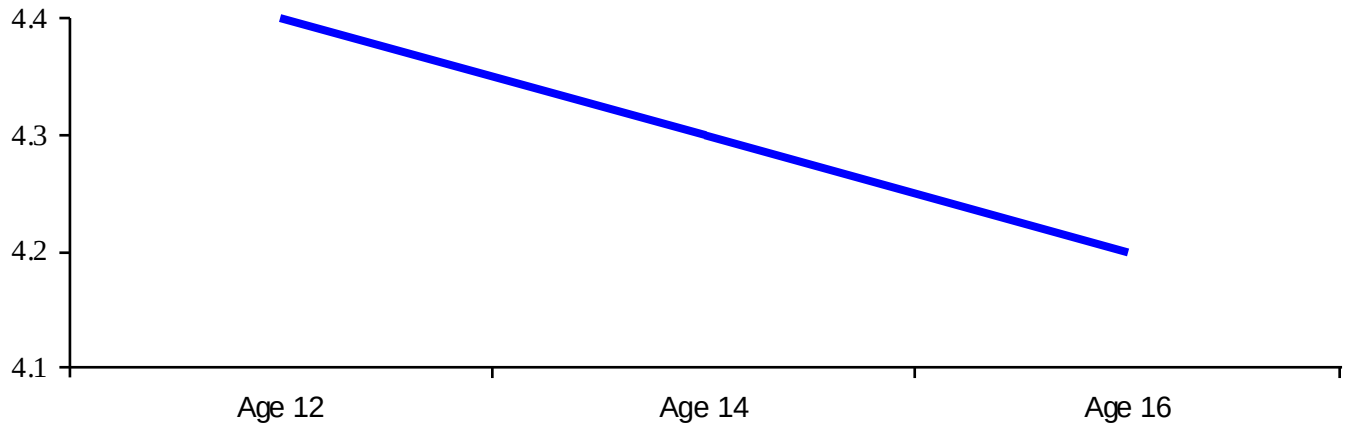
Table 1. Quality of Relationship at Age 16

	N	How close do you feel to your child? M (SD)	How much do you care about your child? M (SD)	How often do you trust your child? M (SD)	How often do you try to understand your child? M (SD)	How often do you and your child get along? M (SD)	How often do you make decisions together? M (SD)	Quality of Relationship Mean Score * M (SD)
Overall	788	4.5 (0.8)	5.0 (0.2)	4.0 (1.0)	3.8 (0.9)	4.1 (0.8)	3.8 (1.0)	4.2 (0.6)
Child's Gender								
Male	381	4.6 (0.8)	5.0 (0.3)	4.1 (0.9)	3.9 (0.9)	4.1 (0.8)	3.8 (1.0)	4.2 (0.6)
Female	407	4.5 (0.8)	5.0 (0.2)	4.0 (1.1)	3.8 (0.9)	4.1 (0.8)	3.9 (1.0)	4.2 (0.6)
Study Site								
EA	160	4.7 (0.7)	5.0 (0.2)	4.2 (1.0)	4.1 (0.9)	4.3 (0.8)	4.0 (1.0)	4.4 (0.6)
MW	120	4.4 (0.8)	5.0 (0.2)	4.1 (1.1)	3.8 (1.0)	4.2 (0.8)	3.9 (1.1)	4.2 (0.6)
SO	117	4.6 (0.8)	5.0 (0.2)	3.9 (1.0)	3.8 (1.0)	4.0 (0.9)	3.9 (1.0)	4.2 (0.7)
SW	205	4.5 (0.8)	5.0 (0.1)	3.9 (1.1)	3.8 (0.8)	4.0 (0.8)	3.7 (1.0)	4.1 (0.6)
NW	186	4.4 (0.8)	4.9 (0.4)	4.0 (0.9)	3.7 (0.8)	4.1 (0.7)	3.8 (0.9)	4.1 (0.5)

Notes. Based on data received at the Coordinating Center through July'09.

Figure 1 illustrates the slight decline over time in the Quality of Relationship scores for those participants with all three time points (Ages 12, 14, and 16).

Figure 1. Longitudinal Quality of Relationship Scores (N = 596)



The Level of Recent Involvement subscale includes nine yes/no items asking if the caregiver and adolescent did specific things together, such as shopping, playing a sport, or talking about school, in the past month. Age 16 Level of Recent Involvement scores are described in Table 2.

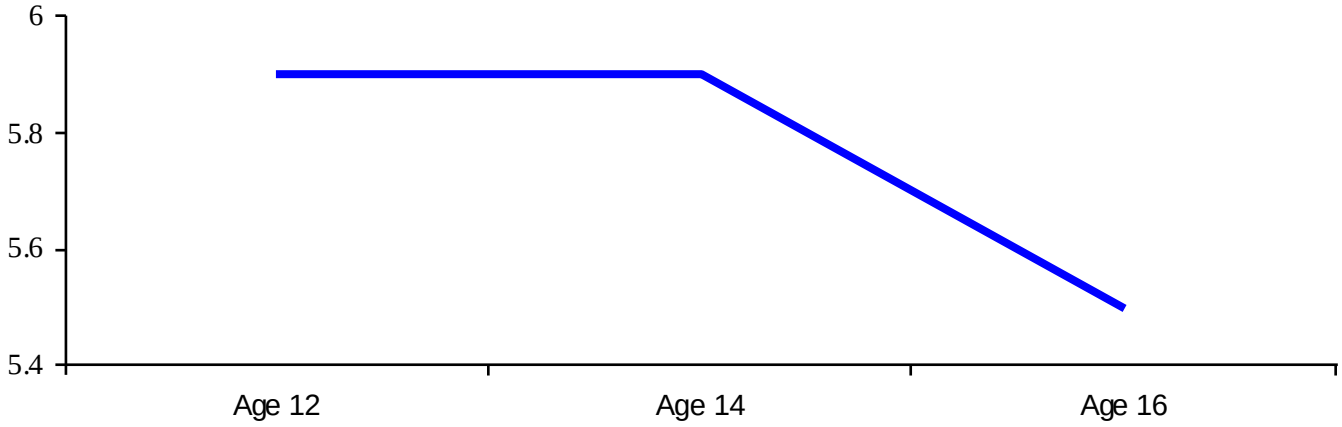
Table 2. Level of Recent Involvement at Age 16

		Age 16 Level of Recent Involvement Sum Score
	N	M (SD)
Overall	787	5.5 (2.1)
Child's Gender		
Male	380	5.3 (2.2)
Female	407	5.7 (2.1)
Study Site		
EA	160	5.6 (2.3)
MW	120	5.4 (2.1)
SO	117	5.3 (2.4)
SW	205	5.8 (2.2)
NW	185	5.5 (1.7)

Notes. Based on data received at the Coordinating Center through July'09.

While the level of shared activities is very similar for caregivers and their 12 and 14 year-olds, it declines slightly at Age 16 (Figure 2).

Figure 2. Longitudinal Level of Recent Involvement Scores



Educational Aspirations for Child

At Age 16, most caregivers reported that they would be either "somewhat" or "really" disappointed if their child did not graduate from high school (93%) or college (57%).

Reliability

Internal consistency for the Age 16 Quality of Relationship mean scores for the LONGSCAN sample was good (α = .79). Internal consistency for the Age 16 Level of Recent Involvement scores for the LONGSCAN sample was also good (α = .64).

Validity
Significant correlations are seen across the three ages (Ages 12, 14, and 16) for both the Quality of Relationship and parent/child involvement scores (see Table 3 below).

Table 3. Longitudinal Correlations for Subscale Scores

	Quality of Relationship Mean Score			Recent Involvement Sum Score		
	Age 12	Age 14	Age 16	Age 12	Age 14	Age 16
Age 12	--			--		
Age 14	.54***	--		.40***	--	
Age 16	.43***	.58***	--	.28***	.35***	--

Notes. Based on data received at the Coordinating Center through July'09.

Table 4: When looking across all three Parent-Child Relationship measures(i.e., child report of mother, child report of father, and caregiver report of child) significant correlations are seen between respondents at Age 16.

Table 4. Age 16 Correlations Between Reporters

	Age 16 Quality of Relationship Mean Score			Age 16 Recent Involvement Sum Score		
	Child Report of Father	Child Report of Mother	Caregiver Report of Child	Child Report of Father	Child Report of Mother	Caregiver Report of Child
Child Report of Father	--			--		
Child Report of Mother	.44***	--		.57***	--	
Caregiver Report of Child	.21***	.38***	--	.15***	.25***	--

Notes. Based on data received at the Coordinating Center through July'09.

Publisher Information

This measure is free and available for use upon the receipt of a signed User Agreement for LONGSCAN Project-Developed Measures Available at http://www.iprc.unc.edu/longscan/

References and Bibliography

Knight, E. D., Smith, J. B., Martin, L. M., Lewis, T., & the LONGSCAN Investigators (2008). Measures for Assessment of Functioning and Outcomes in Longitudinal Research on Child Abuse Volume 3: Early Adolescence (Ages 12-14). Accessible at the LONGSCAN web site (http://www.iprc.unc.edu/longscan/).

Resnick, M. D., Bearman, P. S., Blum, R. Wm., Bauman, K. E., Harris, K. M., Jones, J., Tabor, J., Beuhring, T. Sieving, R.E., Shew, M., Ireland, M., Bearinger, L. H. & Udry, J. R. (1997).Protecting adolescents from harm: Findings from the National Longitudinal Study on Adolescent Health. *Journal of the American Medical Association, 278 (19),* 823-832.

http://www.cpc.unc.edu/projects/addhealth

Parental Monitoring

Adapted from Patterson & Stouthamer-Loeber, 1984

Description of Measure

Purpose
These parallel, five-item measures are designed to assess a caregiver's level of monitoring of his/her adolescent, and the adolescent's perceived level of monitoring by his/her caregiver.

Conceptual Organization
A lower level of parental monitoring has been associated with higher levels of delinquency among adolescent boys (Patterson & Stouthamer-Loeber, 1984) and with antisocial behavior in preadolescent boys (Patterson, 1982). Monitoring of three broad domains, including children's use of money, youth's whereabouts and activities, and caregiver knowledge about children's friends are assessed. Caregivers who know more about each of these domains are considered to have higher levels of monitoring. Response options to the five items range from 0=They don't really know/Don't know, to 2=They know A LOT about this/Know a lot.

Item Origin/Selection Process
The literature on parental monitoring was reviewed and the five items comprising this measure have been used to assess parental monitoring in multiple studies, including the Child Development Project and the Oregon Youth Study.

Materials
Paper and pencil or A-CASI delivery system.

Time Required
1 minute

Administration Method
Self or interviewer administration. LONGSCAN utilized an A-CASI administration.

Training
Minimal training is required**.**

Scoring

Score Types
A mean score of the five items can be constructed to create an overall parental monitoring mean score, separately for caregivers and adolescents.

Score Interpretation
Mean scores range from 0 (don't know) to 2 (know a lot). Higher scores indicated higher levels of monitoring or perceived monitoring.

Norms and/or Comparative Data

Versions of these items have been used in multiple studies, in which higher levels of parental monitoring has been associated with better adolescent outcomes. Studies referenced include the Oregon Youth Study and the Child Development Project

LONGSCAN Use

Data Points
Ages 12, 14, and 16

Respondent
Adolescent and Caregiver

Mnemonic and Version
Child report: PMCA (Age 12, 14, and 16)
Caregiver report: PMPA (Age 12, 14, and 16)

Rationale
Higher levels of parental monitoring have been associated with better adolescent outcomes, although levels of parental monitoring normatively decrease as adolescents age.

Administration and Scoring Notes
Higher scores indicate higher levels of parental monitoring.

Results

Descriptive Statistics

For descriptive statistics of Ages 12 and 14 Parental Monitoring scores, see the 3rd volume of the Measures Manuals (Knight et al., 2008). Table 1 provides means and standard deviations of the mean scores from both respondents (caregiver and adolescent), overall and separately by gender and site. At Age 16, caregivers reported slightly higher mean scores than did 16 year-old respondents, and girls reported slightly higher Parental Monitoring mean scores than boys.

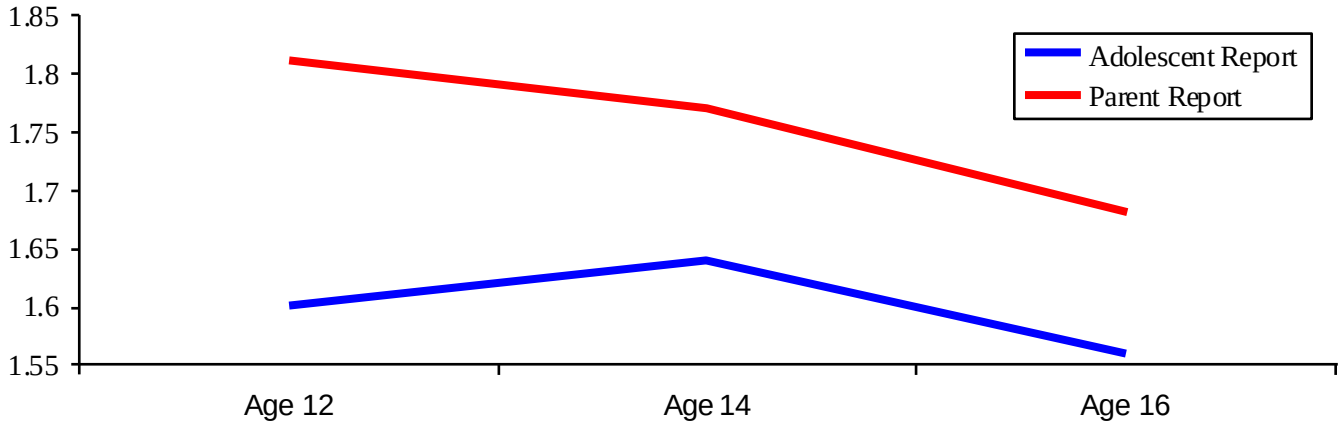
Table 1. Means and Standard Deviations for Age 16 Parental Monitoring Scores

	Parent's Parental Monitoring Mean Score			Adolescent's Parental Monitoring Mean Score		
	N	M	SD	N	M	SD
Overall	802	1.68	0.41	756	1.56	0.45
Adolescent's Gender						
Male	387	1.66	0.39	356	1.51	0.47
Female	415	1.70	0.43	400	1.61	0.44
Study Site						
EA	160	1.67	0.42	151	1.61	0.44
MW	120	1.75	0.39	108	1.64	0.43
SO	132	1.72	0.34	118	1.55	0.44
SW	205	1.60	0.49	197	1.49	0.50
NW	185	1.70	0.36	182	1.56	0.44

Source. Based on data received at the Coordinating Center through July '09.

Figure 1 provides a look at parental monitoring scores over time (Ages 12, 14, and 16).

Figure 1. Graph of Parental Monitoring Scores by Respondent (Ages 12, 14, and 16)



Reliability

As can be seen in Table 2, internal consistency for the Age 16 Parental Monitoring mean scores was good (Caregiver α = .82; Adolescent α = .79).

Table 2. Cronbach Alphas for Age 16 Parental Monitoring Mean Scores

	Caregiver's Parental Monitoring Mean Score		Adolescent's Parental Monitoring Mean Score	
	N	α	N	α
Overall	799	.82	753	.79

Source. Based on data received at the Coordinating Center through July '09.

Predictive Validity

Table 3 provides correlations between the Parental Monitoring Mean Scores and select Age 16 outcomes , including the Child Behavior Checklist (Achenbach, 1991) and Trauma Symptom Checklist T Scores (Briere, 1996).

Table 3. Correlations between Age 16 Parental Monitoring Mean Scores and select Age 16 Outcomes

	Caregiver's Parental Monitoring Mean Score		Adolescent's Parental Monitoring Mean Score	
	N	Age 16	N	Age 16
Child Behavior Checklist T Scores	801		732	
Internalizing Problems		-.22***		-.15***
Externalizing Problems		-.36***		-.18***
Total Problems		-.30***		-.17***
Trauma Symptom Checklist T Scores	650		666	
Anger		-.16***		-.32***
Anxiety		-.08*		-.21***
Depression		-.13***		-.30***
PTSD		-.14***		-.25***
Dissociation		-.13***		-.28***

Source. Based on data received at the Coordinating Center through July '09.

* <.05, ** <.01, *** <.001

References and Bibliography

Achenbach, T. M. (1991). *Manual for Child Behavior Checklist/ 4-18 and 1991 Profile*. Burlington, VT: University of Vermont, Dept. of Psychiatry.

Briere, J. (1996). Trauma Symptom Checklist for Children: Professional Manual. Odessa, FL: Psychological Assessment Resources, Inc.

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Patterson, G., & Stouthamer-Loeber, M. (1984). The correlation of family management practices and delinquency. *Child Development*, *55*, 1299-1307.

The Child Development Project. www.cdp_auburn.edu

The Oregon Youth Study. www.oslc.org/about/overview.html

Parent's Attitudes Toward Delinquency
1991
Denver Youth Study
Huizinga, D., Esbensen, Finn-Aage & Weiher, A.W.

Description of Measure

Purpose
To assess parental attitudes toward adolescent deviance and delinquent behavior.

Conceptual Organization
Twelve items assess a parent's attitude toward adolescent deviance and delinquent behaviors. Items range from "How wrong do you think it is for someone your child's age to: lie, disobey or talk back to adults" to 'attacking someone with a weapon'. Response options range from '1 = very wrong' to '4 = not wrong at all'. The original measure also includes items on parental attitudes towards substance use and involvement, which are not included in the measure utilized by LONGSCAN.

Item Origin/Selection Process
This measure was used in the Denver Youth Study, one of the Causes and Correlates of Delinquency Studies, which examined pathways to and through delinquent and violent behavior. The authors report selecting this measure due to its relatively high empirical correlation with several delinquency measures (Huizinga et al., 1991). The measure is based on a youth self report measure developed by Jessor & Jessor for their longitudinal study of problem behaviors and psychosocial development.

Time Required
1-2 minutes

Training
Minimal

Scoring

Score Types
An overall mean score for Parental Attitude Toward Deviance can be derived by taking the mean of all 12 items.

Score Interpretation
Lower scores indicate lower parental tolerance for deviance and delinquent behaviors.

LONGSCAN Use

Data Points
Age 16

Mnemonic and Version
PATA (Age 16)

Administration Notes
A-CASI administration

Respondent
Caregiver

Results

Descriptive Statistics

Tables 1a and 1b provide descriptive statistics for the 12-item measure by gender and study site.

Table 1a. Caregivers' Attitudes Toward Deviance

	N	Skip school without an excuse M (SD)	Lie, disobey, or talk back to adults M (SD)	Purposely damage or destroy others' property M (SD)	Steal something worth less than $5.00 M (SD)	Steal something worth $50.00 M (SD)	Steal something worth $100.00 M (SD)
Overall	742	1.2 (0.5)	1.2 (0.5)	1.1 (0.3)	1.1 (0.4)	1.1 (0.4)	1.1 (0.3)
Child's Gender							
Male	356	1.2 (0.5)	1.2 (0.5)	1.1 (0.4)	1.1 (0.4)	1.1 (0.4)	1.1 (0.3)
Female	386	1.2 (0.5)	1.2 (0.4)	1.1 (0.3)	1.1 (0.4)	1.1 (0.4)	1.1 (0.3)
Study Site							
EA	154	1.2 (0.6)	1.2 (0.5)	1.1 (0.5)	1.1 (0.4)	1.2 (0.5)	1.1 (0.5)
MW	131	1.1 (0.4)	1.1 (0.4)	1.1 (0.3)	1.1 (0.4)	1.1 (0.3)	1.0 (0.2)
SO	114	1.3 (0.5)	1.2 (0.5)	1.1 (0.3)	1.1 (0.4)	1.1 (0.3)	1.1 (0.3)
SW	165	1.2 (0.5)	1.1 (0.4)	1.0 (0.2)	1.1 (0.3)	1.1 (0.3)	1.0 (0.2)
NW	178	1.3 (0.6)	1.3 (0.5)	1.1 (0.4)	1.1 (0.4)	1.2 (0.4)	1.1 (0.4)

Source. Based on data received at the Coordinating Center through February '10.

Table 1b. Caregivers' Attitudes Toward Deviance (cont)

	N	Go into a building to steal M (SD)	Go joyriding M (SD)	Hit someone with the idea of hurting them M (SD)	Attack someone with a weapon M (SD)	Use force to get money or things M (SD)	Sell drugs M (SD)
Overall	742	1.1 (0.3)	1.4 (0.7)	1.1 (0.3)	1.1 (0.4)	1.0 (0.2)	1.1 (0.4)
Child's Gender							
Male	356	1.1 (0.3)	1.4 (0.8)	1.1 (0.4)	1.1 (0.4)	1.0 (0.3)	1.1 (0.4)
Female	386	1.1 (0.3)	1.4 (0.7)	1.1 (0.3)	1.1 (0.3)	1.0 (0.2)	1.1 (0.3)
Study Site							
EA	154	1.1 (0.4)	1.4 (0.8)	1.2 (0.5)	1.1 (0.5)	1.1 (0.3)	1.1 (0.4)
MW	131	1.2 (0.6)	1.1 (0.2)	1.1 (0.2)	1.0 (0.1)	1.0 (0.1)	1.0 (0.2)
SO	114	1.1 (0.3)	1.7 (0.9)	1.1 (0.3)	1.1 (0.3)	1.0 (0.2)	1.0 (0.2)
SW	165	1.0 (0.2)	1.3 (0.5)	1.0 (0.2)	1.1 (0.2)	1.0 (0.1)	1.1 (0.3)
NW	178	1.1 (0.3)	1.4 (0.8)	1.1 (0.4)	1.1 (0.4)	1.1 (0.3)	1.1 (0.5)

Source. Based on data received at the Coordinating Center through February '10.

An overall mean score for Parent's Attitude Toward Deviance can be derived by taking the mean of all 12 items (see Table 2 below), with 1 indicating the least tolerance and 4 indicating the most tolerance towards deviant or delinquent behaviors.

Table 2. Descriptive statistics for the Caregiver's Attitudes towards Deviance Mean Score

	Caregiver's Attitudes towards Deviance Mean Score					
	N	M (SD)	Min	Max	Range	Median
Overall	742	1.1 (0.3)	1.0	4.0	3.0	1.0
Child's Gender						
Male	356	1.1 (0.3)	1.0	4.0	3.0	1.0
Female	386	1.1 (0.3)	1.0	4.0	3.0	1.0
Study Site						
EA	154	1.2 (0.4)	1.0	4.0	3.0	1.0
MW	131	1.1 (0.2)	1.0	2.1	1.1	1.0
SO	114	1.2 (0.2)	1.0	2.1	1.1	1.1
SW	165	1.1 (0.3)	1.0	4.0	3.0	1.0
NW	178	1.2 (0.3)	1.0	4.0	3.0	1.1

Source. Based on data received at the Coordinating Center through February '10.

Reliability

Huizinga et al (1991) report good internal consistency (α =.86).

Internal consistency for the LONGSCAN Age 16 Parent's Attitudes Toward Deviance mean score was excellent (α = .91).

Validity

Huizinga et al report that this measure has "somewhat higher empirical correlation with several delinquency measures," relative to similar measures (Huizinga et al, 1991).

Publisher Information

See Huizinga et al, 1991, for measure and additional information.

References and Bibliography

Jessor, R. & Jessor, S.L. (1977) Problem Behavior and Psychosocial Development: A Longitudinal Study of Youth. Academy Press, NY, NY.

Huizinga, D., Finn-Aage, E., Weiher, A.W. & the Denver Youth Survey (1991) Are there Multiple Paths To Delinquency? Journal of Criminal Law & Criminology, 82 (1), 83-118.

Parent's Future Expectations
LONGSCAN, 1998

Description of Measure

Purpose
This measure is intended to assess a caregiver's educational expectations for their adolescent. Two additional items ask about the best thing that has recently happened for the caregiver, and the caregiver's goals for the upcoming year.

Conceptual Organization
One item assesses the importance the caregiver attaches to educational achievement, and a second asks about the highest level the caregiver expects the child to go in school, with response options ranging from "Leave as soon as possible" to "Graduate or Professional School."

Materials
Laptop with programmed interview

Time Required
1-2 minutes

Administration Method
Interviewer-administered

Training
Minimal

Scoring

Item-level data, no scoring is involved.

LONGSCAN Use

Data Points
Ages 12, 14, and 16

Respondent
Caregiver

Mnemonic and Version
PFEA: Ages 12, 14, and 16

Rationale
Parental expectations of educational achievement have been found to be related to resilience and higher educational achievement.

Results

Descriptive Statistics

For descriptive statistics of the age 12-14 Future Expectations measure, please refer to the 3rd volume of the measures manuals (Knight et al., 2008). Table 1 provides frequencies for items on the ages 16 Future Expectations Questionnaire by sample demographics. At age 16, parents were invested in their child's educational achievement with 99% endorsing that it was somewhat to extremely important that their child do well in school, and 64% endorsing that they expected their child to go to college and/or graduate school.

Table 1. Age 16 Caregiver's Educational Expectations

	How important is it for your child to do well in school?			What is the highest level of schooling you expect your child to go?				
	N	Not Important n (%)	Somewhat to Extremely Important n (%)	N	Not Graduate H.S. n (%)	Get GED or H.S. graduation n (%)	College or Community College n (%)	Graduate or Professional Schooling n (%)
Overall	799	0.2 (2)	99.8 (797)	797	1.5 (12)	33.2 (265)	53.9 (430)	11.3 (90)
Child's Gender								
Male	384	0.1 (1)	47.9 (383)	383	0.9 (7)	19.4 (155)	22.7 (181)	4.9 (39)
Female	415	0.1 (1)	51.8 (414)	415	0.6 (5)	13.8 (110)	31.2 (249)	6.4 (51)
Study Site								
EA	155	0.0 (0)	19.4 (155)	155	0.1 (1)	8.2 (65)	7.9 (63)	3.3 (26)
MW	132	0.0 (0)	16.5 (132)	132	0.4 (3)	3.6 (29)	9.3 (74)	3.3 (26)
SO	125	0.0 (0)	15.6 (125)	125	0.2 (2)	5.5 (44)	9.2 (73)	0.7 (6)
SW	204	0.1 (1)	25.4 (203)	204	0.4 (3)	7.4 (59)	15.3 (122)	2.5 (20)
NW	183	0.1 (1)	22.8 (182)	181	0.4 (3)	8.5 (68)	12.3 (98)	1.5 (12)

Notes. Based on data received at the Coordinating Center through Feburary'10.

The items assessing the 'best thing that has recently happened to the caregiver' and 'his/her goals for the coming year' have narrative responses that are uncoded in the LONGSCAN data set. Therefore, descriptive statistics are not reported for these items.

Publisher Information

This measure is free and available for use upon the receipt of a signed User Agreement for LONGSCAN Project-Developed Measures.

References

Knight, E. D., Smith, J. B., Martin, L. M., Lewis, T., & the LONGSCAN Investigators (2008). Measures for Assessment of Functioning and Outcomes in Longitudinal Research on Child Abuse Volume 3: Early Adolescence (Ages 12-14). Accessible at the LONGSCAN web site (http://www.unc.edu/depts/sph/longscan/).

Poverty & Hunger
LONGSCAN, 1998
(Note: Includes items from Community Childhood Hunger Identification
Project Scaled Hunger Measure - Wehler, Scott & Anderson, 1994)

Description of Measure

Purpose
This measure is intended to assess household poverty status, receipt of public assistance, and food insecurity and hunger. Household receipt of child support, recent loss of basic services (i.e., heat), current level of financial worry and anticipated financial stability are also assessed.

Conceptual Organization
This 24-item measure assesses poverty status using four broad domains: 1) receipt of public assistance services including TANF, food stamps and WIC, SSI, subsidized/public/section 8 housing, Medicaid, and free school lunch; 2) recent food insecurity and hunger; 3) lack or loss of basic needs and services (including, among others, medical care, clothing, heat, electricity) and 4) financial worry and anticipation of change in financial status.

Item Origin/Selection Process
The eight items assessing food insecurity and hunger (items 9-16) are from the Scaled Hunger Measure of the Community Childhood Hunger Identification Project (Wehler, Scott & Anderson, 1994, 1991); LONGSCAN modified the timeframe for these items from “last year” to “past 30 days.” The remaining items were LONGSCAN developed.

Materials
Paper and pencil or computerized form

Time Required
2-3 minutes

Administration Method
Self report or interviewer administered

Training
Minimal training.

Scoring
Individual items may be utilized.

Hunger status of household: Items 9-16 assess hunger status. Five or more positive endorsements indicate food shortage in the household and classifies the household and its members as "hungry." One to four endorsements on these items indicate the household is at risk of hunger.

LONGSCAN Use

Data Points
Ages 12, 14 and 16

Respondent
Caregiver

Administration notes
LONGSCAN utilized an A-CASI administration

Mnemonic and Version
POMB: Ages 12, 14 and 16

Dataset
POM

Rationale
Poverty status is recognized as a critical risk factor for healthy child development, and individual and family well-being. Receipt of public assistance may be a marker for poverty status. Studies have shown that children classified as hungry are more likely than their non-hungry peers to have poor health outcomes, and poorer behavioral and academic functioning.

Results

Descriptive Statistics
For descriptive statistics for the Age 12/14 poverty measure items, please refer to the 3rd volume of the Measures Manuals (Knight et al., 2008). Table 1 provides frequencies for receipt of public assistance received at Age 16. At Age 16, a majority (78%) of LONGSCAN households received at least one type of public assistance (i.e., TANF, food stamps, WIC, SSI, subsidized housing, Medicaid, and or reduced/free lunches), while 24% received child support.

Table 1. Public assistance received at Age 16

		Household receives…							
	N*	TANF % (n)	Child support % (n)	Food stamps % (n)	WIC % (n)	SSI % (n)	Subsidized housing % (n)	Medicaid % (n)	Reduced / free lunch % (n)
Overall	773	21.2 (164)	24.4 (196)	34.4 (266)	14.1 (109)	29.2 (226)	18.8 (145)	50.4 (390)	63.8 (493)
Child's Gender									
Male	369	8.9 (67)	11.5 (89)	15.9 (123)	6.3 (49)	13.7 (106)	8.4 (65)	22.9 (177)	30.7 (237)
Female	404	12.6 (97)	13.8 (107)	18.5 (143)	7.8 (60)	15.5 (120)	10.3 (80)	27.5 (213)	33.1 (256)
Study Site									
EA	159	3.9 (30)	4.9 (38)	8.4 (65)	3.6 (28)	7.0 (54)	4.9 (38)	10.6 (82)	14.7 (114)
MW	120	5.3 (41)	3.4 (26)	8.9 (69)	2.2 (17)	6.2 (48)	4.4 (34)	10.0 (77)	11.4 (88)
SO	132	2.8 (22)	5.8 (45)	5.7 (44)	2.3 (18)	4.3 (33)	3.7 (21)	10.3 (80)	11.6 (90)
SW	183	4.3 (33)	4.5 (35)	5.0 (39)	2.8 (22)	7.0 (54)	3.1 (24)	8.9 (69)	11.4 (88)
NW	179	4.9 (38)	6.7 (52)	6.3 (49)	3.1 (24)	4.8 (37)	3.6 (28)	10.6 (82)	14.6 (113)

Notes. TANF = Temporary Aid to Needy Families; WIC = Women, Infants, and Children;
SSI = Supplemental Security Income
Based on data received at the Coordinating Center through July'09.
* Sample N's change slightly between items.

Tables 2 and 3 provide frequencies for the hunger and food insecurity items at Age 16. Twenty percent of caregivers reported running out of money to buy food, and 15% of caregivers reported having to skip meals to get by in the past 30 days. Seven percent of caregivers reported that their children said they were hungry because that there wasn't enough food in the house, and 4% of caregivers had to cut the amount of food or skip meals given to their children in order to get by.

Table 2. Hunger and food insecurity at Age 16

		Over the past 30 days…			
		Did your household run out of $$ to buy food?	Rely on limited # of foods to feed children because you were running out of $$?	Did adults eat less food because you felt there wasn't enough $$ for food?	Did household cut size of meals or skip meals due to no $$ for food?
	N*	% (n)	% (n)	% (n)	% (n)
Overall	770	19.6 (151)	22.1 (170)	14.0 (105)	14.6 (112)
Child's Gender					
Male	367	10.0 (77)	11.3 (87)	7.0 (54)	7.4 (57)
Female	403	9.6 (74)	10.8 (83)	6.6 (51)	7.2 (55)
Study Site					
EA	159	4.6 (35)	4.2 (32)	3.1 (24)	2.3 (18)
MW	119	3.4 (26)	4.2 (32)	1.9 (15)	2.1 (16)
SO	131	4.4 (34)	4.6 (35)	2.1 (16)	2.7 (21)
SW	183	3.1 (24)	3.8 (29)	2.6 (20)	2.9 (22)
NW	178	4.2 (32)	5.5 (42)	3.9 (30)	4.6 (35)

Notes. Based on data received at the Coordinating Center through July'09.
*Sample N's change slightly between items.

Table 3. Hunger and food insecurity at Age 16

		Over the past 30 days…			
		Did your children say they were hungry because there was not enough food in the house?	Did your children eat less than you felt they should because there was not enough $$ to buy food?	Did you cut the size of your children's meals or did they skip meals because there was not enough $$ for food?	Did any of your children go to bed hungry because there was not enough $$ to buy food?
	N*	% (n)	% (n)	% (n)	% (n)
Overall	766	7.3 (56)	5.5 (42)	3.5 (27)	3.9 (30)
Child's Gender					
Male	365	3.0 (23)	2.5 (19)	1.8 (14)	1.9 (15)
Female	401	4.3 (33)	3.0 (23)	1.7 (13)	1.9 (15)
Study Site					
EA	159	1.7 (13)	1.3 (10)	0.9 (7)	0.3 (2)
MW	120	1.2 (9)	1.2 (9)	0.7 (5)	0.8 (6)
SO	131	0.8 (6)	0.5 (4)	0.3 (2)	0.9 (7)
SW	180	2.3 (18)	1.3 (10)	1.2 (9)	1.0 (8)
NW	176	1.3 (10)	1.2 (9)	0.5 (4)	0.9 (7)

Notes. Based on data received at the Coordinating Center through July'09.
* Sample N's change slightly between items.

Table 4 provides frequencies and descriptive statistics for the hunger/food insecurity scale at Age 16. This scale was derived by summing the 8 items from tables 2 and 3. Scores range from no/low risk for hunger (score of 0); at risk of hunger (score of 1-4); and food shortage/hungry (scores 5 or greater). 33% of of households were ranked as 'at risk of hunger,' or "food shortage/hungry" in the past 30 days.

Table 4. Hunger and food insecurity scale at Age 16

		Hunger/Food Insecurity Scale			
	N	No/Low Risk for Hunger % (n)	At Risk of Hunger % (n)	Food Shortage/Hungry % (n)	Overall M (SD)
Overall	773	67.0 (518)	28.3 (219)	4.7 (36)	0.9 (1.6)
Child's Gender					
Male	369	31.6 (244)	13.8 (107)	2.3 (18)	0.9 (1.7)
Female	404	35.4 (274)	14.5 (112)	2.3 (18)	0.9 (1.6)
Study Site					
EA	159	14.2 (110)	5.4 (42)	0.9 (7)	0.9 (1.6)
MW	120	9.8 (76)	4.7 (36)	1.0 (8)	1.0 (1.8)
SO	132	0.6 (82)	5.8 (45)	0.6 (5)	0.9 (1.5)
SW	183	16.3 (126)	6.3 (49)	1.0 (8)	0.8 (1.5)
NW	179	16.0 (124)	6.1 (47)	1.0 (8)	0.9 (1.7)

Notes. Based on data received at the Coordinating Center through July '09.

Table 5 provides frequencies for households with the inability to secure basic needs due to financial hardship in the past 12 months at Age 16. Twenty-eight percent of caregivers reported that they were late making their rent/mortgage payments. Nine percent of caregivers reported that they had their electricity turned off and 10% reported that someone in their household did not get medical care due to lack of money.

Table 5. Indicators of financial hardship at Age 16

		In the last 12 months, have you…				
	N*	Been late in making rent or mortgage payments? % (n)	Had enough $$ to provide clothes for your family? % (n)	Had enough money to get heat when the weather was cold? % (n)	Had your lights cut off because you did not have enough $$ % (n)	Anyone in the household needed medical care but did not get it due to $$? % (n)
Overall	770	27.8 (214)	70.7 (542)	86.4 (663)	8.9 (69)	10.0 (77)
Child's Gender						
Male	366	12.5 (96)	34.2 (262)	41.3 (317)	3.0 (23)	5.1 (39)
Female	404	15.3 (118)	35.5 (280)	45.1 (346)	5.9 (46)	4.9 (38)
Study Site						
EA	159	5.6 (43)	14.1 (108)	17.9 (137)	1.5 (12)	1.8 (14)
MW	120	5.7 (44)	9.8 (75)	12.8 (98)	1.4 (11)	1.2 (9)
SO	132	6.4 (49)	13.0 (100)	14.9 (114)	2.1 (16)	1.8 (14)
SW	182	3.6 (28)	17.5 (134)	20.6 (158)	2.2 (17)	1.0 (8)
NW	177	6.5 (50)	16.3 (125)	20.3 (156)	1.7 (13)	2.2 (32)

Notes. Based on data received at the Coordinating Center through July '09.
* Sample N's change slightly between items.

Table 6 provides frequencies for items relating to the caregiver's current level of financial worry and anticipated financial stability at Age 16. Twenty six percent of caregivers reported worrying 'a lot to almost all of the time' about not having enough money to make ends meet. Almost 50% felt their finances would improve in the next 12 months.

Table 6. Caregiver's current level of financial worry and anticipated financial stability at Age 16

	How much do you worry about not having enough $$ to make ends meet?						In the next twelve months, do you think your finances will…			
	N	Never % (n)	Rarely % (n)	Some-times % (n)	A lot % (n)	Almost all the time % (n)	N	Get Worse % (n)	Stay the same % (n)	Improve % (n)
Overall	773	18.7 (145)	19.4 (150)	36.2 (280)	13.6 (105)	12.0 (93)	771	6.5 (50)	44.4 (342)	49.2 (379)
Child's Gender										
Male	369	9.4 (73)	9.6 (74)	16.6 (128)	7.4 (57)	4.8 (37)	368	3.4 (26)	19.3 (149)	25.0 (193)
Female	404	9.3 (72)	9.8 (76)	20.0 (152)	6.2 (48)	7.2 (56)	403	3.1 (24)	25.0 (193)	24.1 (186)
Study Site										
EA	159	4.9 (38)	4.0 (31)	7.6 (59)	2.5 (19)	1.6 (12)	159	1.4 (11)	7.3 (56)	11.9 (92)
MW	120	2.1 (16)	2.9 (22)	4.8 (37)	2.9 (22)	3.0 (23)	119	1.0 (8)	6.9 (53)	7.5 (58)
SO	132	1.9 (15)	2.6 (20)	7.8 (60)	2.2 (17)	2.6 (20)	132	1.0 (8)	8.8 (68)	7.3 (56)
SW	183	6.5 (50)	5.2 (40)	7.9 (61)	2.3 (18)	1.8 (14)	183	1.8 (14)	12.1 (93)	9.9 (76)
NW	179	3.4 (26)	4.8 (37)	8.1 (63)	3.7 (29)	3.1 (24)	178	1.2 (9)	9.3 (72)	12.6 (97)

Notes. Based on data received at the Coordinating Center through July '09.

Publisher Information

The project developed items are free and available for use upon the receipt of a signed User Agreement for LONGSCAN Project-Developed Measures available at www.unc.iprc/longscan/.

References and Bibliography

Knight, E. D., Smith, J. B., Martin, L. M., Lewis, T., & the LONGSCAN Investigators (2008). Measures for Assessment of Functioning and Outcomes in Longitudinal Research on Child Abuse Volume 3: Early Adolescence (Ages 12-14). Accessible at the LONGSCAN web site (http://www.iprc.unc.edu/longscan/).

Wehler, C. A., Scott, R. I., Anderson, J. J. & Parker, L. (1991). The Community Childhood Hunger Identification Project: A survey of childhood hunger in the United States. Food Research and Action Center, Washington, D.C.

Wehler, C. A., Scott, R. I., Anderson, J. J. & Parker, L. (1994). Development and testing process of the Community Childhood Hunger Identification Project scaled hunger measure and its application for a general population survey. Food Security Measurement and Research Conference: Papers and Proceedings, Appendix A. USDA Food and Consumer Service, Alexandria VA.

Resilience Factors
LONGSCAN, 1998

Description of Measure

Purpose
To assess factors associated with resilience and well-being in adolescents.

Conceptual Organization
The measure assesses four broad domains, including existence of familial and extrafamilial supportive adults; religiosity/ spirituality and religious institution involvement; prosocial extracurricular activities; and leadership positions held and honors received in the past year.

Item Origin/Selection Process
Items were project developed after a review of existing measures of adolescent resilience and related literature. The measure is not intended as a comprehensive measure of resilience factors, as other factors related to resilience are measured elsewhere in LONGSCAN interviews.

Materials
A-CASI delivery system, or paper forms.

Time Required
2-3 minutes

Administration Method
A-CASI, or paper and pencil self or interviewer administration.

Training
Minimal training is required.

Scoring
Individual items and counts derived across items may be used.

LONGSCAN Use

Data Points
Ages 12, 14, and 16

Respondent
Adolescent

Mnemonic and Version
RSFA: Ages 12 and 14
RSFB: Age 16

Rationale
The domains assessed in this measure have been found to be related to resilience in adolescents in general, and examining whether this is the case within an at-risk or maltreated sample was of interest to the LONGSCAN investigators.

Results

Descriptive Statistics

For descriptive statistics of the Age 12-14 Resilience Factors measure, please refer to the 3rd volume of the measures manuals (Knight et al. 2008). Table 1 provides frequencies for items assessing the adolescent's perception of the presence of supportive adults in his or her life. A large majority (97%) of adolescents reported having at least one adult to turn to for help with a serious problem. Girls consistently endorsed the presence of a supportive adult at a slightly higher rate than boys.

Table 1. Age 16 Resilience Factors: Presence of Supportive Adult(s)

	An adult you can turn to for help if you have a serious problem?	Could go to a parent/ someone who is like a parent (but is not a parent) with a serious problem?	Could go to another relative (not a parent) with a serious problem?	Could go to another adult (not a relative) with a serious problem?	Has there ever been an adult, outside your family, who has encouraged you and believed in you?	Would you say that this encouragement has made a difference in your life?
	n (%)	n (%)	n (%)	n (%)	n (%)	n (%)
Overall	727 (96.5)	694 (95.7)	639 (88.0)	614 (84.7)	674 (90.0)	612 (91.2)
Gender						
Male	338 (44.9)	327 (45.1)	304 (41.9)	290 (40.0)	311 (41.5)	280 (41.7)
Female	389 (51.7)	367 (50.6)	335 (46.1)	324 (44.7)	363 (48.5)	332 (49.4)
Study Site						
EA	149 (19.8)	145 (20.0)	136 (18.7)	123 (16.9)	137 (18.3)	120 (17.9)
MW	106 (14.1)	102 (14.1)	96 (13.2)	89 (12.3)	102 (13.6)	94 (14.0)
SO	111 (14.7)	107 (14.8)	93 (12.8)	85 (11.7)	99 (13.2)	90 (13.4)
SW	187 (24.8)	173 (23.9)	162 (22.3)	162 (22.3)	174 (23.2)	161 (23.9)
NW	174 (23.1)	167 (23.0)	152 (20.9)	155 (21.4)	162 (21.6)	147 (21.9)

Notes: Based on data received at the Coordinating Center through July '09.

Table 2 provides frequencies for items assessing the importance of religion or spirituality, and the rate of attendance at religious or spiritual services or activities. Seventy percent of adolescents report that religion/spirituality is somewhat to very important to them.

Table 2. Age 16 Resilience Factors: Importance of Religion/ Spirituality & Frequency of Service Attendance

	How important is religion or spirituality to you?				Over the past year, how many times did you attend religious or spiritual services or activities?				
	Not At All	Only a Little	Somewhat	Very	Never	1-2 times	3-12 times	2-3 times a month	Once a week
	n (%)	n (%)	n (%)	n (%)	n (%)	n (%)	n (%)	n (%)	n (%)
Overall	108 (14.4)	118 (15.7)	245 (32.6)	281 (37.4)	165 (22.1)	154 (20.6)	151 (20.2)	96 (12.9)	181 (24.2)
Gender									
Male	67 (8.9)	64 (8.5)	108 (14.4)	113 (15.0)	92 (12.3)	75 (10.0)	66 (8.8)	41 (5.5)	75 (10.0)
Female	41 (5.4)	54 (7.2)	137 (18.2)	168 (22.3)	73 (7.8)	79 (10.6)	85 (11.4)	55 (7.4)	106 (14.2)
Study Site									
EA	21 (2.8)	15 (2.0)	56 (7.4)	57 (7.6)	38 (5.1)	35 (4.7)	33 (4.4)	16 (2.1)	26 (3.5)
MW	10 (1.3)	16 (2.1)	34 (4.5)	48 (6.4)	20 (2.7)	18 (2.4)	21 (2.8)	16 (2.1)	32 (4.3)
SO	8 (1.1)	20 (2.7)	46 (6.1)	44 (5.8)	18 (2.4)	22 (2.9)	29 (3.9)	26 (3.5)	22 (2.9)
SW	30 (4.0)	32 (4.3)	56 (7.4)	78 (10.4)	41 (5.5)	43 (5.8)	31 (4.1)	21 (2.8)	58 (7.8)
NW	39 (5.2)	35 (4.6)	53 (7.0)	54 (7.2)	48 (6.4)	36 (4.8)	37 (4.9)	17 (2.3)	43 (5.8)

Notes: Based on data received at the Coordinating Center through July '09.

Table 3 provides descriptive statistics for participation in activities during the last year. Girls reported participating in more types of activities than boys (2.2 vs. 1.9 respectively).

Table 3. Age 16 Resilience Factors: Activity Participation in Last Year

	Activities the adolescent has been a part of…						
	Sports Team n (%)	School Club n (%)	Drama, Music or Performance Art Group n (%)	Scout Group n (%)	Volunteer Activities n (%)	Church Group n (%)	Total SUM of Activities M (SD)
Overall	338 (44.9)	267 (35.5)	293 (38.9)	38 (5.1)	302 (40.2)	303 (40.3)	2.0 (1.5)
Gender							
Male	183 (24.3)	118 (15.7)	99 (13.2)	21 (2.8)	127 (16.9)	123 (16.4)	1.9 (1.5)
Female	155 (20.6)	149 (19.8)	194 (25.8)	17 (2.3)	175 (23.3)	180 (23.9)	2.2 (1.6)
Study Site							
EA	69 (9.2)	56 (7.4)	61 (8.1)	8 (1.1)	62 (8.2)	55 (7.3)	2.1 (1.6)
MW	59 (7.8)	53 (7.0)	45 (6.0)	8 (1.1)	55 (7.3)	40 (5.3)	2.4 (1.6)
SO	32 (4.2)	31 (4.1)	36 (4.8)	4 (0.5)	37 (4.9)	48 (6.4)	1.6 (1.4)
SW	99 (13.2)	72 (9.6)	79 (10.5)	10 (1.3)	76 (10.1)	82 (10.9)	2.1 (1.5)
NW	79 (10.5)	55 (7.3)	72 (9.6)	8 (1.1)	72 (9.6)	78 (10.4)	2.0 (1.5)

Notes Based on data received at the Coordinating Center through July '09.

Table 4 provides descriptive statistics for items relating to awards and leadership in the past year.

Table 4. Age 16 Resilience Factors: Frequencies for awards/leadership

	Leadership			*Awards/Honors*					
	Sports Team Captain n (%)	School Club Officer Leader n (%)	Total SUM of Leadership Items M (SD)	Won medal, trophy, or ribbon n (%)	School Award/ Prize n (%)	Honor Roll n (%)	Comm. Service Award n (%)	Job Raise * n (%)	Total SUM of Awards Items M (SD)
Overall	182 (24.2)	115 (15.3)	0.4 (0.6)	248 (32.9)	324 (43.1)	220 (29.3)	101 (13.4)	48 (6.4)	1.2 (1.2)
Youth's Gender									
Male	109 (14.5)	54 (7.2)	0.5 (0.7)	136 (18.0)	147 (19.6)	90 (12.0)	44 (5.9)	27 (3.6)	1.2 (1.2)
Female	73 (9.7)	61 (8.1)	0.3 (0.6)	112 (14.9)	177 (23.5)	130 (17.3)	57 (7.6)	21 (2.8)	1.2 (1.2)
Study Site									
EA	45 (6.0)	30 (4.0)	0.5 (0.7)	46 (6.1)	77 (10.2)	62 (8.2)	34 (4.5)	16 (2.1)	1.6 (1.5)
MW	30 (4.0)	26 (3.5)	0.5 (0.7)	41 (5.4)	62 (8.2)	42 (5.6)	22 (2.9)	5 (0.7)	1.6 (1.3)
SO	17 (2.3)	10 (1.3)	0.2 (0.5)	24 (3.2)	34 (4.5)	30 (4.0)	7 (0.9)	6 (0.8)	0.9 (1.0)
SW	48 (6.4)	22 (2.9)	0.4 (0.6)	74 (9.8)	78 (10.4)	47 (6.2)	24 (3.2)	14 (1.8)	1.2 (1.1)
NW	42 (5.6)	27 (3.6)	0.4 (0.6)	63 (8.4)	73 (9.7)	39 (5.2)	14 (1.9)	7 (0.9)	1.1 (1.1)

Notes: Based on data received at the Coordinating Center through July '09.

* At Age 16 (as compared to Ages 12/14), an item relating to the adolescent getting a 'promotion or job raise' was added to the measure and is included in the 'Total SUM of Awards'.

Publisher Information

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References

Knight, E. D., Smith, J. S., Martin, L. M., Lewis, T., & the LONGSCAN Investigators (2008). Measures for Assessment of Functioning and Outcomes in Longitudinal Research on Child Abuse Volume 3: Early Adolescence (Ages 12-14). Accessible at the LONGSCAN web site (http://www.iprc.unc.edu/longscan/).

Risk Behaviors of Family and Friends
LONGSCAN, 1998

Description of Measure

Purpose
To assess youth's perceptions of the substance use/abuse of family and friends, and the extent to which friends engage in pro-social or risky behaviors.

Conceptual Organization
9 items assess the youth's perception of the type of household members' substance use and the frequency with which a household member is either drunk or high. Substances of interest include tobacco, alcohol and a range of illegal drugs.

Three items assess how many of youth's close friends (none, some, most) participate in select pro-social activities, including sports, school clubs, and church. Two items assess the child's perception of the school behavior and performance of close friends.

13 items assess the youth's perception of how many close friends use tobacco, alcohol and drugs, and engage in risky behaviors, including drug carrying or sales, fighting, weapon carrying, and others.

Item Origin/Selection Process
The substance use and risk behavior items were modified from self report items found in the Youth Risk Behavior and Monitoring the Future surveys. The pro-social activities of close friends items were project developed.

Materials
A-CASI delivery system

Time Required
2-3 minutes

LONGSCAN Administration Method
A-CASI

Training
Minimal training is required given that the measure is delivered in an A-CASI format.

Scoring

Individual items or counts across items may be used. Subscales have not been established.

LONGSCAN Use

Data Points
Ages 12, 14, and 16

Respondent
Youth

Mnemonic and Version
RBFA: Ages 12, 14, and 16

Rationale
Impairment related to substance abuse by a parent or caregiver is a risk factor for child maltreatment and for adolescent substance abuse. Since this measure was developed, studies examining the relationship of substance abuse by friends to an adolescent's own substance abuse have revealed mixed findings, but most consistently substance use by friends has been found to co-occur with youth's own use.

Results

Descriptive Statistics

For descriptive statistics of Ages 12 and 14 Risk Behaviors of Family and Friends items, see the 3rd volume of the Measures Manuals (Knight et al., 2008). The first half of the Risk Behaviors of Family and Friends includes items assessing the youth's perception of substance use/abuse patterns by household members. Tables 1 and 2 provide frequencies for household-related items by sample demographics. At Age 16, a majority of adolescents (54%) reported that someone in the household smokes. 48% reported that someone drinks alcohol and 12% of adolescents reported at least one household member uses illegal drugs. Boys reported slightly higher household member drug use (7%) than girls (5%).

Table 1. Frequencies for household member substance use on Age 16 Risk Behavior of Family and Friends

		Does anyone in your household…								
	N	Smoke Cigarettes n (%)	Tobacc. / Snuff n (%)	Drink Alcohol n (%)	Smoke Marijuana n (%)	Use Cocaine /Crack n (%)	Use Meth/ Speed/ Crystal/ Uppers n (%)	Inject Drugs n (%)	Use Other Illegal Drugs n (%)	Use ANY Illegal Drugs† n (%)
Overall	726	53.9 (391)	3.7 (27)	48.1 (349)	10.7 (78)	1.4 (10)	0.6 (4)	0.4 (3)	0.4 (3)	11.8 (86)
Youth's Gender										
Male	342	25.8 (187)	1.6 (12)	22.7 (165)	6.5 (47)	0.6 (4)	0.4 (3)	0.3 (2)	0.1 (1)	6.9 (50)
Female	384	28.1 (204)	2.1 (15)	25.3 (184)	4.3 (31)	0.8 (6)	0.1 (1)	0.1 (1)	0.3 (2)	4.9 (36)
Study Site										
EA	148	11.4 (83)	0.0 (0)	7.7 (56)	1.8 (13)	0.3 (2)	0.0 (0)	0.0 (0)	0.0 (0)	2.1 (15)
MW	107	8.1 (59)	0.3 (2)	7.0 (51)	2.1 (15)	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)	2.1 (15)
SO	111	8.5 (62)	1.4 (10)	8.0 (58)	1.1 (8)	0.0 (0)	0.0 (0)	0.1 (1)	0.0 (0)	1.1 (8)
SW	178	12.0 (87)	0.8 (6)	12.3 (89)	3.4 (25)	0.8 (6)	0.4 (3)	0.3 (2)	0.4 (3)	4.0 (29)
NW	182	13.8 (100)	1.2 (9)	13.1 (95)	2.3 (17)	0.3 (2)	0.1 (1)	0.0 (0)	0.0 (0)	2.6 (19)

Notes. Based on data received at the Coordinating Center through July '09.
† Drugs include endorsements for ANY of the following: Cocaine/Crack, Meth/Speed, injected or other drugs.

As seen in Table 2, , 15% of 16 year-old respondents reported that they have seen someone in their household get drunk or high; 6% reported that this was a regular occurrence, i.e., once or twice a week to almost every day.

Table 2. Frequencies for household-related items on the Age 16 Risk Behavior of Family and Friends

			How often is someone in your household drunk/high?					
	N	Does anyone in your household get drunk or high? n (%)	N	Never n (%)	< Once a month n (%)	1-3 times a month n (%)	Once or twice a week n (%)	Almost every day n (%)
Overall	727	15.4 (112)	725	84.8 (615)	5.8 (42)	3.4 (25)	3.0 (22)	2.9 (21)
Child's Gender								
Male	343	9.5 (69)	342	37.8 (274)	3.4 (25)	2.5 (18)	1.4 (10)	2.1 (15)
Female	384	5.9 (43)	383	47.0 (341)	2.3 (17)	1.0 (7)	1.7 (12)	0.8 (6)
Study Site								
EA	148	2.3 (17)	147	18.1 (131)	0.8 (6)	0.8 (6)	0.3 (2)	0.3 (2)
MW	108	1.8 (13)	108	13.1 (95)	0.4 (3)	0.7 (5)	0.3 (2)	0.4 (3)
SO	111	2.2 (16)	111	13.1 (95)	1.1 (8)	0.3 (2)	0.6 (4)	0.3 (2)
SW	178	4.5 (33)	178	20.0 (145)	1.9 (14)	0.6 (4)	1.2 (9)	0.8 (6)
NW	182	4.5 (33)	181	20.6 (149)	1.5 (11)	1.1 (8)	0.7 (5)	1.1 (8)

Notes. Based on data received at the Coordinating Center through July '09.

The second half of the Risk Behaviors of Family and Friends includes items that are specific to behaviors of the adolescent's friends. Each item is on a 3 point scale (0 = none of my friends, 1 = some of my friends, and 2 = most of my friends). A principal components analysis was examined on these 18 items and 3 robust subscales resulted (i.e., positive peer social activities, peer delinquency, and peer drug use).

The *Positive Peer Social Activities* subscale includes 5 items relating to positive peer behaviors (e.g., getting good grades in school, behaving in school, attending church, and participating in school clubs/sports).

The *Peer Delinquency* subscale includes 5 items relating to negative peer behaviors (e.g., smoking cigarettes, drinking, having sexual intercourse, carrying knifes/guns/other weapons, and smoking marijuana).

The *Peer Drug Use* subscale includes 4 items relating to other peer drug use (e.g., cocaine/crack, heroin, other drugs, and selling/delivering drugs).

Four items did not load onto any of the subscales listed above (i.e., shoplift/steal, set fires, get into fights, damage or destroy things like cars/buildings).

Table 3 provides descriptive statistics for the peer-related subscales on the Age 16 Risk Behaviors of Family and Friends by sample demographics. ***Note: These scales are preliminary and are not recommended for use without further validation by investigator's prior to use.***

Table 3. Frequencies for peer-related sum scores on the Age 16 Risk Behavior of Family and Friends

	Positive Peer Social Activities		Peer Delinquency		Peer Drug Use	
	N	M (SD)	N	M (SD)	N	M (SD)
Overall	726	6.1 (2.2)	724	3.0 (2.3)	725	0.4 (0.9)
Child's Gender						
Male	342	6.1 (2.2)	343	3.1 (2.5)	343	0.4 (1.0)
Female	384	6.2 (2.1)	381	2.9 (2.2)	382	0.3 (0.9)
Study Site						
EA	147	5.9 (2.1)	147	2.8 (2.3)	147	0.3 (0.9)
MW	108	5.6 (2.3)	108	2.7 (2.4)	108	0.3 (1.1)
SO	111	5.6 (2.2)	111	3.2 (2.2)	111	0.3 (0.6)
SW	178	6.4 (2.1)	176	3.2 (2.3)	177	0.5 (1.0)
NW	182	6.1 (1.2)	182	3.0 (2.4)	182	0.3 (0.9)
Range		0-10		0-10		0-8
Median		6		3		0
Alpha		.77		.80		.80

Notes. Based on data received at the Coordinating Center through July' 09.

Publisher Information

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References and Bibliography

Knight, E. D., Smith, J. B., Martin, L. M., Lewis, T., & the LONGSCAN Investigators (2008). Measures for Assessment of Functioning and Outcomes in Longitudinal Research on Child Abuse Volume 3: Early Adolescence (Ages 12-14). Accessible at the LONGSCAN web site (http://www.unc.edu/depts/sph/longscan/).

School Orientation and Behavior Problems
LONGSCAN, 1998

Description of Measure

Purpose
School Orientation and Behavior Problems secures adolescent self-report of variables related to school and education.

Conceptual Organization
Six items assess frequency of homework completion, class cutting and suspensions, the importance the respondent attaches to doing well in school, thought s/he has given to dropping out of school, and the highest level in school the respondent expects to reach.

Item Origin/Selection Process
Items were project developed.

Materials
A-CASI delivery system

Time Required
1 minute

Administration Method
A-CASI

Training
Minimal training is required given that the measure is delivered in an A-CASI format.

Scoring

No scoring is currently recommended; individual items may be utilized.

LONGSCAN Use

Data Points
Ages 12, 14, and 16

Respondent
Adolescent

Mnemonic and Version
SCBA: Ages 12 and 14
SCBB: Age 16

Rationale
School orientation and related behaviors are important indicators of psychosocial adjustment for young adolescents.

Results

Descriptive Statistics

For descriptive statistics of items on School Orientation and Behavior Problems for Ages 12 and 14, please refer to the 3rd volume of the LONGSCAN Measures Manuals (Knight et al., 2008).

Table 1 provides frequencies for items on homework completion at Age 16, by gender and site. At Age 16, 70% of respondents reported 'almost always' or 'always' completing their homework.

Table 1. Homework completion at Age 16

		When given homework, how often do you do it?				
	N	Never % (n)	Sometimes % (n)	Almost Always % (n)	Always % (n)	Never get homework % (n)
Overall	747	3.3 (25)	22.5 (168)	33.9 (253)	36.8 (275)	3.5 (26)
Child's Gender						
Male	351	2.7 (20)	13.0 (97)	16.9 (126)	12.8 (96)	1.6 (12)
Female	396	0.7 (5)	9.5 (71)	17.0 (127)	23.9 (179)	1.9 (14)
Study Site						
EA	149	1.2 (9)	6.2 (46)	4.9 (37)	7.5 (56)	0.1 (1)
MW	104	0.1 (1)	2.7 (20)	4.1 (31)	6.0 (45)	0.9 (7)
SO	117	0.5 (4)	2.3 (17)	6.3 (47)	6.2 (46)	0.4 (3)
SW	195	0.7 (5)	5.9 (44)	8.6 (64)	9.4 (70)	1.6 (12)
NW	182	0.8 (6)	5.5 (41)	9.9 (74)	7.8 (58)	0.4 (3)

Notes. Based on data received at the Coordinating Center through July '09.

Table 2 provides frequencies for level of importance attached to doing well in school. 96% of Age 16 respondents felt it was 'somewhat to extremely' important to do well in school. More girls (43%) than boys (32%) felt it was 'extremely' important.

Table 2. Importance of doing well in school at Age 16

		How important is it for you to do well in school?			
	N	Not % (n)	Not very % (n)	Somewhat % (n)	Extremely % (n)
Overall	748	0.8 (6)	1.6 (12)	22.5 (168)	75.1 (562)
Child's Gender					
Male	352	0.7 (5)	1.2 (9)	13.5 (101)	31.7 (237)
Female	396	0.1 (1)	0.4 (3)	9.0 (67)	43.4 (325)
Study Site					
EA	149	0.0 (0)	0.1 (1)	2.8 (21)	16.9 (127)
MW	104	0.0 (0)	0.1 (1)	2.7 (20)	11.1 (83)
SO	117	0.3 (2)	0.2 (2)	3.9 (29)	11.2 (84)
SW	196	0.5 (4)	0.3 (2)	5.7 (43)	19.6 (147)
NW	182	0.0 (0)	0.8 (6)	7.3 (55)	16.2 (121)

Notes. Based on data received at the Coordinating Center through July '09.

Table 3. 45% of Age 16 respondents reported cutting classes in the previous 12 months.

Table 3. Cutting school/classes at Age 16

		About how many days, in the last 12 months, have you cut school or part of school?			
	N	Not in past 12 months % (n)	1-2 times % (n)	3-9 times % (n)	> 9 times % (n)
Overall	749	55.0 (412)	23.5 (176)	13.9 (104)	7.6 (57)
Child's Gender					
Male	352	24.4 (183)	12.1 (91)	6.3 (47)	4.1 (31)
Female	397	30.6 (229)	11.3 (85)	7.6 (57)	3.5 (26)
Study Site					
EA	149	11.2 (84)	5.2 (39)	2.7 (20)	0.8 (6)
MW	104	8.8 (66)	2.7 (20)	1.7 (13)	0.7 (5)
SO	118	10.6 (79)	3.6 (27)	1.1 (8)	0.5 (4)
SW	196	12.7 (95)	5.6 (42)	4.5 (34)	3.3 (25)
NW	182	11.7 (88)	6.4 (48)	3.9 (29)	2.3 (17)

Notes. Based on data received at the Coordinating Center through July '09.

Table 4 provides frequencies for school suspensions at Age 16, by gender and site. Almost 30% of the sample reported having been suspended from school at least once in the past year.

Table 4. Suspensions at Age 16

		How many times in the last 12 months have you been suspended?			
	N	Not in past 12 months % (n)	1-2 times % (n)	3-9 times % (n)	> 9 times % (n)
Overall	749	70.6 (529)	23.2 (174)	5.5 (41)	0.7 (5)
Child's Gender					
Male	352	30.8 (231)	12.1 (91)	3.7 (28)	0.3 (2)
Female	397	39.8 (298)	11.1 (83)	1.7 (13)	0.4 (3)
Study Site					
EA	149	13.9 (104)	4.9 (37)	1.1 (8)	0.0 (0)
MW	104	9.1 (68)	3.2 (24)	1.5 (11)	0.1 (1)
SO	118	10.9 (82)	4.0 (30)	0.8 (6)	0.0 (0)
SW	196	18.8 (141)	5.6 (42)	1.2 (9)	0.5 (4)
NW	182	17.9 (134)	5.5 (41)	0.9 (7)	0.0 (0)

Notes. Based on data received at the Coordinating Center through July '09.

Table 5 highlights frequencies for Age 16 respondents' history of seriously considering dropping out of school, and future educational aspirations, by gender and site. Almost 20% of respondents reported having seriously considered dropping out of school. About 80% reported that they expected to go to college and/or graduate school.

Table 5. Serious consideration to dropping out & future educational expectations at Age 16

	Have you ever seriously thought about dropping out of school?		*What is the highest level of school that you expect to reach?*					
	N	Yes % (n)	N	Quit before H.S. graduation % (n)	H.S. Graduation % (n)	Community College/Voc. School % (n)	Four Year College % (n)	Graduate or Prof. School % (n)
Overall	749	19.5 (146)	751	1.9 (14)	19.6 (147)	16.5 (124)	42.6 (320)	19.4 (146)
Child's Gender								
Male	352	8.1 (61)	352	0.8 (6)	10.3 (77)	7.9 (59)	20.0 (150)	8.0 (60)
Female	397	11.3 (85)	399	1.1 (8)	9.3 (70)	8.7 (65)	22.6 (170)	11.4 (86)
Study Site								
EA	149	3.2 (24)	150	0.1 (1)	3.7 (28)	2.5 (19)	8.1 (61)	5.5 (41)
MW	104	2.4 (18)	104	0.4 (3)	2.3 (17)	0.8 (6)	6.8 (51)	3.6 (27)
SO	118	3.9 (29)	118	0.8 (6)	3.9 (29)	3.2 (24)	6.3 (47)	1.6 (12)
SW	196	4.9 (37)	197	0.3 (2)	4.9 (37)	4.4 (33)	11.6 (87)	5.1 (38)
NW	182	5.1 (38)	182	0.3 (2)	4.8 (36)	5.6 (42)	9.8 (74)	3.7 (28)

Notes. Based on data received at the Coordinating Center through July '09.

Publisher Information

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References

Knight, E. D., Smith, J. S., Martin, L. M., Lewis, T., & the LONGSCAN Investigators (2008). Measures for Assessment of Functioning and Outcomes in Longitudinal Research on Child Abuse Volume 3: Early Adolescence (Ages 12-14). Accessible at the LONGSCAN web site (http://www.iprc.unc.edu/longscan/).

Self-Report Family Inventory
Beavers, W. R., Hampson, R. and Hulgus, Y.
1990

Description of Measure

Purpose
To assess an individual's perception of his/her family's functioning.

Conceptual Organization
The Self-Report Family Inventory (SFI) includes 36 items assessing 5 areas: Family Health/Competence, Conflict, Cohesion, Expressiveness, and Directive Leadership. The theoretical basis for the instrument is the Beavers Model of Family Functioning, which has evolved over twenty years and is based on three main sources: general systems theory, clinical work with families, and research investigating family systems qualities (Beavers et al., 1990)

Item Origin/Selection Process
This instrument is the self-report adaptation of the Beavers Model of Family Functioning (Beavers et al., 1985; Beavers et al., 1990).

Materials
Forms and manual are available from the publisher.

Time Required
5-10 minutes

Administration Method
Prior to Age 14, interviewer-administered; Age 14 and above, A-CASI administered.

Training
Minimal

Scoring

Score Types
Respondents are asked to rate each statement (e.g., "We all have a say in household plans") on a 5-point scale ranging from 1 (fits our household very well) to 5 (doesn't fit our household at all). Sum scores and mean scale scores for each of the five subscales can be obtained as follows:

- Health/Competence: Items 2-4, 6, 12, 15-17, 18R, 19R, 20, 21, 24R, 25R, 27R, 28, 33, 35, & 36
- Conflict: Items 5R, 6, 7, 8R, 10R, 14R, 18R, 24R, 25R, 30R, 31R, & 34
- Cohesion: Items 2, 15, 19R, 27R, & 36
- Expressiveness: Items 1, 9, 13R, 20, & 22
- Directive Leadership: Items 8R, 16, & 32

Please note: An "R" refers to an item score that must be reversed prior to scoring.

Lower scores represent greater competence on all SFI scales.

LONGSCAN researchers have also created an "Overall Mean Score" for family functioning. All positive items were reversed in order to change the direction of the scores, so that higher values on the Overall Mean Score indicate better family functioning. The Overall Mean Score was created by taking the mean of the following items:

- *Overall Mean Score: Items 1R, 2R, 3R, 4R, 5, 6R, 7R, 8, 9R, 10, 11R, 12R, 13, 14, 15R, 16R, 17R, 18, 19, 20R, 21R, 22R, 23, 24, 25, 26R, 27, 28R, 29R, 30, 31, 32R, 33R, 34R, & 35R*

Note that the Overall Mean Score is not included in the LONGSCAN scored datasets.

Norms and/or Comparative Data

Normative data for competent non-clinic families, less competent non-clinic families, and clinic families are available in the manual (Beavers et al., 1990).

Psychometric Support

Reliability
Beavers et al. (1985) reported alpha reliability coefficients for the entire scale ranging from .84 to .88. Test-retest reliability coefficients (for 30 to 90 days) ranged from .84 to .87 for Family Health/Competence, .50 to .59 for Conflict, .50 to .70 for Cohesion, .79 to .89 for Expressiveness, and .41 to .49 for Directive Leadership (Beavers et al., 1990).

Validity
Convergent and concurrent validity have been demonstrated through comparisons to other assessments of family functioning, such as FACES II and FACES III (Hampson, Hulgus, & Beavers, 1991), and the Beavers Interactional Scales (Beavers, Hampson, & Hulgus, 1985).

LONGSCAN Use

Data Points
Ages 6, 8, 12, 14, 16

Respondent
Primary maternal caregiver

Mnemonic and Version
SFIA (Age 6 item level data)
SFIS (Age 6 scored data)

SFA (Age 8 item level data)
SFS (Age 8 scored data)

SFIB & SFIC (Ages 12, 14, & 16 item level data)
SRFS (Ages 12, 14, 16 scored data)

The content of each of these forms is identical, only the layout and administration method changes.

Administration and Scoring Notes
To better reflect LONGSCAN populations and family situations, the word "household" was substituted for "family" throughout the questionnaire. At Age 16, administration of the Self Report Family Inventory was optional and the NC site did not collect this data.

Rationale
Prior to joining the LONGSCAN consortium, the EA site administered the SFI and found that Competence, Conflict, Cohesion, and Expression were positively correlated with depression, anxiety, hostility, parenting stress, child related stress, and negative life events; and negatively correlated with support. Internal consistency for scale scores was acceptable for Health/ Competence (α = .89), Conflict (α = .84), Cohesion (α = .64), and Expressiveness (α = .71), but poor for Leadership (α = .17) in low-income families. Scores in all areas were stable over time (approximately one year) with no significant shifts (Black, 1992).

Results

Descriptive Statistics
For descriptive statistics of the Age 6 -14 Self Report Family Inventory, please refer to the 2nd and 3rd volumes of the measures manuals (Hunter et al., 2003; Knight et al., 2008). Table 1 displays descriptive statistics for the Self Report Family Inventory subscales from the Age 16 interview, by child's gender and study site. Note that lower scores on subscales indicate better family functioning, while higher scores on the Overall Mean Score indicate better family functioning.

Table 1. Age 16 Self Report Family Inventory Mean scores by Gender and Study Site

	N	Cohesion M (SD)	Conflict M (SD)	Expressiveness M (SD)	Health Competence M (SD)	Leadership M (SD)	Overall Mean Score M (SD)
Overall	623	2.4 (0.7)	1.7 (0.5)	2.1 (0.8)	2.0 (0.6)	2.1 (0.7)	4.0 (0.5)
Gender							
Male	303	2.4 (0.7)	1.7 (0.6)	2.2 (0.8)	2.0 (0.6)	2.1 (0.7)	4.0 (0.5)
Female	320	2.3 (0.6)	1.7 (0.5)	2.1 (0.7)	2.0 (0.6)	2.2 (0.7)	4.0 (0.5)
Study Site							
EA	153	2.2 (0.6)	1.6 (0.6)	2.1 (0.8)	1.9 (0.6)	2.1 (0.7)	4.0 (0.5)
MW	119	2.2 (0.7)	1.6 (0.5)	2.1 (0.8)	1.9 (0.6)	2.1 (0.7)	4.1 (0.5)
SW	174	2.4 (0.6)	1.7 (0.5)	2.1 (0.7)	2.1 (0.6)	2.1 (0.7)	4.0 (0.5)
NW	177	2.5 (0.6)	1.8 (0.6)	2.2 (0.8)	2.2 (0.6)	2.2 (0.7)	3.8 (0.5)

Source. Based on data received at the Coordinating Center through July '09.
Sample N's may differ slightly when looking across different subscales.

Reliability
As can be seen in Table 2, internal consistency for the majority of the Self Report Family Inventory subscales using the LONGSCAN sample was good to excellent (ranging from .59 to .91). The Directive Leadership subscale however, had low internal consistency, which is consistent with the author's findings (Beavers et al., 1990).

Table 2. Cronbach Alphas for the Self Report Family Inventory Age 16 Mean scores

	Cohesion α	Conflict α	Expressiveness α	Health/Competence α	Leadership α	Overall Mean Score α
Age 16	.59	.80	.73	.89	.17	.91

Source. Based on data received at the Coordinating Center through July '09.

Correlations with Child Outcomes

Table 3 provides correlations between Age 16 Self Report Family Inventory mean scores and other select Age 16 outcomes (i.e., T scores from the Trauma Symptom Checklist and CBCL). Significant correlations, ranging from .07 to .34, were found between Age 16 Self Report Family Inventory scores and Age 16 CBCL T scores.

Table 3. Correlations between Age 16 Self Report Family Inventory Mean Scores & Other Select Age 16 Outcomes

	N	Cohesion	Conflict	Expressiveness	Health/ Competence	Leadership	Overall Mean Score
Trauma Symptom Checklist							
Anger	541	.12**	.09*	.03	.11**	-.02	-.08
Anxiety	541	.09*	.02	-.06	.07	-.00	-.02
Depression	541	.07	.04	-.02	.06	-.03	-.04
PTSD	541	.07	.04	-.03	.07	-.04	-.04
Dissociation	541	.10*	.07	-.04	.07	-.03	-.04
Child Behavior Checklist							
Internalizing Problems	622	.28***	.30***	.21***	.29***	-.07*	-.28***
Externalizing Problems	622	.29***	.29***	.23***	.32***	-.09*	-.29***
Total Problems	622	.32***	.32***	.23***	.34***	-.08*	-.31***

Source. Based on data received at the Coordinating Center through July '09.
Sample N's may differ slightly when across the different subscales.
* <.05, ** <.01, *** <.001

Publisher Information

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Knight, E. D., Smith, J. S., Martin, L. M., Lewis, T., & the LONGSCAN Investigators (2008). Measures for Assessment of Functioning and Outcomes in Longitudinal Research on Child Abuse Volume 3: Early Adolescence (Ages 12-14). Accessible at the LONGSCAN web site (http://www.iprc.unc.edu/longscan/).

Physical Abuse Self-Report
LONGSCAN, 2000

Description of Measure

Purpose
This self-report measure assesses an adolescent‟s history of physical abuse since age 12.

Conceptual Organization
Twelve behavioral stem items ask if the adolescent has experienced specific parent or caregiver physically abusive or harsh physical behaviors since the age of 12, the age at which LONGSCAN participants were first asked for self report of maltreatment. Positive endorsements trigger follow-up items assessing frequency of occurrence, perpetrator, and injury outcomes. One set of follow-up items is asked for each of five clusters of conceptually-related stem items. For instance, one cluster is comprised of questions relating to abuse involving weapons, including a knife, a razor or gun. Item clustering was utilized in order to reduce respondent burden by shortening administration time. A set of follow-up items assesses the adolescent‟s feelings of self-attribution or responsibility for physical abuse perpetrated by specific perpetrators, and the level of impact the abuse has had on the adolescent.

Item Origin/Selection Process
These items were adapted and refined from the LONGSCAN Self-Report of Physical Abuse and Assault (LONGSCAN, 1998) that was used in the Age 12 LONGSCAN interview. Both measures draw heavily on the physical abuse definitions developed by Barnett, Manly & Cicchetti (1995).

Materials
A-CASI delivery system.

Time Required
Ranges from 2 to 7 minutes depending on the extent of physical abuse endorsed.

Administration Method
A-CASI. Paper and pencil versions are not recommended due to possible confusion with item branching.

Training
Minimal training is required given that the measure is delivered in an A-CASI format.

Scoring

Dichotomous indicators and sum scores for levels of physical abuse since age 12 include:

- *Harsh Parenting Score**: items 2, 9, 10, and 11.
- *Physically Abusive Behavior Score*: items 1, 3-8, and 12
- *Abuse and Harsh Punishment*: items 1-12.
- *Abuse and Harsh Parenting without Corporal Punishment*: items 1, and 3-12. (excludes item 2)

***LONGSCAN investigators do not view the behaviors in the harsh parenting scale as non-abusive. The title of the scale should not be interpreted to mean these behaviors are not abusive. These items are included in the overall physical abuse scale should an individual investigator choose to include them in his/her definition of physical abuse.**

Physical Injury Severity Scoring

Physical injury items include:

a) Hurt or caused pain for more than one day
b) Left a bruise, black eye or mark that lasted more than one day
c) Made you bleed
d) Broke or cracked a tooth or bone
e) Knocked you out or made you unconscious
f) Injury to your insides, like your stomach or kidneys
g) You needed care from a doctor, or someone like that
h) None of these

Items 15, 18, 21, 24, 27 assess the severity of injury outcomes related to endorsed physical abuse and harsh physical punishment, and are used in deriving the Physical Injury Severity Score. Participants are coded for the most severe response ever endorsed on a scale of 0-3, with 3 being the most severe injury score. Participants who DID NOT endorse any of the stem items are coded a „0 or no abuse‟; participants who endorsed a stem item but DID NOT endorse any of the physical injury items are coded as missing for this score, while participants who endorsed the „a‟ items but NONE of the b-g items are coded a „1, hurt or cause pain.‟ Participants who endorsed the „b‟ item but NONE of the c-g items are coded a „2, bruising‟. Participants who endorsed the „c, d, e, f, or g‟ items are coded a „3, bled, broke bone, or care from doctor, knocked out/unconscious, or internal injuries‟. See Table 3.

Perpetrator Scoring

Perpetrator data may be examined by individual or groups of perpetrators (i.e., familial vs. extra-familial maltreatment) . See Table 4.

Attribution and Impact Scoring

Attribution and impact may be scored three ways. Higher scores indicate: a) higher levels of self - attribution or responsibility for experienced physical abuse; or b) greater impact experienced as a result of physical abuse.

1. The maximum score across all eleven perpetrator categories is the highest score endorsed for any perpetrator.
2. The mean score is the mean of attribution or impact scores across all perpetrators endorsed.
3. The perpetrator attribution or impact score is item level data, and is the level of attribution or impact endorsed for a specific perpetrator.

Scores range from „1=Not at all my fault/Not at all‟, to „3=Mostly my fault/A lot‟.

Example impact item: “When you look at your life now, how much do you think what happened with your stepfather has affected you and how you think, feel or act?” (See Table 5).

Example attribution item: “Overall, when you think about what happened with your stepfather, how much do you feel like it was your fault?” (See Table 6).

LONGSCAN Use

Data Point
Age 16
Respondent

Adolescent

Mnemonic and Version
PAAA
PAAS (scored data)

Rationale
Physical abuse has been linked to poor outcomes in childhood, adolescence and adulthood. Along with parent report and review of Child Protective Services Records, LONGSCAN participants are asked for their history of physical abuse at multiple ages in order to obtain the most comprehensive maltreatment data possible (Everson et al., 2008).

Results

Table 1 displays the frequency of endorsements of individual stem items on the Age 16 Physical Abuse measure. Items refer to „from the time you turned 12 up to now, has a parent, or another adult who was supposed to be supervising or taking care of you, ever done something to you like….". By far the most frequently endorsed item is "Hit you with something less dangerous, like paddle, a hairbrush or a belt." followed by "Hit or punched you with their hand or fist, or kicked you?"

Table 1. Physical Abuse Experienced between Age 12 and Age 16 Interviews

Label	N	% No (n)	%Yes (n)
Hit you with something dangerous like a baseball bat, or a shovel, or something else that could hurt you badly?	687	97.4 (669)	2.6 (18)
Hit you with something less dangerous, like paddle, a hairbrush or a belt. *	686	85.3 (585)	14.7 (101)
Hit or punched you with their hand or fist, or kicked you?	686	86.9 (596)	13.1 (90)
Pushed you, or threw you down, like against a wall or down the stairs?	686	92.1 (632)	7.9 (54)
Tried to choke, drown or smother you?	686	96.9 (665)	3.1 (21)
Burned you on purpose, with a cigarette, a curling iron or maybe some very hot water, or with something else?	686	96.2 (660)	3.8 (26)
Cut or stabbed you with a knife, a razor, a fork or something sharp like that?	686	99.4 (682)	0.6 (4)
Shot at you with a gun?	687	99.3 (682)	0.7 (5)
Punished you by not letting you sleep, or eat, or drink, for a whole day or more?	687	681 (99.1)	0.9 (6)
Punished you by tying you up, or locking you in a small place, like a closet?	688	99.3 (683)	0.7 (5)
Made you eat or drink something that wasn"t food that might hurt you, or make you sick?	688	99.6 (685)	0.4 (3)
Did something else on purpose to you, that we haven"t already talked about, that physically hurt you badly or put you in danger of being hurt?	687	97.9 (673)	2.0 (14)

Note. Based on data received at the Coordinating Center through July "09.
* There were 39 participants who ONLY endorsed item 2 and NO other stem items.

Table 2 displays the physical abuse indicator and sum scores overall. Twenty-five percent of the sample endorsed 1 or more items relating to physical abuse (including corporal punishment) with an average sum score of 0.5 items (SD = 1.1).

Table 2. Physical Abuse Scores Overall

		Sum Score				Dichotomous Indicators	
	N	M (SD)	Min	Max	Alpha	% No (n)	%Yes (n)
Harsh Parenting	687	0.2 (0.4)	0	3	.28	84.4 (580)	15.6 (107)
Physically Abusive Behavior	686	0.3 (0.9)	0	6	.67	81.5 (559)	18.5 (127)
Abuse & Harsh/Corporal Punishment	686	0.5 (1.1)	0	8	.70	75.5 (518)	24.5 (168)
Abuse/Harsh parenting without Corporal Punish.	686	0.4 (0.9)	0	7	.67	81.2 (557)	18.8 (129)

Note. Based on data received at the Coordinating Center through July "09.
Scores were set to missing if more than 1 item was missing.

Table 3 displays the physical injury severity scores. Five percent of those physically abused reported that their injuries lead to doctor visits, broken bones, bleeding, etc.

Table 3. Physical Injury Severity Scores

	N	M (SD)	% No physical abuse (n)	% Physically Abused: Hurt or Caused Pain (n)	% Physically Abused: Bruising (n)	% Physically Abused: Bleeding, Broken Bones, Doctor Visit, Knocked out/unconscious, or internal injuries (n)
Physical Injury Severity Score	576	0.2 (0.7)	90.1 (518)	1.6 (11)	3.2 (18)	5.0 (29)

Note. Based on data received at the Coordinating Center through July ‟09.
Severity scores for participants who ONLY endorsed stem item 2 (n = 39), and no other stem items, were set to missing.

Table 4 describes the perpetrators of physical abuse endorsed on the Age 16 physical abuse measure. "Someone else" and "mother" were the most frequent perpetrators of physical abuse between the age of 12 and the Age 16 interview.

Table 4. Perpetrators of Physical Abuse between Age 12 and the Age 16 Interview

	NO Physical Abuse % (n)	Physical Abuse Occurred % (n)
Mother	92.3 (633)	7.7 (53)
Stepmother	100.0 (686)	--
Foster Mother	99.1 (680)	0.9 (6)
Dad‟s Girlfriend	100.0 (686)	--
Father	97.4 (668)	2.6 (18)
Stepfather	98.7 (677)	1.3 (9)
Foster Father	99.4 (682)	0.6 (4)
Mom‟s Boyfriend	98.2 (674)	1.7 (12)
Another family member or relative	96.2 (660)	3.8 (26)
A teacher, coach, minister, or someone like that…	99.1 (680)	0.9 (6)
Someone else	92.3 (633)	7.7 (53)
Family (e.g., mom, dad, etc…)	85.7 (588)	14.3 (98)
Non-Family (e.g., teacher, coach, etc…)	91.8 (630)	8.2 (56)

Notes. Based on data received at the Coordinating Center through July ‟09.
Perpetrator indicators are NOT mutually exclusive (i.e., more than one perpetrator can be named).

Table 5 displays the level of impact of physical abuse by specific perpetrators and overall endorsed by LONGSCAN 16 year-old respondents. Physical abuse perpetrated by foster fathers and mother‟s boyfriends had the greatest impact.

Table 5. Age 16 Physical Abuse Impact Items and Scores

	N	Not at all % (n)	Very Little % (n)	Somewhat % (n)	A lot % (n)	Mean Score M (SD)	Maximum Score M (SD)
Mother	53	41.5 (22)	17.0 (9)	22.6 (12)	19.0 (10)	2.2 (1.2)	--
Stepmother	--	--	--	--	--	--	--
Foster Mother	6	16.7 (1)	50.0 (3)	33.3 (2)	--	2.2 (0.8)	--
Dad"s Girlfriend	--	--	--	--	--	--	--
Father	18	50.0 (9)	33.3 (6)	16.7 (3)	--	1.7 (0.8)	--
Stepfather	9	33.3 (3)	23.3 (2)	22.2 (2)	22.2 (2)	2.3 (1.2)	--
Foster Father	4	25.0 (1)	25.0 (1)	--	50.0 (2)	2.8 (1.5)	--
Mom"s Boyfriend	12	33.3 (4)	8.3 (1)	33.3 (4)	25.0 (3)	2.5 (1.2)	--
Another family member or relative	26	30.8 (8)	30.8 (8)	23.1 (6)	15.4 (4)	2.2 (1.1)	--
A teacher, coach, minister, or someone like that…	6	33.3 (2)	50.0 (3)	16.7 (1)	--	1.8 (0.8)	--
Someone else	53	34.0 (18)	22.6 (12)	26.4 (14)	17.0 (9)	2.3 (1.1)	--
Overall	129	--	--	--	--	2.2 (1.1)	2.3 (1.1)

Note. Based on data received at the Coordinating Center through July "09.

Table 6 displays the level of attribution LONGSCAN participants felt for physical abuse experienced between the age of 12 and the Age 16 interview, by specific perpetrators and overall. Participants felt most at fault for physical abuse perpetrated by foster mothers, followed by step and foster fathers.

Table 6. Age 16 Physical Abuse Attribution Items and Scores

	N	Not at all my fault % (n)	Somewhat my fault % (n)	Mostly my fault % (n)	Mean Score M (SD)	Maximum Score M (SD)
Mother	53	28.3 (15)	56.6 (30)	15.1 (8)	1.9 (0.7)	--
Stepmother	--	--	--	--	--	--
Foster Mother	6	--	83.3 (5)	16.7 (1)	2.2 (0.4)	--
Dad"s Girlfriend	--	--	--	--	--	--
Father	18	50.0 (9)	33.3 (6)	16.7 (3)	1.8 (0.8)	--
Stepfather	9	22.2 (2)	55.6 (5)	22.2 (2)	2.0 (0.7)	--
Foster Father	4	25.0 (1)	50.0 (2)	25.0 (1)	2.0 (0.8)	--
Mom"s Boyfriend	12	33.3 (4)	58.3 (7)	8.3 (1)	1.8 (0.6)	--
Another family member or relative	26	30.8 (8)	65.4 (17)	3.9 (1)	1.7 (0.5)	--
A teacher, coach, minister, or someone like that…	6	83.3 (5)	16.7 (1)	--	1.2 (0.4)	--
Someone else	53	54.7 (29)	39.6 (21)	6.0 (3)	1.5 (0.6)	--
Overall	129	--	--	--	1.8 (0.7)	1.8 (0.7)

Note. Based on data received at the Coordinating Center through July "09.

Publisher Information

This measure is free and available for use upon the receipt of a signed LONGSCAN User Agreement for Project-Developed Measures.

References and Bibliography

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Psychological Maltreatment
LONGSCAN, 2000

Description of Measure

Purpose
This self-report measure assesses an adolescent‟s history of psychological maltreatment since age 12.

Conceptual Organization
Twelve behavioral stem items ask if the adolescent has experienced specific parent or caregiver psychologically maltreating behaviors since age 12, the age at which LONGSCAN participants were first asked for self report of maltreatment. Positive endorsements trigger follow-up items assessing frequency of occurrence, adolescent‟s age at occurrence, and perpetrator(s). One set of follow-up items is asked for each of nine clusters of stem items that are conceptually grouped. For instance, an endorsement on any or all of three items that ask about terrorizing behaviors will trigger one set of follow-up items. This was done to minimize respondent burden and administration time. A second set of follow-up items assesses the adolescent‟s feelings of self attribution or responsibility for psychological maltreatment perpetrated by specific perpetrators (e.g., biological mother), and the level of impact s/he feels the psychological maltreatment has caused.

Item Origin/Selection Process
These items were adapted and refined from the LONGSCAN Age 12 measure of psychological maltreatment (LONGSCAN, 1998); both measures draw heavily on the emotional maltreatment definitions developed by Barnett, Manley & Cicchetti (1995). This measure is shorter than the Age 12 measure. While the Age 12 measure assessed attribution and impact for any psychological maltreatment overall with two items, this measure assesses impact and attribution for each perpetrator endorsed.

Materials
Audio-Computer Assisted Self Interview (A-CASI) delivery system.

Time Required
Ranges from 1 to 7 minutes depending on the extent of psychological maltreatment endorsed.

Administration Method
A-CASI. Paper and pencil self administration is not recommended due to potential confusion about branching.

Training
Minimal training is required given that the measure is delivered in an A-CASI format.

Scoring

A dichotomous indicator of psychological maltreatment occurring since age 12 may be generated if one or more items (items 1-12; see Table 2) are endorsed. Additionally, a sum score for the stem items may be generated by taking the sum of these 12 items (see Table 2).

The measure also includes follow-up items (items 13, 15, 17, 19, 21, 23, 25, 27, 29) relating to frequency of the maltreatment. Responses range from „1 or 2 times = 1‟, „3 to 10 times = 2‟, „More than 10 times = 3‟. Total sum and mean frequency scores may be created from these 9 items. Frequency sum scores can range from 0-27. Scores are set to missing if responses to more than 1 of the 9 items are missing (see Table 3).

Perpetrator Scoring

Perpetrator data may be examined by individual or groups of perpetrators (i.e., familial vs. extra-familial maltreatment); see Table 4.

Attribution and Impact Scoring

Attribution and impact may be scored three ways. Higher scores indicate: a) higher levels of self attribution or perceived responsibility for experienced psychological maltreatment; or b) greater impact experienced as a result of psychological maltreatment.

1. The maximum score across all eleven perpetrator categories is the highest score endorsed for any perpetrator.
2. The mean score is the mean of attribution or impact scores across all perpetrators endorsed.
3. The perpetrator attribution or impact score is item level data, and is the level of attribution or impact endorsed for a specific perpetrator.

Scores range from „1=Not at all my fault/Not at all", to „3=Mostly my fault/A lot".

Sample impact item: "Overall, when you think about what happened with your stepfather, how much do you feel like it was your fault?" (see Table 5).

Sample attribution item: "When you look at your life now, how much do you think what happened with your stepfather has affected you and how you think, feel or act?" (see Table 6).

LONGSCAN Use

Data Points
Age 16

Respondent
Adolescent

Mnemonic and Version
YPAA
YPAS (scored data)

Rationale
Psychological maltreatment has been linked to poor outcomes in adolescence and beyond. Securing self report of psychological maltreatment is a critical piece of a comprehensive assessment that includes self report at multiple time points, lifetime review of Child Protective Services records, and parent report at multiple time points.

Results

Table 1 displays the frequency of endorsements of individual stem items on the Age 16 Psychological Maltreatment measure. By far the most frequently endorsed item is "Made you feel really unloved or unwanted, or really bad about yourself by: Screaming or yelling at you, or putting you down or teasing you, or calling you names," followed by "Made you feel upset or scared by: threatening to send you away, or threatening to kick you out of the house, or threatening to leave you and never come back"

Table 1. Psychological Maltreatment Experienced between Age 12 to Age 16 Interviews

Label	N	% No (n)	%Yes (n)
Made you feel really unloved or unwanted, or really bad about yourself by: Screaming or yelling at you or putting you down or teasing you or calling you names?	686	75.1 (515)	24.9 (171)
Made you feel bad about yourself by blaming you for serious problems that weren‟t really your fault - - like family finances, a parent‟s drinking problem, or someone else‟s emotional problems?	682	90.3 (616)	9.7 (66)
Made you feel bad about yourself by putting unreasonable demands or expectations on you that were much too hard or really unfair for someone your age?	682	91.2 (622)	8.8 (60)
Made you feel upset or scared by: threatening to send you away or threatening to kick you out of the house or threatening to leave you and never come back?	683	86.5 (591)	13.5 (92)
Threatened to kill you or badly hurt you?	682	97.8 (667)	2.2 (15)
Scared or upset you by having a really serious fight or argument with another family member?	683	91.6 (626)	8.3 (57)
Threatened to or actually tried to kill, or badly hurt another family member or someone close to you?	681	97.4 (663)	2.6 (18)
Threatened to, or actually tried to kill themselves, either in front if you, or as a way of hurting you?	680	99.1 (674)	0.9 (6)
Threatened to, or actually tried to hurt or destroy something important to you, like a pet or a favorite thing?	680	95.3 (32)	4.7 (32)
Scared or upset you by putting you or leaving you in a dangerous situation in which you might be hurt - like making you walk home at night by yourself through a bad neighborhood, or leaving you with a crazy or dangerous person?	678	97.9 (664)	2.1 (14)
Made or encouraged you to do something illegal or wrong, like steal, have sex for money, or use drugs?	679	98.8 (671)	1.2 (8)
Said or did something else that we haven‟t already talked about, that made you feel unloved or unwanted or really bad about yourself?	678	94.9 (644)	5.0 (34)

Note. Based on data received at the Coordinating Center through July „09.

Table 2 displays the psychological maltreatment indicator and sum scores overall, and by gender and site. Thirty-three percent of the sample endorsed at least one psychological maltreatment item, with an average sum score of 0.8 items (SD = 1.6). A higher percentage of girls (38%) than boys (28%) reported psychological maltreatment. There was considerable variation across sites. Alphas were high at .81.

Table 2. Psychological Maltreatment Scores

		Sum Score of Stem Items				Dichotomous Indicator	
Psych. Maltreatment Scores	N	M (SD)	Min	Max	Alpha	% No (n)	%Yes (n)
Overall	674	0.8 (1.6)	0	12	.81	66.8 (450)	33.2 (224)
Gender							
Male	315	0.6 (1.4)	0	10	.78	72.1 (227)	27.9 (88)
Female	359	1.0 (1.8)	0	12	.81	62.1 (223)	37.9 (136)
Site							
EA	141	0.5 (1.4)	0	11	.81	74.5 (105)	25.5 (36)
MW*	69	0.5 (1.2)	0	8	.78	75.4 (52)	24.6 (17)
SO	110	0.8 (1.7)	0	12	.85	64.6 (71)	35.4 (39)
SW	174	1.1 (1.9)	0	10	.80	60.9 (106)	39.1 (68)
NW	180	0.9 (1.5)	0	8	.72	64.4 (116)	35.6 (64)

Notes. Based on data received at the Coordinating Center through July „09.
Scores were set to missing if responses to more than 1 item were missing.
* Data collection at the Midwestern site is still ongoing for age 16.

Table 3 displays the psychological maltreatment frequency mean and sum scores overall, and by gender and site.

Table 3. Age 16 Psychological Maltreatment frequency mean/sum scores

	Full Sample				Mean Sum Scores for participants with endorsements of at least one stem item of maltreatment			
Psych. Maltreatment Frequency Scores	N	M (SD)	Min	Max	N*	M (SD)	Min	Max
Freq Mean Score Overall	652	0.5 (0.7)	0	3	202	1.5 (0.6)	1	3
Gender								
Male	307	0.4 (0.7)	0	3	80	1.4 (0.5)	1	3
Female	345	0.5 (0.8)	0	3	122	1.5 (0.6)	1	3
Site								
EA	133	0.3 (0.7)	0	3	28	1.5 (0.6)	1	3
MW*	68	0.3 (0.6)	0	3	16	1.3 (0.5)	1	3
SO	108	0.5 (0.8)	0	3	37	1.5 (0.6)	1	3
SW	170	0.6 (0.8)	0	2.7	64	1.5 (0.5)	1	2.7
NW	173	0.5 (0.7)	0	2.7	57	1.4 (0.5)	1	2.7
Freq Sum Score Overall	652	1.1 (2.5)	0	18	202	3.4 (3.4)	1	18
Gender								
Male	307	0.7 (1.9)	0	15	80	2.8 (2.9)	1	15
Female	345	1.4 (2.8)	0	18	122	3.9 (3.6)	1	18
Site								
EA	133	0.7 (2.3)	0	18	28	3.5 (4.0)	1	18
MW*	68	0.5 (1.3)	0	8	16	2.3 (1.9)	1	8
SO	108	1.1 (2.4)	0	15	37	3.2 (3.1)	1	15
SW	170	1.5 (2.9)	0	16	64	3.9 (3.6)	1	16
NW	173	1.1 (2.4)	0	16	57	3.4 (3.2)	1	16

Note. Based on data received at the Coordinating Center through July '09.
There are 22 participants who endorsed a stem item (N = 224) but did not have any follow-up data for the frequency items, and therefore these frequency scores were set to missing.
* Data collection at the Midwestern site is still ongoing for age 16.

Table 4 describes the perpetrators of psychological maltreatment endorsed on the Age 16 Psychological Maltreatment measure. "Someone else" and mothers were the most frequent perpetrators of psychological maltreatment between the age of 12 and the Age 16 Interview.

Table 4. Perpetrators of Psychological Maltreatment between Age 12 and the Age 16 Interview

	NO Psych. Maltreatment % (n)	Psych. Maltreatment Occurred % (n)
Mother	88.6 (597)	11.4 (77)
Stepmother	98.7 (665)	1.3 (9)
Foster Mother	99.7 (674)	1.3 (9)
Dad"s Girlfriend	99.7 (672)	0.3 (2)
Father	92.9 (626)	7.1 (48)
Stepfather	97.9 (660)	2.1 (14)
Foster Father	98.8 (674)	1.2 (8)
Mom"s Boyfriend	98.1 (674)	1.9 (13)
Another family member or relative	91.7 (674)	8.3 (56)
A teacher, coach, minister, or someone like that…	97.5 (657)	2.5 (17)
Someone else	88.4 (596)	11.6 (78)
Family (e.g., mom, dad, etc…)	77.9 (525)	22.1 (149)
Non-Family (e.g., teacher, coach, etc…)	86.9 (586)	13.1 (88)

Notes. Based on data received at the Coordinating Center through July "09.
Perpetrator indicators are NOT mutually exclusive (i.e., more than one perpetrator can be named).

Table 5 displays the level of impact of psychological maltreatment by specific perpetrators and overall endorsed by LONGSCAN 16 year-old respondents. Psychological maltreatment perpetrated by mother"s boyfriend had the greatest impact.

Table 5. Age 16 Psychological Maltreatment Impact Items and Scores

	N	Not at all % (n)	Very Little % (n)	Somewhat % (n)	A lot % (n)	Mean Score M (SD)	Maximum Score M (SD)
Mother	80	35.0 (28)	23.7 (19)	26.2 (21)	15.0 (12)	1.2 (1.1)	--
Stepmother	11	45.4 (5)	27.3 (3)	27.3 (3)	--	0.8 (0.9)	--
Foster Mother	11	54.5 (6)	27.3 (3)	9.1 (1)	9.1 (1)	0.7 (1.0)	--
Dad"s Girlfriend	4	50.0 (2)	25.0 (1)	--	25.0 (1)	1.0 (1.4)	--
Father	49	30.6 (15)	26.5 (13)	28.6 (14)	14.3 (7)	1.3 (1.1)	--
Stepfather	16	44.0 (7)	25.0 (4)	12.5 (2)	18.7 (3)	1.1 (1.2)	--
Foster Father	10	30.0 (3)	30.0 (3)	20.0 (2)	20.0 (2)	1.3 (1.2)	--
Mom"s Boyfriend	14	21.4 (3)	14.3 (2)	14.3 (2)	50.0 (7)	1.9 (1.3)	--
Another family member or relative	61	29.5 (18)	27.9 (17)	26.2 (16)	16.4 (10)	1.3 (1.1)	--
A teacher, coach, minister, or someone like that…	21	52.4 (11)	58.6 (6)	14.3 (3)	4.8 (1)	0.7 (0.9)	--
Someone else	82	31.7 (26)	20.7 (17)	26.8 (22)	20.7 (17)	1.4 (1.1)	--
Overall	194	--	--	--	--	1.3 (1.1)	1.4 (1.1)

Note. Based on data received at the Coordinating Center through July "09.

Table 6 displays the level of self attribution LONGSCAN participants felt for psychological maltreatment experienced between the age of 12 and the Age 16 interview, by specific perpetrators and overall. Participants felt most at fault for psychological maltreatment perpetrated by mothers and mother"s boyfriends.

Table 6. Psychological Maltreatment Attribution Items and Scores for Age 16 Psychological Maltreatment

	N	Not at all my fault % (n)	Somewhat my fault % (n)	Mostly my fault % (n)	Mean Score M (SD)	Maximum Score M (SD)
Mother	80	38.7 (31)	51.2 (41)	10.0 (8)	0.7 (0.6)	--
Stepmother	11	81.8 (9)	18.2 (2)	--	0.2 (0.4)	--
Foster Mother	11	72.7 (8)	9.1 (1)	18.2 (2)	0.5 (0.8)	--
Dad"s Girlfriend	4	75.0 (3)	--	25.0 (1)	0.5 (1.0)	--
Father	49	46.9 (23)	46.9 (23)	6.1 (3)	0.6 (0.6)	--
Stepfather	16	68.7 (11)	25.0 (4)	6.2 (1)	0.4 (0.6)	--
Foster Father	10	50.0 (5)	40.0 (4)	10.0 (1)	0.6 (0.7)	--
Mom"s Boyfriend	14	50.0 (7)	28.6 (4)	21.4 (3)	0.7 (0.8)	--
Another family member or relative	61	54.1 (33)	39.3 (24)	6.6 (4)	0.5 (0.6)	--
A teacher, coach, minister, or someone like that…	21	76.2 (16)	23.8 (5)	--	0.2 (0.4)	--
Someone else	82	46.3 (38)	51.2 (42)	2.4 (2)	0.6 (0.5)	--
Overall	194	--	--	--	0.6 (0.6)	0.7 (0.6)

Note. Based on data received at the Coordinating Center through July "09.

Publisher Information

This measure is free and available for use upon the receipt of a signed User Agreement for LONGSCAN Project Developed Measures.

References and Bibliography

Barnett, D., Manly, J., & Cicchetti, D. (1993). Defining child maltreatment: The interface between policy and research, in Cicchetti D. & Toth, S. L., Advances in applied developmental psychology: Child abuse, child development and social policy. Ablex Publishing Corp, Norwood, NJ.

Sexual Abuse Self-Report: Age 16
LONGSCAN, 2000

Description of Measure

Purpose
This self-report measure assesses an adolescent‟s history of sexual abuse since age 12.

Conceptual Organization
Eleven stem items ask about specific sexually abusive caregiver behaviors; four of these items have gender-specific wording for boys or girls. Adolescents who do not endorse a screening question after completing the non-penetration items are not asked about sexual abuse involving penetration. After an adolescent has completed all appropriate stem items, follow-up items assess the frequency of occurrence since age 12 and perpetrator/s for conceptually grouped clustered stem items (i.e., one set of follow up items is asked for each of 5 sets of clustered stem items if any item within the cluster was endorsed). Attribution, or the adolescent‟s perception of his or her level of fault for what happened, and the degree of impact of the sexual abuse or assault are asked for each perpetrator.

Item Origin/Selection Process
These items were adapted and refined from the LONGSCAN measure of sexual abuse and assault (LONGSCAN, 1998); both measures drew heavily on the definitions developed by Barnett, Manly & Cicchetti (1995). This measure is shorter than the Age 12 instrument.

Materials
A-CASI delivery system

Time Required
Ranges from 1 to 7 minutes depending on the extent of sexual abuse/assault endorsed.

Administration Method
A-CASI. Due to possible confusion about branching subsequent to stem items, paper and pencil administrations are not recommended.

Training
Minimal training is required given that the measure is delivered in an A-CASI format.

Scoring

There are several scoring options available for this measure. For each of four subscales, a dichotomous indicator can be created for whether or not abuse was endorsed for ANY of the specified items. A sum score of the number of items endorsed can also be created. Items included in each subscale are as follows:

Non-contact Sexual Abuse: items 1-4.

Sexual Contact, Non-Penetration: items 5, 6, 7, & 9.

Sexual Contact, Penetration: items 10 & 11.

Indicator for Other Sexual Abuse: Item 8, “Has an adult who was supposed to be supervising or taking care of you….done something else sexual to you, or want you to do something else sexual, that we have not already talked about?” is a screener item intended to shield participants who have not experienced

penetration from questions about penetration PLEASE NOTE: While item 8 is a stem question to items 9, 10, and 11, it may however also include sexual abuse beyond what is asked in items 9-11.

Any Sexual Abuse: items 1, 2, 3, 4, 5, 6, 7, 8*, 9, 10, and 11. * PLEASE NOTE: Item 8 is a screening question for the three items on penetration, including items 9, 10, and 11. To avoid double-counting, item 8 is only included in this score if the participant did not endorse any of items 9-11, but did endorse item 8.

Frequency: Items 12, 14, 16, 18, 20, 22 the frequency of the abuse described within a cluster of stem items. Responses range from „1 or 2 times = 1", „3 to 10 times = 2", „More than 10 times = 3". Total or sum and mean frequency scores may be created from these six items. Frequency sum scores range from 0-27. Scores are set to missing if more than one of the six items is missing (see Table 3).

Perpetrator Scoring

Perpetrator data may be examined by individual or groups of perpetrators (i.e., familial vs. extra-familial maltreatment). See Table 4.

Attribution and Impact Scoring

Follow-up items on attribution and current degree of impact are asked for each endorsed perpetrator. Attribution and impact may be scored three ways. Higher scores indicate: a) higher levels of self attribution or responsibility for experienced sexual abuse; or b) greater impact experienced as a result of sexual abuse.

1. The maximum score across all eleven perpetrator categories is the highest score endorsed for any perpetrator.
2. The mean score is the mean of attribution or impact scores across all perpetrators endorsed.
3. The perpetrator attribution or impact score is item level data, and is the level of attribution or impact endorsed for a specific perpetrator.

Scores range from „1=Not at all my fault/Not at all", to „3=Mostly my fault/A lot".

Example impact item: "When you look at your life now, how much do you think what happened with your stepfather has affected you and how you think, feel or act?" (See Table 5).

Example attribution item: "Overall, when you think about what happened with your stepfather, how much do you feel like it was your fault?" (See Table 6).

LONGSCAN Use

Data Point
Ages 16

Respondent
Adolescent

Mnemonic and Version
YSAA
YSAS (scored data)

Rationale

Sexual abuse has been linked to poor outcomes throughout the lifespan. Securing self report of sexual abuse is a critical piece of a comprehensive assessment that includes self report at multiple time points, lifetime review of Child Protective Services records, and parent report at multiple time points (Everson et al., 2008).

Results

Table 1 displays frequencies for stem items on the Age 16 Sexual Abuse measure. Table 2 displays the prevalence of sexual abuse; 8% of LONGSCAN participants endorsed experiencing some kind of sexual abuse between age 12 and the Age 16 interview.

Table 1. Age 16 Sexual Abuse Stem Item Frequencies

Variable	*Label*	N	% No (n)	%Yes (n)
YSAA1	Look at, or try to look at your private parts in a sexual way?	681	96.5 (657)	3.5 (24)
YSAA2	Get you or try to get you, to look at their private parts?	679	96.8 (657)	3.2 (22)
YSAA3	Take or try to take pictures or videos of you when you were naked?	678	98.9 (671)	1.0 (7)
YSAA4	Say inappropriate sexual things to you?	678	96.0 (651)	3.9 (27)
YSAA5	Touch or feel, or try to touch or feel your private parts?	679	96.3 (654)	3.7 (25)
YSAA6	Get you, or try to get you, to touch or feel their private parts?	680	96.8 (658)	3.2 (22)
YSAA7*	Hurt or try to hurt your private parts or breasts on purpose?	679	98.5 (669)	1.5 (10)
YSAA8	Do something else sexual to you, or want you to do something else sexual, that we have not already talked about?	681	96.9 (660)	3.1 (21)
YSAA9*	Kiss or put their mouth on your breasts, your private part or your butt, or get you to kiss or put your mouth in theirs?	681	98.7 (672)	1.3 (9)
YSAA10*	Have sex with you by putting their penis in your butt, or by making you put your penis in their private part or butt?	681	98.8 (673)	1.2 (8)
YSAA11*	Put their finger or another object in your private part or butt, or get you to do that to them?	681	99.1 (675)	0.8 (6)

Notes. Based on data received at the Coordinating Center through July ‟09.
* Items 7, 9, 10, 11 were asked gender-specifically but merged for scoring.
* Items 9, 10 and 11 are administered only if item 8 is endorsed "1/YES;"
„0/NO‟ answers on item 8 were carried over and recoded as a „0/NO‟ for items 9, 10, and 11.

Table 2 displays the sexual abuse indicator and sum scores overall. Eight percent of the sample endorsed one or more stem items. 6% of the sample endorsed some non-contact sexual abuse. The average sum score for the Any Sexual Abuse subscale was 0.3 items (SD = 1.2).

Table 2. Age 16 Sexual Abuse Scores

	Sum Score					Dichotomous Indicators	
	N	M (SD)	Min	Max	Alpha	% No (n)	%Yes (n)
Non-Contact Sexual Abuse	678	0.1 (0.5)	0	4	.84	94.2 (639)	5.7 (39)
Sexual Contact, Non-Penetration	679	0.1 (0.5)	0	4	.85	95.6 (649)	4.4 (30)
Sexual Contact, Penetration	681	0.0 (0.2)	0	2	.84	98.7 (672)	1.3 (9)
Any Sexual Abuse	678	0.3 (1.2)	0	10	.91	92.2 (625)	7.8 (53)

Note. Based on data received at the Coordinating Center through July ‟09.
Scores were set to missing if more than 1 item was missing.

Table 3 displays the sexual abuse mean and sum scores overall and by gender and site for both the full sample, and for the subsample who endorsed at least one stem item.

Table 3. Age 16 Sexual Abuse Mean/Sum Scores

	Full Sample*				Subsample endorsing at least one stem item			
Sexual Abuse Frequency Scores	N	M (SD)	Min	Max	N	M (SD)	Min	Max
Freq Mean Score Overall	666	0.1 (0.4)	0	3	41	1.5 (0.8)	1	3
Gender								
Male	314	0.1 (0.3)	0	2	14	4.4 (4.9)	1	2
Female	352	0.1 (0.5)	0	3	27	1.7 (0.9)	1	3
Site								
EA	143	0.1 (0.4)	0	3	8	1.5 (0.9)	1	1
MW*	67	0.2 (0.7)	0	3	5	2.4 (0.9)	1	3
SO	109	0.1 (0.2)	0	1	6	1.0 (0.0)	1	1
SW	171	0.1 (0.4)	0	3	13	1.5 (0.8)	1	1
NW	176	0.1 (0.3)	0	3	9	1.3 (0.7)	1	1
Freq Sum Score Overall	666	0.2 (1.4)	0	18	41	3.8 (4.3)	1	18
Gender								
Male	314	0.1 (0.7)	0	8	14	2.6 (2.3)	1	8
Female	352	0.3 (1.8)	0	18	27	1.2 (0.4)	1	18
Site								
EA	143	0.3 (2.2)	0	18	8	6.0 (7.5)	1	18
MW*	67	0.4 (2.0)	0	14	5	5.8 (5.3)	1	14
SO	109	0.1 (0.4)	0	3	6	1.3 (0.8)	1	3
SW	171	0.3 (1.2)	0	9	13	3.7 (2.6)	1	9
NW	176	0.1 (0.7)	0	6	9	2.6 (2.1)	1	6

Note. Based on data received at the Coordinating Center through July ‟09.
* There are 12 participants who endorsed a stem item but did not have any follow-up data for the items.

Table 4 describes the perpetrators of sexual abuse endorsed on the Age 16 sexual abuse measure. "Someone else," "Father," and "Another family member or relative" were the most frequently endorsed perpetrators of sexual abuse between the age of 12 and the Age 16 interview. When grouped by family or non-family perpetrator type, non-family members were more frequently endorsed.

Table 4. Age 16 Sexual Abuse Self-Report: Perpetrators Endorsed (N = 678)

	% NO Sexual Abuse (n)	% Sexual Abuse Occurred (n)
Mother	99.7 (676)	0.3 (2)
Stepmother	99.8 (677)	0.2 (1)
Foster Mother	100.0 (678)	--
Dad‟s Girlfriend	100.0 (678)	--
Father	99.3 (673)	0.7 (5)
Stepfather	99.8 (677)	0.2 (1)
Foster Father	100.0 (678)	--
Mom‟s Boyfriend	99.4 (674)	0.6 (4)
Another family member or relative	99.3 (673)	0.7 (5)
A teacher, coach, minister, or someone like that…	99.8 (677)	0.2 (1)
Someone else	97.1 (658)	2.9 (20)
Family (e.g., mom, dad, etc…)	97.5 (661)	2.5 (17)
Non-Family (e.g., teacher, coach, etc…)	96.9 (657)	3.1 (21)

Note. Based on data received at the Coordinating Center through July ‟09.
Perpetrator indicators are NOT mutually exclusive (i.e., more than one perpetrator can be named).

Table 5 displays the level of impact resulting from sexual abuse by specific perpetrators and overall endorsed by LONGSCAN 16 year-old respondents.

Table 5. Age 16 Sexual Abuse Self-Report: Sexual Abuse Impact Items and Scores

	N	Not at all % (n)	Very Little % (n)	Somewhat % (n)	A lot % (n)	Mean Score M (SD)	Maximum Score M (SD)
Mother	2	50.0 (1)	--	50.0 (1)	--	2.0 (1.4)	--
Stepmother	1	100.0 (1)	--	--	--	1.0 (--)	--
Foster Mother	0	--	--	--	--	--	--
Dad"s Girlfriend	0	--	--	--	--	--	--
Father	5	40.0 (2)	20.0 (1)	40.0 (2)	--	2.0 (1.0)	--
Stepfather	1	--	--	--	100.0 (1)	4.0 (--)	--
Foster Father	0	--	--	--	--	--	--
Mom"s Boyfriend	4	25.0 (1)	--	--	75.0 (3)	3.3 (1.5)	--
Another family member or relative	5	40.0 (2)	--	60.0 (3)	--	2.2 (1.1)	--
A teacher, coach, minister, or someone like that…	1	100.0 (1)	--	--	--	2.0 (--)	--
Someone else	20	35.0 (7)	25.0 (5)	15.0 (3)	25.0 (5)	2.3 (1.2)	--
Overall	34	--	--	--	--	2.3 (1.2)	2.3 (1.2)

Note. Based on data received at the Coordinating Center through July "09.

Table 6 displays the level of self attribution LONGSCAN participants felt for sexual abuse experienced between the age of 12 and the age 16 interview, by specific perpetrators and overall.

Table 6. Age 16 Sexual Abuse Self-Report: Sexual Abuse Attribution Items and Scores

	N	Not at all my fault % (n)	Somewhat my fault % (n)	Mostly my fault % (n)	Mean Score M (SD)	Maximum Score M (SD)
Mother	2	50.0 (1)	50.0 (1)	--	1.5 (0.7)	--
Stepmother	1	100.0 (1)	--	--	1.0 (--)	--
Foster Mother	0	--	--	--	--	--
Dad"s Girlfriend	0	--	--	--	--	--
Father	5	40.0 (2)	60.0 (3)	--	1.6 (0.5)	--
Stepfather	1	--	--	100.0 (1)	3.0 (--)	--
Foster Father	0	--	--	--	--	--
Mom"s Boyfriend	4	25.0 (1)	50.0 (2)	25.0 (1)	2.0 (0.8)	--
Another family member or relative	5	60.0 (3)	40.0 (2)	--	1.4 (0.5)	--
A teacher, coach, minister, or someone like hat…	1	100.0 (1)	--	--	1.0 (--)	--
Someone else	20	70.0 (14)	25.0 (5)	5.0 (1)	1.4 (0.6)	--
Overall	34	--	--	--	1.4 (0.6)	1.5 (0.7)

Note. Based on data received at the Coordinating Center through July "09.

Publisher Information

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References and Bibliography

Barnett, D., Manly, J., & Cicchetti, D. (1993). Defining child maltreatment: The interface between policy and research, in Cicchetti D. & Toth, S. L., Advances in applied developmental psychology: Child abuse, child development and social policy. Ablex Publishing Corp, Norwood, NJ.

Everson, M., Smith, J., Hussey, J., Dubowitz, H., Litrownik, A., English, D., Knight, L., & Runyan, D. (2008). Concordance between adolescent reports of childhood abuse and Child Protective Service determinations in an at-risk sample of young adolescents. *Child Maltreatment, 13,* 14-26.

Service Utilization
LONGSCAN, 1998

Description of Measure

Purpose
To assess services needed and services received in the past year by the adolescent participant, the primary caregiver, and other family members. A wide range of services are queried, including use of income supports, shelters, child welfare, mental health including psychiatric hospitalizations, health (including treatment related to injuries, hospitalizations, alcohol or drug treatment, preventive health services and dental care), self help groups, parenting classes, legal aid, transportation services and respite care. Also assessed is the loss of support services in the past year, and reason for the loss.

Conceptual Organization
This measure was developed to assess the need for and receipt of a wide range of services that might prevent or ameliorate difficulties experienced by study participants and their families. The loss of support services was included to permit assessment of the impact of loss of such services.

Item Origin/Selection Process
This measure surveying a comprehensive array of services that might have promoted well-being or ameliorate the effect of individual and family issues, including maltreatment, was project developed. The need for services was included for two reasons: to assess needed services that were not received; as well as to assess services that may have been received involuntarily or received despite the primary caregiver's feeling they were not needed.

Materials
Computer-assisted form.

Time Required
5-10 minutes, depending on extent of services used.

Administration Method
Face-to-face interviewer-administered using computer-assisted interview.

Training
Minimal as the items are structured with forced response options.

Scoring

Score Types
Individual items may be used. While no further scoring recommendations are included in this manual, this does not rule out individual investigators developing further scoring protocols, such as counts of types of services received or lost (i.e., income supports, child welfare related services).

LONGSCAN Use

Data Points
Ages 15, 16, 17

Mnemonic and Version
SRUC (Age 16): the most significant change from the SRUB is that items on helpfulness of each service received are not included in the SRUC, and skip patterns for items on lost services were revised. Assessment of service utilization is included in each LONGSCAN face-to-face and Annual Contact Interview.

Other service utilization measures:
TXUA/B: Baseline, Age 4
SERA: Ages 1-3, 5-7
ASUA: Age 6
CSUA: Annual Contact Interviews and Age 6 (Ages 1-3, 5-7)
SUA: Ages 8-11
SRUC: Ages 15, 16 & 17
SRUD: Site-specific for Eastern & Midwestern Sites Age 17

Respondent
Caregiver

Results

Age 16 Descriptive Statistics

For descriptive statistics on the earlier services utilization items, please refer to the 1st, 2nd, and 3rd volumes of the measures manuals (Hunter et al., 2003; Knight et al., 2008). Tables 1 and 2 provide frequencies for the eight most endorsed services utilized in the past year at the Age 16 interview, by gender and study site. Services most needed, in descending order, included dental care for child; counseling or therapy for child; services for child's learning or developmental problem; counseling or therapy for another family member; caregiver's self-help or support group; transportation; counseling or therapy for caregiver; and legal aid. Services most received, in descending order, include: dental care for child; services for child's learning or developmental problem; counseling or therapy for child; counseling or therapy for other family member; counseling or therapy for caregiver; transportation; caregiver's self-help or support group; and legal aid.

Table 1. Age 16 Service Utilization by Gender and Study Site

		Legal Aid		Self Help/Support*		Transportation		Dental Care (Child)	
	N	Needed Help % (n)	Got Help % (n)	Needed Help % (n)	Got Help % (n)	Needed Help % (n)	Got Help % (n)	Needed Help % (n)	Got Help % (n)
Overall	781	12.0 (94)	8.2 (64)	22.6 (177)	11.1 (87)	22.5 (176)	13.5 (106)	69.3 (540)	63.8 (499)
Child's Gender									
Male	376	5.6 (44)	3.4 (27)	11.9 (93)	5.7 (45)	10.4 (81)	6.2 (49)	30.2 (235)	28.1 (220)
Female	405	6.4 (50)	4.7 (37)	10.7 (84)	5.4 (42)	12.2 (95)	7.3 (57)	39.1 (305)	35.7 (279)
Study Site									
EA	156	1.3 (10)	1.3 (10)	3.1 (24)	1.3 (10)	4.1 (32)	3.4 (27)	12.3 (96)	11.0 (86)
MW	132	2.4 (19)	1.8 (14)	3.1 (24)	1.3 (10)	7.0 (55)	5.2 (41)	11.2 (87)	11.0 (86)
SO	112	0.3 (2)	0.3 (2)	1.0 (8)	0.5 (4)	2.1 (16)	1.4 (11)	7.6 (59)	7.7 (60)
SW	200	3.8 (30)	2.5 (20)	7.9 (62)	4.6 (36)	3.6 (28)	1.0 (8)	19.0 (148)	18.0 (141)
NW	181	4.2 (33)	2.3 (18)	7.5 (59)	3.4 (27)	5.8 (45)	2.4 (19)	19.3 (150)	16.1 (126)

Source. Based on data received at the Coordinating Center through February '10.

* Includes Weight Watchers, AA, Parents Anonymous etc.

Twenty-one percent of caregivers (n=162) reported that they needed counseling/therapy, and of these, 71% received it. Twenty-six percent of caregivers reported that their children (n=202) needed counseling/therapy, and of these, 78% received it.

Table 2. Age 16 Service Utilization by Gender and Study Site

		Learning Development (Child)		Counseling/Therapy (Child)		Counseling/Therapy (Caregiver)		Counseling/Therapy (Other Family Member)	
	N	Needed Help % (n)	Got Help % (n)	Needed Help % (n)	Got Help % (n)	Needed Help % (n)	Got Help % (n)	Needed Help % (n)	Got Help % (n)
Overall	783	23.6 (185)	21.5 (168)	25.8 (202)	20.2 (158)	20.7 (162)	14.7 (115)	22.7 (177)	17.0 (133)
Child's Gender									
Male	377	12.5 (98)	11.4 (89)	12.4 (97)	9.8 (77)	10.6 (83)	7.0 (55)	11.5 (90)	7.9 (62)
Female	406	11.1 (87)	10.1 (79)	13.4 (105)	10.3 (81)	10.1 (79)	7.7 (60)	11.1 (87)	9.1 (71)
Study Site									
EA	155	3.3 (26)	3.1 (24)	3.9 (31)	3.2 (25)	2.4 (19)	2.3 (18)	2.8 (22)	2.4 (19)
MW	132	2.8 (22)	2.4 (19)	2.8 (22)	2.3 (18)	4.1 (32)	3.1 (24)	3.1 (24)	2.2 (17)
SO	114	1.9 (15)	1.8 (14)	2.6 (20)	1.7 (13)	2.2 (17)	1.0 (8)	1.8 (14)	1.3 (10)
SW	200	8.6 (67)	7. 9 (62)	9.6 (75)	7.5 (59)	7.7 (60)	5.5 (43)	7.7 (60)	6.4 (50)
NW	182	7.0 (55)	6.3 (49)	6.9 (54)	5.5 (43)	4.3 (34)	2.8 (22)	7.3 (57)	4.7 (37)

Source. Based on data received at the Coordinating Center through February '10.

Table 3 provides frequencies for Department of Social Services/Welfare services received in year preceding the Age 16 interview. Almost half (n = 376) of caregivers reported that they needed some form of DSS services, and of these, 99% endorsed receiving help from DSS in some manner. In follow up items assessing receipt of specific DSS services, a large portion of these respondents reported receiving Medicaid (91%), food stamps (64%), and TANF (35%).

Table 3. Age 16 Utilization of DSS or Welfare Services

		DSS or Welfare Services		What kind of DSS/Welfare services did you or your child get (n = 382)?								
	N	Needed Help % (n)	Got Help % (n)	TANF %	Food Stps. %	Medi-caid %	Util, Rent, etc.. %	In-home services %	After school care %	Emer. Care %	Job Train. %	Other %
Overall	783	48.0 (376)	47.6 (373)	35.1	64.0	90.8	16.8	3.1	8.4	5.0	3.1	5.0
Child's Gender												
Male	378	20.7 (162)	20.7 (162)	14.9	30.7	40.6	7.6	1.8	3.9	3.1	1.3	2.6
Female	405	27.3 (214)	26.9 (211)	20.2	33.3	50.3	9.2	1.3	4.5	1.8	1.8	2.4
Study Site												
EA	155	8.8 (69)	8.8 (69)	6.8	14.2	15.7	1.6	0.0	1.3	2.4	2.4	0.0
MW	132	10.9 (85)	10.3 (81)	3.9	18.1	19.6	5.5	0.3	1.8	0.0	0.0	0.3
SO	114	6.1 (48)	6.1 (48)	1.3	8.9	11.8	1.8	0.5	1.0	0.8	0.0	0.3
SW	200	10.1 (79)	10.3 (81)	12.6	9.7	19.4	3.7	1.0	1.8	1.0	0.5	2.9
NW	182	12.1 (95)	12.0 (94)	10.5	13.1	24.3	4.2	1.3	2.4	0.8	0.3	1.6

Source. Based on data received at the Coordinating Center through February '10.

Publisher Information

This measure is free and available for use upon the receipt of a signed User Agreement for LONGSCAN Project-Developed Measures available athttp://www.iprc.unc.edu/longscan/

References and Bibliography

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Sexual Experiences & Parenting Status
LONGSCAN 2000

Description of Measure

Purpose
To ascertain the sexual experiences, sexual risk behaviors and attitudes, birth outcomes and child care history from mid to late adolescents. Variables include age at first intercourse; number of sexual partners; history of sex with partner(s) of same sex; use and type of protection; pregnancy, childbearing and paternity history; self-efficacy regarding sex; perceptions of friends' attitudes towards sexual behavior and use of protection; and current child care arrangements made by adolescent parents for their children.

Conceptual Organization
The development of this measure was informed by Protection Motivation Theory, in which environmental and personal risk and protective factors inform two appraisal pathways (coping appraisal and threat appraisal) leading to intention regarding risk behavior (Stanton et al, 1995).

Item Origin/Selection Process
The majority of the items were project developed based upon a review of existing measures. Items on friends' attitudes and behaviors, and the theoretical basis of the measure, were informed by the Culturally Based Survey Instrument (Stanton et al., 1995).

Materials
LONGSCAN utilized an A-CASI administration
Time Required
5 minutes

Administration Method
A-CASI

Training
Minimal

Scoring
There is no scoring at this time.

LONGSCAN Use

Data Points
Ages 16 & 18

Mnemonic and Version
ASEC (Ages 16 & 18)

Respondent
Adolescent

Results

Descriptive Statistics

Table 1 describes youth sexual experiences at Age 16. More than half (51%) of the sample at the Age 16 interview reported that they had had sex one or more times and a majority of these adolescents (71%) were 14 years or older when they had sex for the first time.

Table 1. Youth Sexual Experiences, Age 16 Interview

		Have you ever had sex?		How old were you the first time you had sex?					
	N	% No (n)	% Yes (n)	N	8-9 yrs old % (n)	10-11 yrs old % (n)	12-13 yrs old % (n)	14-15 yrs old % (n)	16 yrs old or more % (n)
Overall	727	49.1 (357)	50.9 (370)	363	2.2 (8)	5.2 (19)	21.2 (77)	57.3 (208)	14.1 (51)
Gender									
Male	345	22.1 (161)	25.3 (184)	179	1.6 (6)	3.9 (14)	14.6 (53)	24.2 (88)	5.0 (18)
Female	382	27.0 (196)	25.6 (186)	184	0.6 (2)	1.4 (5)	6.6 (24)	33.1 (120)	9.1 (33)
Study Site									
EA	144	7.1 (52)	12.7 (92)	91	1.1 (4)	1.9 (7)	8.0 (29)	11.6 (42)	2.5 (9)
MW	120	8.7 (63)	7.8 (57)	55	0.0 (0)	0.0 (0)	3.6 (13)	11.0 (40)	0.6 (2)
SO	112	7.4 (54)	8.0 (58)	56	0.3 (1)	0.0 (0)	3.9 (14)	8.0 (29)	3.3 (12)
SW	174	11.8 (86)	12.1 (88)	86	0.5 (2)	1.9 (7)	3.0 (11)	11.9 (43)	6.3 (23)
NW	177	14.0 (102)	10.3 (75)	75	0.3 (1)	1.4 (5)	2.7 (10)	14.9 (54)	1.4 (5)

Notes. Based on data received at the Coordinating Center through February'10.

Table 2 describes the number of times Age 16 participants reported having had sex. Among females who had had sex, 63% endorsed that it only occurred once or twice, whereas 56% of males reported having had sex more frequently (3 or more times).

Table 2. Youth Sexual Experiences at the Age 16 Interview

	Females: How many boys/men have you had sex with?						Males: How many girls/women have you had sex with?					
	N	1 %	2 %	3 %	4 %	5 %	N	1 %	2 %	3 %	4 %	5 %
Overall	186	38.2	25.3	14.0	15.6	7.0	177	17.5	26.0	19.2	17.5	19.8
Study Site												
EA	39	8.6	4.8	4.3	3.2	0.0	50	3.9	3.4	6.8	6.8	7.3
MW	31	7.0	3.8	2.1	3.2	0.5	25	3.4	3.9	1.7	1.7	3.4
SO	37	9.1	6.4	1.1	2.1	1.1	19	1.1	1.7	3.9	2.3	1.7
SW	45	9.1	5.9	3.2	3.2	2.7	41	4.5	6.2	2.8	3.9	5.6
NW	34	4.3	4.3	3.2	3.8	2.7	42	4.5	10.7	3.9	2.8	1.7

Notes. Based on data received at the Coordinating Center through February'10.

Table 3 describes the rate of condom use by adolescents who were sexually active at Age 16. Among adolescents who had had sex, 86% reported using a condom 'most of the time' to 'always.'

Table 3. Condom use at the Age 16 Interview

		How often do you/partner use condoms?				
		Never	Rarely	Sometimes	Most of the time	Always
	N	% (n)	% (n)	% (n)	% (n)	% (n)
Overall	364	3.3 (12)	5.2 (19)	5.5 (20)	20.9 (76)	65.1 (237)
Gender						
Male	179	0.8 (3)	1.4 (5)	1.4 (5)	6.9 (25)	38.7 (141)
Female	185	2.5 (9)	3.8 (14)	4.1 (15)	14.0 (51)	26.4 (96)
Study Site						
EA	90	0.5 (2)	0.0 (0)	0.8 (3)	5.8 (21)	17.6 (64)
MW	57	0.3 (1)	0.8 (3)	0.8 (3)	3.3 (12)	10.4 (38)
SO	56	1.1 (4)	1.1 (4)	0.3 (1)	3.0 (11)	9.9 (36)
SW	86	1.4 (5)	2.2 (8)	1.9 (7)	4.9 (18)	13.2 (48)
NW	75	0.0 (0)	1.1 (4)	1.6 (6)	3.8 (14)	14.0 (51)

Notes. Based on data received at the Coordinating Center through February'10.

Table 4 describes the rate of pregnancies, paternity and select pregnancy outcomes at the Age 16 Interview. 25% of sexually active females said that they had gotten pregnant, while 7.5% of sexually active males had gotten someone pregnant.

Table 4. Age 16: History of Pregnancy, Paternity and Select Pregnancy Outcomes

	Females: Ever been pregnant?		Males: Ever gotten someone pregnant?		Females: Are you pregnant now?		Females: Did pregnancy end in miscarriage?		Females: Did pregnancy end in abortion?		Females: Did pregnancy end in a still birth?	
	N	%Yes (n)	N	%Yes (n)	N	%Yes (n)	N	%Yes (n)	N	%Yes (n)	N	%Yes (n)
Overall	185	25.4 (47)	174	7.5 (13)	45	26.7 (12)	50	24.0 (12)	50	30.0 (15)	49	8.2 (4)
Study Site												
EA	38	8.6 (16)	51	3.4 (6)	14	11.1 (5)	17	2.0 (1)	17	14.0 (7)	17	4.1 (2)
MW	31	2.7 (5)	24	0.6 (1)	5	0.0 (0)	5	4.0 (2)	5	0.0 (0)	4	2.0 (1)
SO	37	2.7 (5)	19	0.0 (0)	5	2.2 (1)	6	0.0 (0)	6	4.0 (2)	6	0.0 (0)
SW	46	7.0 (13)	41	2.9 (5)	13	6.7 (3)	14	12.0 (6)	14	6.0 (3)	14	2.0 (1)
NW	33	4.3 (8)	39	0.6 (1)	8	6.7 (3)	8	6.0 (3)	8	6.0 (3)	8	0.0 (0)

Notes. Based on data received at the Coordinating Center through February'10.

Table 5 reports the number of children born to Age 16 Interview respondents.

Table 5. Number of children at the Age 16 Interview

		Do you have any children?	How many children do you have?		
				1 child	2 children
	N	%Yes (n)	N	% (n)	% (n)
Overall	66	27.3 (18)	18	94.4 (17)	5.6 (1)
Child's Gender					
Male	18	6.1 (4)	4	22.2 (4)	0.0 (0)
Female	48	21.2 (14)	14	72.2 (13)	5.6 (1)
Study Site					
EA	25	9.1 (6)	6	33.3 (6)	0.0 (0)
MW	7	4.5 (3)	3	16.7 (3)	0.0 (0)
SO	5	4.5 (3)	3	11.1 (2)	5.6 (1)
SW	19	7.6 (5)	5	27.2 (5)	0.0 (0)
NW	10	1.5 (1)	1	5.6 (1)	0.0 (0)

Notes. Based on data received at the Coordinating Center through February'10.

Publisher Information

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References and Bibliography

Knight, E. D., Smith, J. B., Martin, L. M., Lewis, T., & the LONGSCAN Investigators (2008). Measures for Assessment of Functioning and Outcomes in Longitudinal Research on Child Abuse Volume 3: Early Adolescence (Ages 12-14). Accessible at the LONGSCAN web site (http://www.unc.edu/depts/sph/longscan/).

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Teacher's Estimation of Child's Peer Status
Lemerise, E. and Dodge, K.
1990

Description of Measure

Purpose
To estimate teacher's perception of the participant adolescent's peer status.

Conceptual Organization
The instrument includes 7 items assessing the youth's acceptance among peers, and his or her social skills and aggression towards peers

Materials
Paper forms.

Time Required
1 minute

Administration Method
Paper forms

Scoring

Score Types
Teachers rank the first item on a 5-point scale from 1 (very well liked) to 5 (liked very little). Six subsequent items assess the student's social skills in relation to those of other students, and likelihood of nominations by other students; these items are rated on a 5-point scale ranging from 1 (one of the kids with the most nominations) to 5 (one of the kids with the fewest nominations).

An overall composite mean score, two subscale mean scores, and individual item scores can be used. When calculating a total or composite score, items 3, 4, 5, and 7 must first be reversed. The mean of items 4 and 5 can used to measure Peer Aggression, and items 1, 2, and 6 can be used to measure Peer Popularity.

Score Interpretation
Higher scores on individual items and on any composite mean score reflect more peer problems.

Psychometric Support

Reliability
In a sample of children in seven grade 3, 4, and 5 classrooms (N = 100) Lemerise and Dodge (1990) found that teachers' ratings of students on this measure correlated positively with student ratings. Correlations ranged from .55 to .65.

LONGSCAN Use

Data Points
Ages 6, 8, 12, 14, and 16

Respondent
Both language arts and math teachers were asked to fill out the forms if they had known the student at least three months. At Age 14, if the student had the same teacher for both subjects, sites had the option to send this form to a second teacher.

Form Version and Mnemonic
Age 6: TRPA
Age 8: TPB
Age 12, 14, and 16: TRPC

Rationale
Peer relationship data were requested from the teacher to allow examination of the relationship between child maltreatment and social competence. Peer rejection and aggression are predictors of later delinquency and conduct problems (Coie, Lochman, Terry, & Hyman, 1992), with aggressive behavior cited as the most common reason for peer rejection (Coie, Dodge, & Coppotelli, 1982).

Administration and Scoring Notes
After obtaining parental consent, all teacher respondent forms were sent by mail to the participant adolescent's language arts and math teachers with specific instructions regarding completion and remittance. Incentives for participation and response rate differed by study site.

LONGSCAN renamed the Peer Popularity subscale to Low Peer Status to reflect the fact that higher scores indicate that 'the child is less liked by peers'.

Up to two teachers may have filled out forms for each participant. Options for handling two forms for a single participant include sorting for the first form by FSEQNO, or averaging the responses across the two forms.

Results

Descriptive Statistics
For descriptive statistics of the age 6, 8, 12, and 14 Teacher Estimation of Peer Status scores, please refer to the 2nd and 3rd volumes of the measures manuals (Hunter et al., 2003, Knight et al. 2008). Table 1 provides descriptive statistics for the Age 16 Teacher Estimation of Peer Status mean scores by gender and site. At Age 16, teachers rated boys higher on peer problems than girls and reported that boys were more aggressive towards peers than girls.

Table 1. Age 16 Teacher Estimation of Peer Status Mean Scores by Gender and Site

	Peer Aggression			Low Peer Status			Total Peer Problems		
	N	M	SD	N	M	SD	N	M	SD
Overall	259	2.1	1.3	261	3.1	0.9	261	2.6	0.8
Child's Gender									
Male	125	2.3	1.3	126	3.2	0.9	126	2.7	0.9
Female	134	1.9	1.2	135	3.0	0.8	135	2.4	0.8
Study Site									
EA	22	2.0	1.2	22	3.0	0.7	22	2.4	0.7
SW	100	2.2	1.2	101	3.1	0.8	101	2.6	0.7
NW	137	2.1	1.4	138	3.2	1.0	138	2.6	0.9

Notes. Based on data received at the Coordinating Center through July '09.
Only data from the first of the possible two teacher forms per participant are included.

Reliability

As can be seen in Table 2, internal consistency for the Age 16 Teacher Estimation of Peer Status mean scores was good (ranging from .83 to .93).

Table 2. Cronbach Alphas for the Ages 16 Teacher Estimation of Peer Status

		Peer Aggression	Low Peer Status	Total Peer Problems
	N	α	α	α
Age 16	258	.93	.83	.83

Source. Based on data received at the Coordinating Center through July '09.
Only data from the first of the possible two teacher forms per participant are included.

Validity

Table 3 provides correlations between the Age 16 Teacher Estimation of Peer Status mean scores and other select Age 16 outcomes from the Child Behavior and Trauma Symptom Checklists. Significant correlations (ranging from .15 to .74) are found between Teacher Estimation of Peer Status mean scores and these outcome measures.

Table 3. Correlations: Age 16 Teacher Estimation of Peer Status and Select Outcomes

	Teacher Report Form			Child Behavior Checklist		
Estimation of		Total			Total	
Peer Status	N	Problems	Aggression	N	Problems	Aggression
Peer Aggression	249	.60***	.74***	252	.15*	.17**
Low Peer Status	250	.36***	.25***	254	.30***	.21***
Total Problems	250	.58***	.56***	254	.32***	.26***

Source. Based on data received at the Coordinating Center through July '09.
Only data from the first of the possible two teacher forms per participant are included.
** $p < .01$, *** $p < .001$

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Teacher's Report Form
Achenbach, T.
1991

Description of Measure

Purpose
To obtain teacher's perception of child's academic performance, adaptive functioning and problem behavior in a standardized format.

Conceptual Organization
The first section of the Teacher Report Form (TRF) requests background information, ratings of academic performance, and ratings of four aspects of adaptive functioning. The remaining 113 items comprise a problem behavior checklist. The TRF is a complement measure to the Child Behavior Checklist (CBCL; Achenbach, 1991) and the Youth Self Report (YSR; Achenbach, 1991). The problem behavior items measure three broad-band scales: Internalizing, Externalizing, and Total Problems, and eight syndrome scales that are identical to those in the CBCL: Withdrawal, Somatic Problems, Anxiety/Depression, Social Problems, Thought Problems, Attention Problems, Delinquent Behavior, and Aggressive Behavior. The Internalizing scale is comprised of the Social Withdrawal, Somatic Complaints and Anxiety/Depression subscales. The Externalizing Problems scale includes the Delinquent Behavior and Aggressive Behavior subscales.

Item Origin/Selection Process
Problem items were derived from research, consultation with professionals and parents, and there were successive revisions based on findings from numerous pilot studies. The "cross-informant" measures of behavioral syndromes (CBCL, TRF, YSR) were obtained from evaluation of multiple principal components analyses using the 89 items common to all three forms. For a complete description of item derivation for the TRF, see the *Manual for the Teacher's Report Form and 1991 Profile* (Achenbach, 1991).

Materials
Copyrighted forms and scoring manuals are available from the publisher.

Time Required
10 minutes

Administration Method
Self-administered.

Training
None

Scoring

Score Types
Individual problem behavior items are scored as follows: not true (0), somewhat or sometimes true (1), or very true or often true 2). If two responses are circled, the item is given a score of 1. Items use the timeframe of "in the last two months."

Total scores may be computed for Academic Performance, Adaptive Functioning, Behavior Problems, Internalizing Problems, and Externalizing Problems, plus scores for each of the 8 syndrome scales. A global index of adaptive functioning can be obtained by summing the scores of 4 items in section VIII. A global score of current school performance can be obtained by computing the mean of individual current school performance scores. The Total Problem score is computed by summing all items on pages 3 and 4 of the instrument. The Total Behavior Problems scale is not to be scored if more than 8 items are missing, excluding items 56h and 113 (see Manual, Appendix A). Raw scores for each of the TRF scales can be converted to T scores that are based on percentiles for a normative sample. T scores indicate how a particular scale score compares with the score obtained from children in the normative sample within the same broad age range. A computer program available from the publisher converts raw scores to T scores.

Score Interpretation
For the Academic Performance and Adaptive Functioning scales, assigned T scores are truncated at 35 and 65 (with a mean score of 50) to reduce gaps and to prevent over-interpretation of differences at the extremes of the distributions (Achenbach 1991). For 12 -18 year olds, scores of 37-40 are considered borderline, and scores of 36 or less are considered clinical. Higher scores indicate better performance/functioning.

For the syndrome scales, T scores less than 67 are considered in the normal range, T scores ranging from 67-70 are considered to be borderline clinical, and T scores above 70 are considered to be in the clinical range. For Total Problems, Externalizing, and Internalizing groupings, T scores less than 60 are considered to be in the normal range, while 60-63 represent borderline scores and a score greater than 63 is considered to be in the clinical range.

For statistical analyses of the adaptive functioning and syndrome scales, it may be preferable to use the raw scale scores, which reflect all the variation in the sample without any truncation or transformation of the data. T scores are not truncated for the Internalizing, Externalizing, and Total Problem scores however; therefore the results using T scores should be similar to those using raw scores for these broadband scales (Achenbach, 1991).

All users of the TRF should consult the *Manual for the Teacher's Report Form and 1991 Profile* (Achenbach, 1991)

Norms and/or Comparative Data

Norms and comparative data are presented in the *Manual for the Teacher Report Form and 1991 Profile* (Achenbach, 1991).

Psychometric Support

Reliability
The test-retest reliability was found to be high over a mean interval of 15 days with a mean correlation of .90 for Academic Performance and Adaptive Functioning scores and .92 for the Total Problems score (Achenbach, 1991).

Inter-rater reliability was good for teachers seeing children under different conditions; specifically, r = .55 (Academic Performance and Adaptive Functioning), r = .53 (Total Problems). Cronbach's alpha coefficients for the scales ranged from r = .63 (Thought Problems, 5-11 year old girls) to r = .97 (Aggressive Behavior, 12-18 year old girls) (Achenbach, 1991). Achenbach has argued the Cronbach's Alpha is not an appropriate measure for the internal consistency of the TRF, YSR, or CBCL forms, because they are broad screeners, designed to pick up many different behaviors, thus individual items would not be expected to predict the total instrument score (David Jacobowitz, personal communication, 2002). Similarly, a particular syndrome might be indicated by different "symptoms" for different children. Thus, a low Alpha may not indicate a poor instrument, only that there may be more than one way to measure the same underlying problem syndrome (David Jacobowitz, personal communication, 2002).

Validity
The TRF manual (Achenbach, 1991) presents several kinds of evidence for the validity of the TRF showing that the item scores, the syndrome scores, and the clinical cut points all significantly discriminate between demographically matched students referred for services and non-referred students.

LONGSCAN Use

Data Points
Ages 6, 8, 10 (optional), 12, 14, and 16

Respondent
Teacher

Mnemonics and Versions

Forms
Age 6: TRFA
Ages 8 & 10: TRA
Ages 12-16: TRFA (the Midwestern and Southern sites did not administer the TRFA at Age 16)

Data Sets
TRFM (includes all ages)
TRFS (scored data for all ages)

Rationale
To obtain a complete and reliable assessment of the child's adaptive and problem behavior, it is important to have multiple informants and measures that may be used longitudinally. The TRF is perhaps the most widely used teacher report measure of these constructs. The existence of a comparable parent report (CBCL) and Youth Self-Report (YSR) allows us to look at the child's behavior from different viewpoints using a similar measure.

Administration and Scoring Notes
After obtaining parental consent, all teacher respondent forms were sent by mail to the subject child's teacher with specific instructions for completion and remittance. Incentives for participation and the completion/return rate differed by study site.

Results

Descriptive Statistics

For descriptive statistics of the age 4 -14 Teacher Report Form, please refer to earlier age-specific volumes of the measures manuals (Hunter et al., 2003; Knight et al. 2008). Table 1 displays descriptive statistics for select TRF scales from the Age 16 interview, by child's gender and study site. Seventeen percent of the sample was considered to be borderline/clinical on the aggression subscale and while 19% were considered borderline/clinical for the delinquency subscales. A higher percentage of males were considered borderline/clinical on each of the subscales presented.

Table 1. Age 16 TRF: Subscale Scores

		Aggression		Attention Problems		Anxiety/ Depression		Delinquency		Social Problems	
	N	%	M (SD)	%	M (SD)	%	M (SD)	%	M (SD)	%	M (SD)
Overall	214	16.7	58.3 (9.5)	10.8	57.3 (6.9)	9.0	55.0 (7.2)	18.9	58.0 (8.3)	7.7	56.3 (6.7)
Gender											
Male	101	9.9	58.8 (9.6)	5.9	57.7 (6.6)	4.9	55.6 (8.0)	9.9	59.3 (8.2)	4.5	57.1 (6.7)
Female	113	6.7	57.8 (9.5)	4.9	57.0 (7.1)	4.0	54.5 (6.5)	9.0	56.9 (8.2)	3.2	55.7 (6.6)
Study Site											
EA	22	1.8	60.2 (13.7)	0.9	56.5 (8.8)	1.3	55.6 (8.4)	3.1	61.6 (12.1)	0.9	56.4 (7.6)
SW	100	5.9	58.1 (8.4)	5.4	57.7 (6.5)	4.1	55.3 (7.9)	6.3	57.8 (7.1)	3.1	55.9 (6.1)
NW	100	9.0	58.0 (9.6)	4.5	57.1 (6.9)	3.6	54.5 (6.3)	9.5	57.5 (8.3)	3.6	56.8 (7.1)

Source. Based on data received at the Coordinating Center through July '09.
% represents youth with T scores in the borderline/clinical (>= 67) range

Table 2 displays descriptive statistics for the TRF total scales and academic T scores from the Age 16 interview, by youth's gender and study site. Overall, T scores are highest on the externalizing problems scale (40% were considered borderline/clinical) among the Internalizing, Externalizing and Total Problems Scales. Teachers rated 33% of participants as borderline/clinical on the Academic Performance Scale.

Table 2. Descriptive Statistics for the Age 16 Teacher Report Form T scores by Demographics

		Internalizing Problems		Externalizing Problems		Total Problems		Academic Performance		
	N	%	M (SD)	%	M (SD)	%	M (SD)	N	%	M (SD)
Overall	214	22.5	52.7 (10.1)	40.1	56.3 (11.0)	36.5	56.5 (10.2)	192	33.3	44.4 (8.7)
Gender										
Male	101	12.2	53.0 (10.7)	20.3	57.3 (10.8)	18.9	57.2 (10.5)	87	13.5	44.6 (8.7)
Female	113	10.4	52.4 (9.6)	19.8	55.4 (11.1)	17.6	55.9 (9.9)	105	19.8	44.3 (8.7)
Study Site										
EA	22	2.7	54.7 (10.9)	4.0	58.2 (14.6)	3.6	57.9 (12.9)	0	--	--
SW	100	12.6	52.9 (10.7)	19.8	56.8 (9.6)	16.7	56.9 (9.1)	96	14.4	44.3 (7.9)
NW	100	7.2	52.0 (9.3)	16.2	55.4 (11.6)	16.2	55.8 (10.7)	96	18.9	44.5 (9.5)

Source. Based on data received at the Coordinating Center through July '09.
% represents youth who had a T score that is borderline/clinical (/= to 63 on Internalizing, Externalizing and Total Problems Scales, and =/<40 on the Academic Performance Scale.

Reliability

As can be seen in Table 3, internal consistency for the Age 16 Teacher Report Form scales using the LONGSCAN sample was good to excellent (ranging from .79 to .96).

Table 3. Cronbach Alphas for the Age 16 Teacher Report Form T scores

	Aggression α	Attention Problems α	Anxiety/ Depression α	Delinquency α	Social Problems α	Internalizing Problems α	Externalizing Problems α	Total Problems α
Age 16	.96	.92	.90	.79	.82	.92	.96	.96

Source. Based on data received at the Coordinating Center through July '09.

Validity

Table 4 provides correlations between the Age 16 Teacher Report Form T scores and T scores from the CBCL and Trauma Symptom Checklist (Briere, 1996). There are some moderately significant correlations (ranging from .21 to .28).

Table 4. Correlations between Age 16 Teacher Report Form T Total Scores & other Select Age 16 Outcomes

	N	Internalizing Problems	Externalizing Problems	Total Problems
Trauma Symptom Checklist	195			
Anger		.21**	.21**	.21**
Anxiety		.11	.04	.04
Depression		.09	.08	.08
PTSD		.11	.09	.09
Dissociation		.03	.03	.03
Child Behavior Checklist				
Internalizing Problems		.21**	.19**	.19**
Externalizing Problems		.21**	.27***	.27***
Total Problems		.27***	.28***	.28***

Source. Based on data received at the Coordinating Center through July '09.

* <.05, ** <.01, *** <.001

Publisher Information

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Jacobowitz, D. Personal communication, February 26, 2002. *See also* http://www.uvm.edu/~djacobow/.

Tobacco, Alcohol and Drugs
LONGSCAN
2000

Description of Measure

Purpose
To obtain adolescent self report of tobacco, alcohol, and drug use, and involvement in activities related to drug sales.

Conceptual Organization
Whether or not an adolescent has used a specific substance in the last year is assessed with a single item, which, if endorsed, is followed up with items assessing extent of use in last year and in the last thirty days. Drugs queried include marijuana, cocaine, LSD and other hallucinogens, heroin or methadone, Ecstasy, PCP, inhalants, stimulants, tranquilizers, steroids and "other prescription drugs not prescribed by a physician". Involvement in drug sales is assessed with items including having been asked to sell, carry, or deliver illegal drugs, and having done so.

Item Origin/Selection Process
Items were project-developed following review of the substance use items found in the Youth Risk Behavior Survey (Centers for Disease Control), Monitoring the Future Study (University of Michigan) and the CHAMPS Study (Black, M. M., Laliberte, J., & Santelli, J. F., 1999). Pilot testing across the five LONGSCAN sites helped refine the street names for drugs surveyed in the measure.

Materials
A-CASI delivery system

Time Required
1-2 minutes

Administration Method
A-CASI

Training
Minimal training is required given that the measure is delivered in an A-CASI format**.**

Scoring

Individual items. Summative indexes can be created by combining responses across substances.

LONGSCAN Use

Data Points
Ages 16

Respondent
Adolescent

Mnemonic and Version
TADA (Age 16)

Rationale
Substance use and involvement in drug carrying or sales are poor outcomes for 16 year-olds, and many studies have found that a history of being maltreated is a risk factor for subsequent substance abuse.

Results

Descriptive Statistics
For descriptive statistics of the Age 12 Adolescent Substance Involvement (ASIA) measure, please refer to the 3rd volume of the measures manuals (Knight et al., 2008). Table 1 provides frequencies for Age 16 use of tobacco, alcohol, and marijuana in the last year, by gender and study site. A large percentage of 16 year-olds report having used alcohol (30%), cigarettes (25%), and marijuana (22%). Larger percentages of SW and NW site samples reported use compared to other sites.

Table 1. Age 16 Use of Cigarettes, Alcohol, and Marijuana in Last Year, by Gender and Site

	Cigarettes			Alcohol			Marijuana		
	N	n	%	N	n	%	N	n	%
Overall	726	183	25.2	724	220	30.4	724	156	21.6
Child's Gender									
Male	342	90	12.4	342	114	15.7	341	83	11.5
Female	384	93	12.8	382	106	14.6	383	73	10.1
Study Site									
EA	147	21	2.9	147	26	3.6	146	19	2.6
MW	108	18	2.5	107	28	3.9	107	17	2.3
SO	111	41	5.6	111	37	5.1	111	25	3.4
SW	178	53	7.3	178	71	9.8	178	49	6.8
NW	182	50	6.9	181	58	8.0	182	46	6.3

Notes . † Item sample sizes vary slightly.
Based on data received at the Coordinating Center through July'09.

Table 2 provides frequencies for Age 16 reports of using other illegal drugs. 4% of the sample report having used other illegal drugs in the last year. Higher percentages of participants from the NW and SW sites reported using other illegal drugs overall.

Table 2. Age 16 Adolescent Use of Other Illegal Drugs in Last Year, by Gender and Site (N = 725)

	Other Illegal Drugs		# of endorsements for Other Illegal Drugs*								
			Crack/ Cocaine	Meth/ Speed/ Crystal/ Uppers	Non-pre-scribed Pres-cription Drug	In-halant	LCD/ Acid	Hash	PCP/ Angel Dust	Ecstasy/ MDA	Other Drugs (non-presc.)
	n	%	n	n	n	n	n	n	n	n	n
Overall	29	4.0	7	8	8	4	2	1	1	5	8
Child's Gender											
Male	16	2.2	3	2	4	2	1	3	0	0	6
Female	13	1.8	4	6	4	2	1	1	1	5	2
Study Site											
EA	3	0.4	0	0	0	0	0	0	0	0	1
MW	2	0.3	0	0	0	0	0	0	0	0	2
SO	5	0.7	0	1	3	0	0	0	0	1	2
SW	10	1.4	4	4	2	3	2	3	1	2	3
NW	9	1.2	3	3	3	1	0	1	0	2	0

Notes. No endorsements were made for: Heroin/Methadone, GHB/Special K, and Steroids.
Illegal drug variables are not mutually exclusive, and participants can endorse more than one illegal drug.
Based on data received at the Coordinating Center through July '09.

Table 3 provides frequencies for Age 16 involvement in drug sales by gender and site. Almost 11% of the sample reported having been asked to sell drags, and seven percent of the sample reported having been asked to deliver drugs (almost twice as many boys than girls). Eight percent had actually delivered/carried drugs in the past year, while six percent had sold drugs in the past year.

Table 3. Frequencies for Age 16 Selling or Delivering Illegal Substances by Gender and Site

	Asked to sell illegal drugs			Sold illegal drugs			Asked to deliver illegal drugs			Delivered/ carried illegal drugs		
	N	n	%	N	n	%	N	n	%	N	n	%
Overall	724	76	10.5	723	46	6.4	723	52	7.2	723	59	8.2
Child's Gender												
Male	341	47	6.5	341	34	4.7	341	32	4.4	341	34	4.7
Female	383	29	4.0	382	12	1.7	382	20	2.8	382	25	3.5
Study Site												
EA	146	14	1.9	146	6	0.8	146	4	0.6	146	4	0.6
MW	107	11	1.5	107	6	0.8	107	8	1.1	107	5	0.7
SO	111	7	1.0	111	2	0.3	111	7	1.0	111	4	0.6
SW	178	25	3.4	178	18	2.5	178	20	2.8	178	27	3.7
NW	182	19	2.6	181	14	1.9	181	13	1.8	181	19	2.6

Notes . † Item sample sizes vary slightly.
Based on data received at the Coordinating Center through July '09.

Publisher Information

The measure is free and available for use after the LONGSCAN Coordinating Center's receipt of a signed User Agreement for LONGSCAN Project-Developed Measures. Further information may be found at http://www.iprc.unc.edu/longscan/.

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Trauma Symptom Checklist for Children
Briere, J.
1996

Description of Measure

Purpose
To assess the effects of childhood trauma through the child's self-report of trauma symptoms. Although designed for use with children ages 8-16, the author reports it may also be utilized with 17 year-olds, with the caution that the wording may be overly simple for this age (Briere, 1996).

Conceptual Organization
The 54-item Trauma Symptom Checklist for Children (TSCC) consists of two validity scales (Under-response and Hyper-response), six clinical scales (Anxiety, Depression, Post-traumatic Stress, Dissociation, Anger, and Sexual Concerns) and eight critical items which examine situations that may require follow -up, such as suicidality (Briere, 1996; Hunter et al, 2003).

Item Origin/Selection Process
Items were selected based on factor analyses and consultation with experts in the field of psychopathology.

Materials
Forms and manual are available from the publisher.

Time Required
10 minutes

Administration Method
May be self- or interviewer-administered in an individual or group setting. Privacy for respondents is required.

Training
Interviewers need to be thoroughly familiar with the manual.

Scoring

Score Types (taken primarily from Briere, 1996, and Hunter et al., 2003)
For each item, the child records the frequency with which the statement pertains to her/him on a 4-point scale ranging from 0 (never) to 3 (almost all the time). Raw scale scores are derived by summing the response values for all items comprising the scale, and then dividing by the number of items in the scale.

Several items appear on more than one scale. Raw scores on each of the scales can range from 0-27/30, depending on the scale. For comparison purposes, raw scale scores can be transformed into standardized T scores using the conversion tables provided in the manual (see Briere, 1996). T scores differ depending on child sex and age.

The TSCC contains eight critical items. The critical items examine problems or issues that may need follow-up or potentially more immediate clinical attention (e.g., potential for harm to self or others; suicidality.). While non-zero responses to critical items do not necessarily indicate risk for any specific negative psychological outcome, they do indicate a need for further inquiry regarding the level or meaning of the response. Scores on critical items are analyzed individually. That is, no total score can be calculated across all critical items.

The TSCC includes two validity scales: Under-response and Hyper-response. The validity scales assess the child's tendency to either deny or over-report symptom items. The Under-response scale (UND) is designed to determine of the child is indiscriminately marking the "0" (never) response. The scale consists of ten items least likely to receive a "0" rating in the normative sample. The UND raw score is calculated by summing the number of 0's the child marked plus the number of UND items to which the child refused to respond. Tables are provided in the manual to convert raw scores to T scores for comparative purposes. The author recommends that subjects with UND T scores greater than or equal to 70 be considered invalid and those ranging from 65 to 70 be viewed and interpreted with caution.

The Hyper-response scale (HYP) is designed to determine of a child is indiscriminately endorsing the "3" (almost all the time) response. The scale consists of eight items to which children in the normative sample infrequently marked 3. HYP raw and T scores are calculated in the same manner as UND raw and T scores. The author recommends that subjects with HYP T scores greater than or equal to 90 be considered invalid, and those ranging from 75 to 89 be interpreted with caution.

Score Interpretation
A higher score reflects greater symptomatology. T scores at or above 65 for any clinical scale are considered clinically significant.

Norms and/or Comparative Data

The TSCC was normed on 3008 children from three non-clinical samples: 53% female; 44% White, 27% Black, and 22% Hispanic. Table 1 shows the normative raw scores for 13-16 year olds in a standardization sample (Briere, 1996).

Table 1. Normative Raw Scores on the TSCC Scales for 13-16 Year Olds

		Anxiety		Depression		Anger		PTSD		Dissociation	
	N	M	(SD)	M	(SD)	M	(SD)	M	(SD)	M	(SD)
Males	1,100+	4.5	(3.9)	4.5	(4.0)	8.3	(6.1)	6.7	(5.1)	6.2	(4.9)
Females	1,200+	7.0	(4.7)	7.9	(5.5)	9.3	(6.3)	9.9	(6.4)	7.9	(5.5)

(Briere, 1996)

Psychometric Support

Reliability
The TSCC clinical scales generally demonstrate good internal consistency reliability, with alpha coefficients for the normative sample ranging from .86 (Depression) to .89 (Anger). The Sexual Concerns α was lower at α =.77. In the normative sample, the alpha reliability for the validity scales was good for UND (α = .85) and moderate for HYP (α = .66). Internal consistency for the clinical scales was also moderate to good in clinical samples (α = .67 to .89) (Briere, 1996).

Validity
Results of the TSCC are congruent with those derived from similar measures, including the CBCL and YSR (Achenbach, 1991)(see Table 4 below), suggesting good concurrent validity. Also, among populations in which trauma symptomatology is expected to be substantial, including children with histories of abuse, scores have been high. Among children receiving treatment for traumatic experiences, scores on the TSCC tend to decrease over time (Lanktree & Briere, 1990; 1995).

LONGSCAN Use

Data Points
Ages 8 (TSCC-Alternate Version), 12, 16

Respondent
Youth

Mnemonic and Version
Item-level dataset: TSA (Age 8), TSCB (Ages 12 & 16)
Scored dataset: TSSS (Ages 8, 12, & 16)

Rationale
LONGSCAN chose to use the TSCC and TSCC-A because they are standardized and valid child self-report measures of internalized distress, and include symptoms associated with post-traumatic stress disorder.

Results

Descriptive Statistics
For descriptive statistics of the Ages 8 and 12 Trauma Symptom Checklist, please refer to the 2nd and 3rd volumes of the measures manuals (Hunter et al., 2003; Knight et al., 2008). Table 2 provides descriptive statistics for the Age 16 Trauma Symptom Checklist T scores. Similar to Age 12, the percentage of LONGSCAN children scoring in the clinical range at Age 16 on clinical scales is low (2-4% range across the T scores presented).

Table 2. Descriptive Statistics for the Age 16 Trauma Symptom Checklist T scores

		Anger		Anxiety		Depression		PTSD		Dissociation	
	N	%*	M (SD)	%	M (SD)	%	M (SD)	%	M (SD)	%	M (SD)
Overall	667	1.9	43.7 (7.6)	2.1	43.7 (7.2)	3.7	44.8 (8.5)	1.9	43.6 (7.9)	2.8	45.1 (8.2)
Gender											
Male	313	1.2	43.5 (7.7)	0.9	44.0 (7.2)	1.6	45.2 (8.9)	0.9	44.1 (7.9)	1.0	45.2 (8.4)
Female	354	0.7	43.9 (7.6)	1.2	43.5 (7.3)	2.1	44.3 (8.1)	1.1	43.2 (7.9)	1.8	45.0 (8.1)
Study Site											
EA	140	0.3	41.8 (6.8)	0.4	41.8 (6.3)	0.6	42.6 (7.1)	0.4	42.3 (7.1)	0.6	43.4 (7.8)
MW	107	0.1	44.4 (8.1)	0.1	43.2 (5.3)	0.1	43.1 (6.1)	0.1	42.9 (7.3)	0.1	44.1 (6.8)
SO	87	0.6	44.6 (9.0)	0.4	44.1 (9.1)	0.6	45.5 (9.6)	0.3	43.8 (9.2)	0.3	44.8 (8.8)
SW	155	0.6	44.7 (7.9)	0.9	45.6 (8.5)	1.7	46.9 (10.6)	0.6	45.4 (8.7)	1.2	47.1 (9.3)
NW	178	0.3	43.5 (6.7)	0.1	43.7 (6.3)	0.7	45.2 (7.6)	0.4	43.5 (7.1)	0.6	45.4 (7.8)

Source. Based on data received at the Coordinating Center through July '09.
*% represents youth who had a T score that is borderline/clinical (<= 65) at age 16.

Reliability

As can be seen in Table 3, internal consistency for the TSCC scales using the LONGSCAN sample was good (ranging from .81 to .88) and comparable to alpha reliabilities reported by the author (Briere, 1996).

Table 3. Cronbach Alphas for the Age 16 Trauma Symptom Checklist T scores

		Anger	Anxiety	Depression	PTSD	Dissociation
	N	α	α	α	α	α
Overall	724	.84	.88	.81	.85	.87

Source. Based on data received at the Coordinating Center through July '09.

Validity

Descriptive Statistics for Trauma Symptom Checklist Validity T Scores

The TSCC includes two validity scales: Under-response and Hyper-response. For the LONGSCAN Age 16 sample, a high percentage (28.5%, n = 190) of youth were considered 'under responders', while less than 1% were considered 'hyper responders' (n = 4).

Table 4 provides correlations between the Age 16 Trauma Symptom Checklist T Scores and Age 16 Child Behavior Checklist (Achenbach, 1991) T Scores. There are significant correlations (ranging from .20 to .33) between Trauma Symptom Checklist T Scores and CBCL Scores.

Table 4. Correlations between Age 16 Trauma Symptom T Scores and Age 16 CBCL T Scores

	N	Anger	Anxiety	Depression	PTSD	Dissociation
Child Behavior Checklist T Scores						
Internalizing Problems	650	.27***	.25***	.29***	.23***	.25***
Externalizing Problems	650	.33***	.22***	.26***	.23***	.20***
Total Problems	650	.31***	.25***	.29***	.25***	.24***

Source. Based on data received at the Coordinating Center through July '09.

* <.05, ** <.01, *** <.001

Publisher Information

Psychological Assessment Resources, Inc.
P.O. Box 998
Odessa, FL 33556
(800) 331-TEST
Website: http://www.parinc.com/product.cfm?ProductID=150

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Lanktree, C. B., & Briere, J. (1990). Early data on the Trauma Symptom Checklist for Children (TSC-C). Paper presented at the annual meeting of the American Psychological Association, Boston, MA.

Lanktree, C. B., & Briere, J. (1995). Outcome of therapy for sexually abused children: A repeated measures study. Child Abuse and Neglect, 19, 1145-1155.

Wide Range Achievement Test: WRAT3, Blue Version
Wilkinson, G. (1993)

Description

The WRAT 3 is a widely used instrument designed to assess an individual's basic academic coding skills necessary to learn reading, spelling, and arithmetic. It intentionally does not assess comprehension, and is thus often used in concert with assessments of comprehension in order to determine learning disabilities. It is age-normed and may be used with individuals aged 5-75. (Wilkinson, 1993)

Conceptual Organization
The three subtests include reading, spelling and arithmetic. The reading subtest assesses an individual's ability to recognize and name 15 letters and pronounce 42 words out of context. Scoring of the reading test is not affected by unusual pronunciations due to regional accents or speech difficulties. The 55-item spelling subtest includes writing one's own name, and writing dictated letters and 40 dictated words. The 55-item arithmetic subtest includes both oral and written sections that are comprised of counting, recognition of letter and number symbols, and computation. A second version of the test, known as the Tan version and considered interchangeable with the Blue, may be used for pre and post-testing. (Wilkinson, 1993)

Item Origin/Selection Process
The author states that the content of the three subtests is very similar to other measures of achievement. Items were chosen to encompass a broad range of abilities and ages. A Rasch analysis confirmed the desired item spread within each subtest and minimized redundancy within any given skill level. (Wilkinson, 1993)

Materials
Examiner's manual, Test form, Profile /Analysis form, plastic reading card, and optional plastic spelling card, pencils with erasers.

Time Required
Typically, administration of all three subtests takes about 30 minutes, although this may vary based on the behavior and skill level of the respondent. Younger children may be assessed more quickly given that they will respond to fewer items. (Wilkinson, 1993)

Administration Method
Refer to the examiner's manual for specific administration instructions. Adequate administration conditions are needed, particularly lack of distractions and an appropriate workspace. The interviewer leads the respondent through each of the appropriate subtests, scoring as the test is administered. Basal and ceiling rules are applied to each test to aid both administration and scoring. (Wilkinson, 1993)

Training

Training requirements for the WRAT3 are moderate. Examiners must be very familiar with basal and ceiling rules (known as the "5/10 rules"), pronunciation guides, timing criteria, correct use of materials, structured prompts, and scoring criteria. Basic training for administration of the WRAT3 may typically be completed in less than two hours (Wilkinson, 1993).

Scoring

Score Types
Raw scores, absolute scores (not age dependent), standard scores (age dependent), grade scores, percentiles and normal curve equivalents may be used in reporting WRAT3 results for each of the three subtests. The author generally recommends the use of absolute, standard or percentiles and normal curve equivalents (Wilkinson, 1993)

Score Interpretation
Standard scores for each of the three subtests range from <45 to >155, with higher scores indicating higher achievement. The author's manual provides the following classification for standard scores:

- 130 & up = Very Superior
- 120-129 = Superior
- 110-119 = High Average
- 90-109 = Average
- 80-89 = Low Average
- 70-79 = Borderline
- 69 & below = Deficient

Norms and/or Comparative Data

The Norm Sample and the Norm Testing Administration procedures are thoroughly described on Pages 27 – 32 of the Administration Manual.

Psychometric Support

For information such as item statistics, item bias, reliability, validity, and standard errors of measurement, see Pages 165 – 185 of the Administration Manual.

LONGSCAN Use

Data Points
Age 12: Reading and Arithmetic subtests
Age 16: Reading subtest.

Respondent
LONGSCAN participant child/adolescent.

Mnemonic and Version
WRAA (Age 12)
WRAB (Age 16)
WRAS (scored data)

Rationale
The WRAT3 is a well-known and respected instrument with proven assessment capabilities that can be administered by trained interviewers. LONGSCAN's initial use of the WRAT3 reading test at Age 12 was not only to assess achievement, but to help determine a child's ability to use the A-CASI system.

Administration and Scoring Notes
Raw scores, absolute scores (not age dependent), and standard scores (age dependent) are used by LONGSCAN.

Results

Descriptive Statistics
For descriptive statistics of the Age 12-14 WRAT3 scores, please refer to the 3rd volume of the measures manuals (Knight et al. 2008). Table 1 provides descriptive statistics for the Age 16 WRAT3 raw and standard reading scores by sample gender and study site. Western sites (SW and NW) scored higher on reading scores than all other sites.

Table 1. Age 16 WRAT3 Reading Scores by Gender and Study Site

	Reading			
	Raw Score		Standard Score	
	N	M (SD)	N	M (SD)
Overall	707	40.3 (8.0)	691	92.4 (15.8)
Gender				
Male	333	39.9 (8.4)	327	91.5 (17.0)
Female	374	40.7 (7.6)	364	93.1 (14.6)
Study Site				
EA	152	37.1 (8.8)	145	85.4 (17.8)
MW	80	36.7 (7.0)	77	85.7 (14.4)
SO	111	39.5 (8.8)	109	90.7 (16.7)
SW	182	42.8 (7.1)	178	97.3 (12.4)
NW	182	42.6 (6.4)	182	96.8 (13.8)

Source. Based on data received at the Coordinating Center through July '09.

Correlations with Outcome Measures

Table 2 provides correlations between the Age 16 WRAT3 scores and select Age 16 outcomes. No significant correlations where found between the WRAT3 reading scores and TSC scores, however there were some minor associations found between the WRAT3 scores and the CBCL externalizing and total problem T scores, as well as more significant associations with the CBCL Social Competency T Scores (ranging from .16 to .25).

Table 2. Correlations between Age 16 WRAT3 Scores & Select Age 16 Outcomes

	Reading			
	N	Raw Score	N	Standard Score
Trauma Symptom Checklist				
Anger	620	-.02	612	-.01
Anxiety	620	.03	612	.05
Depression	620	-.03	612	-.03
PTSD	620	.04	612	.05
Dissociation	620	.04	612	.07
Child Behavior Checklist				
Internalizing Problems	673	-.06	660	-.04
Externalizing Problems	673	-.06	660	-.08*
Total Problems	673	-.09*	660	-.09*
SCI: Activity Scale	646	.21***	633	.21***
SCI: Social Scale	644	.17***	631	.16***
SCI: School Scale	590	.23***	580	.23***
SCI: Total Competency	588	.25***	578	.25***

Source. Based on data received at the Coordinating Center through July '09.
SCI = Social Competency Items; Total Competency combines the other 3 scales.
* <.05

Publisher Information

Wide Range, Inc.
15 Ashley Place, Suite 1A
Wilmington, Delaware 19804-1314
(302) 652-4990

Ordering Information

Psychological Assessment Resources, Inc.
16204 N. Florida Avenue
Lutz, FL 33549
(800) 331-8378
www.parinc.com

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Youth Demographics
LONGSCAN, 2000

Description of Measure

Purpose
This measure is designed to collect demographic information from 16 year-old respondents.

Conceptual Organization
This measure is intended to collect demographic information from all 16 year-old respondents, and includes an expanded set of items for those who are not currently living with a caregiver. Domains included are: place of residence, marital status, race/ethnicity, and educational achievement and current school status. Items specific to respondents who are not living with a caregiver, and are living with a spouse or partner, include: partner's age, gender and educational achievement and current school status, partner/spouse's employment status; overall household income; number of people dependent upon household income; and household density as measured by rooms divided by number of inhabitants.

Item Origin/Selection Process
Items parallel those in the LONGSCAN caregiver report of demographics.

Materials
A-CASI delivery system

Time Required
1 minute

Administration Method
A-CASI

Training
Minimal training.

Scoring
Individual items may be utilized.

LONGSCAN Use

Data Points
Ages 16

Respondent
Adolescent

Mnemonic, Version and Dataset
YDEA: Age 16

Rationale
16 year-olds may not be living with a caregiver, and therefore may be the sole source for demographic information. Additionally, there are specific variables that were important to ask the adolescent rather than the caregiver, such as adolescent's race or ethnicity.

Results

Descriptive Statistics

Table 1 illustrates that 97% of respondents lived with a parent or someone like a parent, while only 1% lived with a partner. Almost all reported that they were 'single, never married.' *Follow-up demographic data on spouses/partners is not available in the LONGSCAN dataset.*

Table 1. Presence of Parent/Caregiver in Household and Adolescent Marital Status at Age 16

	Currently living with a parent, or someone who acts like a parent to you?		Married or living with a partner at any time during the last year?		What is your current legal marital status?			
						Married	Single, never married	Widowed
	N	%Yes (n)	N	%Yes (n)	N	% (n)	% (n)	% (n)
Overall	757	96.8 (733)	752	1.2 (9)	755	0.4 (3)	99.3 (750)	0.3 (2)
Child's Gender								
Male	357	45.2 (342)	356	0.3 (2)	357	0.1 (1)	47.0 (355)	0.1 (1)
Female	400	51.7 (391)	396	0.9 (7)	398	0.3 (2)	52.3 (395)	0.1 (1)
Study Site								
EA	151	19.8 (150)	150	0.3 (2)	150	0.0 (0)	19.9 (150)	0.0 (0)
MW	109	14.4 (109)	107	0.1 (1)	108	0.3 (2)	14.0 (106)	0.0 (0)
SO	117	14.8 (112)	116	0.0 (0)	117	0.0 (0)	15.5 (117)	0.0 (0)
SW	198	24.2 (183)	197	0.4 (3)	198	0.1 (1)	26.1 (197)	0.0 (0)
NW	182	23.6 (179)	182	0.4 (3)	182	0.0 (0)	23.8 (180)	0.3 (2)

Notes. Based on data received at the Coordinating Center through July'09.

Tables 2a-b: A large proportion of the sample is made up of Black/African American (61%) and White (39%) adolescents, followed by Latino/Hispanic (13%) and Native Americans (10%). Respondents were asked to endorse all groups that described their racial or ethnic origin, and therefore categories are not mutually exclusive.

Table 2a. Race/Ethnicity at Age 16 (N = 757)

	Black African/ American	White	Latino/ Hispanic/ Latin American	Asian Indian / South Asian	Chinese	Filipino	Japanese	Korean
	% (n)	% (n)	% (n)	% (n)	% (n)	% (n)	% (n)	% (n)
Overall	60.9 (461)	39.1 (296)	13.2 (100)	0.3 (2)	0.3 (2)	1.3 (10)	0.8 (6)	0.1 (1)
Child's Gender								
Male	28.7 (217)	18.8 (142)	5.7 (43)	0.1 (1)	0.1 (1)	0.4 (3)	0.4 (3)	0.1 (1)
Female	32.2 (244)	20.3 (154)	7.5 (57)	0.1 (1)	0.1 (1)	0.9 (7)	0.4 (3)	0.0 (0)
Study Site								
EA	19.3 (146)	1.1 (8)	0.0 (0)	0.1 (1)	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)
MW	9.5 (72)	3.4 (26)	2.8 (21)	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)
SO	10.7 (81)	4.9 (37)	0.1 (1)	0.1 (1)	0.1 (1)	0.1 (1)	0.1 (1)	0.1 (1)
SW	12.2 (92)	11.5 (87)	7.5 (57)	0.0 (0)	0.1 (1)	0.3 (2)	0.3 (2)	0.0 (0)
NW	9.2 (70)	18.2 (138)	2.8 (21)	0.0 (0)	0.0 (0)	0.9 (7)	0.4 (3)	0.0 (0)

Notes. Based on data received at the Coordinating Center through July'09.

Table 2b. Race/Ethnicity at Age 16 (N = 757) - continued

	Vietnamese	Other Asian	Native American / American Indian	Inuit/Eskimo/ Aleut	Hawaiian	Pacific Islander	Other
	% (n)	% (n)	% (n)	% (n)	% (n)	% (n)	% (n)
Overall	0.5 (4)	0.3 (2)	10.3 (78)	0.4 (3)	0.7 (5)	1.2 (9)	2.9 (22)
Child's Gender							
Male	0.4 (3)	0.3 (2)	4.2 (32)	0.3 (2)	0.3 (2)	0.7 (5)	1.2 (9)
Female	0.1 (1)	0.0 (0)	6.1 (46)	0.1 (1)	0.4 (3)	0.5 (4)	1.7 (13)
Study Site							
EA	0.0 (0)	0.0 (0)	1.1 (8)	0.0 (0)	0.0 (0)	0.1 (1)	0.3 (2)
MW	0.1 (1)	0.1 (1)	0.7 (5)	0.0 (0)	0.1 (1)	0.1 (1)	0.7 (5)
SO	0.3 (2)	0.1 (1)	0.4 (3)	0.1 (1)	0.1 (1)	0.1 (1)	0.1 (1)
SW	0.1 (1)	0.0 (0)	2.6 (20)	0.0 (0)	0.0 (0)	0.4 (3)	0.5 (4)
NW	0.0 (0)	0.0 (0)	5.6 (42)	0.3 (2)	0.4 (3)	0.4 (3)	1.3 (10)

Notes. Based on data received at the Coordinating Center through July'09.

Table 3 provides frequencies for school status and educational achievement at Age 16, by gender and study site. Ninety-eight percent of respondents attended school in the last year and 90% were currently going to school, while 17% had dropped out. The sample average for highest grade passed/completed was the 9th grade.

Table 3. School Status and Educational Achievement

	Did you attend school in the last year?		Are you currently going to school?		Have you dropped out of school?		Highest grade that you have passed or completed?	
	N	%Yes (n)	N	%Yes (n)	N	%Yes (n)	N	M (SD)
Overall	756	98.3 (743)	756	89.6 (677)	79	16.5 (13)	746	9.2 (1.3)
Child's Gender								
Male	356	46.6 (352)	356	42.7 (323)	33	7.6 (6)	351	9.2 (1.3)
Female	400	51.7 (391)	400	46.8 (354)	46	8.9 (7)	395	9.3 (1.4)
Study Site								
EA	151	19.3 (146)	151	18.1 (137)	14	3.8 (3)	151	9.2 (1.2)
MW	109	14.1 (107)	109	14.0 (106)	3	1.3 (1)	109	9.0 (0.6)
SO	117	14.8 (112)	117	13.4 (101)	16	8.9 (7)	115	8.7 (2.5)
SW	198	26.1 (197)	198	22.7 (172)	26	0.0 (0)	198	9.7 (1.0)
NW	181	23.9 (181)	181	21.3 (161)	20	2.5 (2)	173	9.2 (0.7)

Notes. Based on data received at the Coordinating Center through July'09.

Publisher Information

The project developed items are free and available for use upon the receipt of a signed User Agreement for LONGSCAN Project-Developed Measures available at: www.iprc.unc.edu/longscan/

Youth Employment
LONGSCAN

Description of Measure

Purpose
To assess the number of hours per week an Age 16 respondent is engaged in paid employment.

Conceptual Organization
The typical number of hours per week worked for pay during a typical week is assessed. Separate items are asked of youth in school and those not in school.

Item Origin/Selection Process
Items were project developed following a review of the literature of the risks and benefits specific hours per week of employment posed to youth.

Materials
A-CASI delivery system

Time Required
1 minute

Administration Method
A-CASI

Training
Minimal training.

Scoring
Individual items may be utilized.

LONGSCAN Use

Data Points
Ages 16

Respondent
Youth

Mnemonic and Version
EMPA: Age 16

Rationale
Working may pose both risks and benefits to youth. Working more than 20 hours per week while in school has been found to be related to a number of poor outcomes, including school drop-out, lower grades and engagement in fewer extra-curricular activities.

Results

Descriptive Statistics

Table 1 provides frequencies relating to youth employment at Age 16, by demographics. Seventy-two percent of adolescents reported that they did not work during a typical week.

Table 1. Frequencies for Youth Employment at Age 16

		In a typical week, how many hours do you spend working for pay?						
	N	0 hours, I don't work for pay % (n)	1 to 9 hours % (n)	10 to 14 hours % (n)	15 to 20 hours % (n)	21 to 34 hours % (n)	35 or more hours % (n)	M (SD)
Overall	687	71.5 (491)	14.3 (98)	5.1 (35)	4.9 (34)	2.5 (17)	1.7 (12)	0.6 (1.1)
Child's Gender								
Male	327	32.2 (221)	7.3 (50)	3.3 (23)	2.5 (17)	1.3 (9)	1.0 (7)	0.7 (1.2)
Female	360	39.3 (270)	7.0 (48)	1.7 (12)	2.5 (17)	1.2 (8)	0.7 (5)	0.5 (1.1)
Study Site								
EA	139	14.8 (102)	2.0 (14)	1.7 (12)	1.0 (7)	0.4 (3)	0.1 (1)	0.5 (1.1)
MW	104	12.7 (87)	1.0 (7)	0.3 (2)	0.6 (4)	0.3 (2)	0.3 (2)	0.4 (1.1)
SO	109	12.1 (83)	1.7 (12)	0.9 (6)	0.6 (4)	0.4 (3)	0.1 (1)	0.5 (1.1)
SW	171	17.5 (120)	2.9 (20)	1.3 (9)	1.5 (10)	0.9 (6)	0.9 (6)	0.7 (1.3)
NW	164	14.4 (99)	6.6 (45)	0.9 (6)	1.3 (9)	0.4 (3)	0.3 (2)	0.6 (1.0)

Notes. Based on data received at the Coordinating Center through July'09.

Data from items 1b and 2 are not reported above, as the skip pattern in the form, did not appear to function properly and the results may be misleading.

Publisher Information

The project developed items are free and available for use upon the receipt of a signed LONGSCAN Measurement Agreement.

Youth Peer Victimization

LONGSCAN, 1998

Description of Measure

Purpose
To assess the nature and extent of a youth's peer victimization in adolescence.

Conceptual Organization
Domains assessed include bullying, and physical and sexual victimization by peers, including sibling, dating, and other peer victimization.

Item Origin/Selection Process
The initial item was a modified version of the bullying item from the Juvenile Victimization Questionnaire (Finkelhor, D., Hamby, S.L., Ormrod, R., Turner, H., 2005). Subsequent items were project developed and intended to map with the LONGSCAN self-report of physical and sexual abuse items. Follow-up items assess frequency and perpetrator.

Materials
LONGSCAN utilized an A-CASI administration.

Time Required
5 minutes

LONGSCAN Administration Method
A-CASI

Training
Minimal

Scoring

There is no recommended scoring.

LONGSCAN Use

Data Points
Ages 16

Mnemonic and Version
YPVA (Age 16)

Respondent
Adolescent

Results

Descriptive Statistics

Table 1 provides frequencies for the adolescent's report of bullying at the Age 16 interview, by gender and study site. Twenty eight percent of the sample reported being bullied at least 1 time between ages 12 and 16.

Table 1. Age 16 Experienced Bullying, Since Age 12

		Chasing you, trying to scare you, threatening you, grabbing your hair or clothes, or forcing you to go somewhere or do something?			
		Never	1 time	2-3 times	4 or more times
	N	n (%)	n (%)	n (%)	n (%)
Overall	731	528 (72.2)	56 (7.7)	84 (11.5)	63 (8.6)
Child's Gender					
Male	346	262 (35.8)	25 (3.4)	36 (4.9)	23 (3.1)
Female	385	266 (36.4)	31 (4.2)	48 (6.6)	40 (5.5)
Study Site					
EA	146	123 (16.8)	11 (1.5)	10 (1.4)	2 (0.3)
MW	120	93 (12.7)	5 (0.7)	13 (1.8)	9 (1.2)
SO	108	80 (10.9)	8 (1.1)	13 (1.8)	7 (1.0)
SW	177	111 (15.2)	19 (2.6)	23 (3.1)	24 (3.3)
NW	180	121 (16.6)	13 (1.8)	25 (3.4)	21 (2.9)

Source. Based on data received at the Coordinating Center through February '10.

Table 2 provides frequencies for the adolescent's report of sustaining physical injuries at the Age 16 interview, by gender and study site. Twenty four percent of the sample reported being victimized by a peer in a physical way. Of the 24%, 67% reported bruising, 34% reported being cut, and 16% reported facial injury.

Table 2. Age 16 Peer Physical Victimization since Age 12

	Has another kid physically hurt you?		Bruise you?	Cut you?	Knock you out?	Injury to face?	Made you not breathe?	Drown you?	Broke a bone?	Burn you?	Shot you?	Other Injuries?
	N	Yes n (%)	Yes n	Yes n	Yes n	Yes n	Yes n	Yes n	Yes n	Yes n	Yes n	Yes n
Overall	736	175 (23.8)	118	60	11	29	5	6	9	14	1	23
Child's Gender												
Male	348	84 (11.4)	58	29	7	19	2	3	4	4	0	9
Female	388	91 (12.4)	60	31	4	10	3	3	5	10	1	14
Study Site												
EA	146	22 (2.9)	12	4	0	2	1	0	1	0	0	2
MW	120	18 (2.4)	12	5	1	3	1	0	2	0	0	0
SO	110	19 (2.6)	12	4	1	3	0	1	1	0	1	1
SW	178	59 (8.0)	42	26	5	9	2	3	3	8	0	12
NW	182	57 (7.7)	40	21	4	12	1	2	2	6	0	8

Source. Based on data received at the Coordinating Center through February '10.

Table 3 provides frequencies for the adolescent's report of peer sexual victimization at the Age 16 interview, by gender and study site. Almost 5% of the sampled reported sexual victimization by a peer.

Table 3. Age 16 Peer Sexual Victimization since Age 12

	Has another kid done sexual things to you when you didn't want them to?		Looked at your private parts?	Touched or Felt your private parts?	Hurt your private parts?	Kissed or put their mouth on your private parts?	Put something in your private parts?	Done something else?
	N	Yes n (%)	Yes n	Yes n	Yes n	Yes n	Yes n	Yes n
Overall	733	36 (4.9)	19	22	5	7	15	9
Child's Gender								
Male	347	3 (0.4)	0	0	0	0	0	0
Female	386	33 (4.5)	19	22	5	7	15	9
Study Site								
EA	146	3 (0.4)	1	1	1	0	1	0
MW	120	2 (0.3)	1	2	1	1	1	1
SO	109	7 (0.9)	5	3	2	2	3	1
SW	177	13 (1.8)	6	8	0	3	7	4
NW	181	11 (1.5)	6	8	1	1	3	3

Source. Based on data received at the Coordinating Center through February '10.

Publisher Information

This measure is free and available for use upon the receipt of a signed User Agreement for LONGSCAN Project-Developed Measures.

References and Bibliography

Finkelhor, D., Hamby, S. L., Ormrod, R., Turner, H. (2005). The Juvenile Victimization Questionnaire: Reliability, validity, and national norms. Journal of Child Abuse & Neglect, 29, 383-412.

Social Support from Non-Parental Adults
LONGSCAN, 1998

Description of Measure

Purpose
This measure is intended to assess youth report of social support received from adults who are not their parents or primary caregivers.

Conceptual Organization
One item asks the youth to identify the non-parental adult "who you feel closest to or who has helped you the most." Five follow-up items assess the level and type of social support this adult provides.

Time Required
1 minute

Administration Method
A-CASI

Training
Minimal

Scoring

An overall social support score is derived using the mean of the five follow-up items (2a-e).

LONGSCAN Use

Data Points
Age 16

Respondent
Youth

Mnemonic and Version
YSSA: Age 16

Rationale
Social support from adult non-family members, and from adult family members other than parents or primary caregivers, is recognized as a protective and promotive factor that contributes to overall adolescent well-being. Support from non-parental adults may be especially helpful to adolescents from maltreating families**.**

Results

Descriptive Statistics

Table 1 provides descriptive statistics for this measure using Age 16 data. Fifty percent of the adolescent sample reported that a grandparent or another relative was their most supportive adult (besides a parent). 19% reported that they did not have a supportive adults besides their parent or guardian.

Table 1. Age 16 Social Support from Non-Parental Adults

	Other than a parent or guardian, who (is the adult) you feel closest to or who has helped you the most?								
	N	Grandfather n (%)	Grandmother n (%)	Another Relative n (%)	Teacher, coach, or other adult at school n (%)	Another Adult n (%)	No one like this n (%)	N	Mean Social Support Score M (SD)
Overall	752	3.9 (29)	19.9 (150)	26.2 (197)	11.0 (81)	20.5 (154)	18.7 (141)	611	3.4 (0.6)
Youth's Gender									
Male	349	2.5 (19)	8.9 (67)	10.8 (81)	4.5 (34)	9.6 (72)	10.1 (76)	273	3.3 (0.7)
Female	403	1.3 (10)	11.0 (83)	15.4 (116)	6.2 (47)	10.9 (82)	8.6 (65)	338	3.5 (0.6)
Study Site									
EA	144	0.8 (6)	5.3 (40)	6.2 (47)	1.5 (11)	2.7 (20)	2.7 (20)	124	3.5 (0.6)
MW	119	1.5 (11)	2.3 (17)	4.6 (35)	1.6 (12)	2.9 (22)	2.9 (22)	97	3.6 (0.5)
SO	116	0.5 (4)	6.5 (49)	3.5 (26)	1.9 (14)	1.2 (9)	1.9 (14)	102	3.4 (0.7)
SW	194	0.5 (4)	3.2 (24)	6.6 (50)	3.3 (25)	7.1 (53)	5.1 (38)	156	3.4 (0.6)
NW	179	0.5 (4)	2.7 (20)	5.2 (39)	2.5 (19)	6.6 (50)	6.2 (47)	132	3.3 (0.7)

Notes. Based on data received at the Coordinating Center through Feburary'10.

Reliability

Internal consistency for the Age 16 Youth Report of Social Support Mean score was good, with Cronbach's Alpha
of .84.

Publisher Information

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