

ICPSR 20240

Collaborative Psychiatric Epidemiology Surveys (CPES), 2001-2003 [United States]

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Processor Notes

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CPES Processor Notes

Revised: 03/25/08

Documentation of CPES instruments

In the interactive documentation, question text, response options, and interviewer instructions for CPES and the three source studies are taken directly from the computer assisted survey instruments. Thus, they reflect what the interviewer saw on the screen. That means that if there were typos in the text they remain in the online documentation.

For example: in the documentation for NLAAS Depression variable D38a_3a (CPES V00935), "In what month did that episode start, the interviewer is instructed to "ENTER YEAR;" and the NCS-R Screening variables SC10_5c1 and SC10_5c2 list "ASPERGER'S DISORDER" as the first response option.

New / updated variables

CPES	Variable Label	NCS-R	NLAAS	NSAL
V09435	Primary / secondary adult in household	X		
CPESCASE	CPES Case ID (regenerated)	X	X	X
VERSION	Version release number	X	X	X

Updates to Pharmacoepidemiology Section

In the dataset released in July 2007, the Pharmacoepidemiology variables were not completely linked across NCS-R, NLAAS, and NSAL. This has been corrected. These variables include:

Med1-reason stop taking: 1st to 6th mention
Med2-reason stop taking: 1st to 4th mention
Med3-reason stop taking: 1st and 2nd mention
Med1-problems took medicine for: 1st to 10th mention
Med2-problems took medicine for: 1st to 9th mention
Med3-problems took medicine for: 1st to 4th mention

Note, however, that for "Med1-reason stop taking: 1st mention" the NCS-R variable (V03031) has not been linked to NLAAS and NSAL (V03011); this was simply overlooked in the harmonization.

Merging the Study Datasets

The CPES dataset contains data merged from the three NCS-R, NLAAS, and NSAL datasets. The data for each study were collected using the Blaise® computer assisted interviewing (CAI) software, which stored question-level metadata (question text, data type, missing data codes, etc.) for each question. After receiving the Blaise® raw data, analysts for each study provided a clean SAS dataset, including added variables, such as the diagnostic variables, which were constructed during study post processing. In order to accommodate such added variables, sections that did not appear in the study instruments were added to the NCS-R, NLAAS, NSAL, and CPES codebooks:

- Supplemental Variables (project ID, case ID, and weights);
- Constructed Demographic Variables; and
- Sections for each type of diagnosis provided by the studies (e.g., DX Adult Separation Anxiety Disorder), with the relevant DSM-IV and/or ICD-10 constructed diagnostic variables.

To facilitate harmonizing and merging the three study datasets, processors created a crosswalk table, with variables from the three datasets, in order of first the NCS-R instrument sections, then NLAAS-specific sections, and finally NSAL-specific sections. For studies where the same sections were asked, any question names that were identical were initially linked. Questions that were not identically named stayed in the order that they appeared in a specific section, but remained unlinked. Through several iterations, processors reviewed question text and code frames. If question text and code frames matched for differently named variables, they were linked, sometimes requiring moving a study question from one section to another for harmonization purposes. If question text or code frames differed substantially across studies, even if the variable names were the same, they were unlinked in the crosswalk table. Some questions with minor differences remained linked and were highlighted in the CPES codebook as having differences. Many of the recodes listed below allowed re-linking and harmonizing variables where the code frames initially differed. Finally, variable labels were reviewed and changed in an effort to make labels consistent across studies.

The crosswalk table was used to merge data from the three studies. Blaise® metadata, information from the crosswalk table, and SAS metadata for constructed variables were combined to create question-level metadata for the CPES merged dataset.

Identity Protection

In preparing data for public release, a number of procedures were performed to ensure that the identity of CPES research subjects could not be disclosed. For example, direct identifiers have been omitted from datasets, some variables deleted, and some characteristics recoded or masked if they could be combined with others to identify individuals.

The disclosure protection allows nearly all of the data to be publicly released, takes into consideration the most likely analytic uses of the data, and helps ensure the confidentiality of records.

Recoded Variables

Certain variables were categorized and recoded so that details possibly leading to identifying an individual research subject would be less likely to do so. Other variables were recoded to harmonize data across the three CPES studies—NCS-R, NLAAS, and NSAL. Recoded variables are listed in the following table, which shows the CPES variable label and study variable names, their original codes and labels, and their recode values and labels.

Variables	Original codes	Recodes
Physical handicap NCS-R: SC10_7A01 SC10_8F01 SC10_8G01 Other variables in the “enter-all-mentions” arrays were dropped as 1 st variable was used as counter	1 PARALYSIS OF LEGS, R IS IN WHEELCHAIR 2 PARALYSIS OF LEGS, R USES A WALKER 3 PARALYSIS OF LEGS, R CAN WALK WITHOUT A WALKER 4 PARALYSIS OF ONE ARM 5 PARALYSIS OF ONE SIDE OF BODY 6 ONE MISSING FOOT 7 TWO MISSING FEET 8 ONE MISSING LEG 9 TWO MISSING LEGS 10 ONE MISSING HAND 11 TWO MISSING HANDS 12 ONE MISSING ARM 13 TWO MISSING ARMS 14 FACIAL DISFIGUREMENT 15 EXTREMELY SMALL HEIGHT 16 EXTREMELY LARGE HEIGHT 17 EXTREME OBESITY 18 OTHER BODY DISFIGUREMENT 19 STUTTERING 20 OTHER (SPECIFY)	1 One physical handicap mentioned 2 Two physical handicaps mentioned 3 Three physical handicaps mentioned 4 Four physical handicaps mentioned Indicates the number of physical handicaps mentioned (maximum number mentioned is four)
Physical illness NCS-R: SC10_5E201- SC10_5E208 SC10_7A201- SC10_7A202 SC10_8F201- SC10_8F205 SC10_8G201- SC10_8G204 Other variables in the “enter-all-mentions” arrays were dropped as 1 st variable was used as counter	1 ARTHRITIS 2 ASTHMA 3 BACK PROBLEMS 4 CANCER 5 CHRONIC FATIGUE SYNDROME 6 CHRONIC LUNG DISEASE 7 (ANY OTHER) CHRONIC PAIN 8 DIABETES/HIGH BLOOD SUGAR 9 EPILEPSY/SEIZURE DISORDER 10 HEADACHES 11 HEART ATTACK 12 HEART DISEASE 13 HIGH BLOOD PRESSURE 14 HIV INFECTION 15 MIGRAINES 16 NECK PROBLEMS	1 ARTHRITIS 2 ASTHMA 3 BACK PROBLEMS 4 CANCER 5 CHRONIC FATIGUE SYNDROME 6 CHRONIC LUNG DISEASE 7 (ANY OTHER) CHRONIC PAIN 8 DIABETES/HIGH BLOOD SUGAR 9 EPILEPSY/SEIZURE DISORDER 10 HEADACHES 11 HEART ATTACK 12 HEART DISEASE 13 HIGH BLOOD PRESSURE 15 MIGRAINES 16 NECK PROBLEMS 17 RHEUMATISM

Variables	Original codes	Recodes
	17 RHEUMATISM 18 SEASONAL ALLERGIES 19 STROKE 20 TUBERCULOSIS 21 ULCER 22 OTHER (SPECIFY)	18 SEASONAL ALLERGIES 19 STROKE 21 ULCER 22 OTHER (SPECIFY) (14, 20)
# times married: Top Code NCS-R: DM17, MR16A NLAAS: MR16A NSAL: E14a-e15a	Continuous	Top Code: 3 or more
# marriages ended in divorce / annulment: Top Code NCS-R: DM19, MR18 NLAAS: MR18	Continuous	Top Code: 3 or more
Age you married 1st time: Top/Bot Code NCS-R: DM20, MR19 NLAAS: MR19	Continuous	Top Code: 42 or more Bottom Code: 14 or less
Age biological mother died NCS-R: DA39a	Continuous	Top Code: 95 or more
Age of mother when you were born NCS-R: DA40	Continuous	Top Code: 46 or more
Age biological father died NCS-R: DA41a	Continuous	Top Code: 90 or more
# living biological children: Top Code NCS-R: DM22, CN1 NLAAS: CN1 NSAL: E23	Continuous	Top Code: 6 or more

Variables	Original codes	Recodes
# other living children incl step/adopted/raised 5+ years +: Top Code	Continuous	Top Code: 6 or more
NCS-R: DM23		
# of living non-biological children: Top Code		
NCS-R: CN2 NLAAS: CN2 NSAL: E24_1		
# brothers and sisters had while grow up, incl step/half: Top Code	Continuous	Top Code: 12 or more
NCS-R: DM1_10		
# full brothers and sisters, alive and dead: Top Code	Continuous	Top Code: 8 or more
NCS-R: DE9_1 NSAL: FH1		
# half/adopted/step brothers and sisters, alive and dead: Top Code	Continuous	Top Code: 9 or more
NCS-R: DE9_5		
# older than you: Top Code	Continuous	Top Code: 12 or more
NCS-R: DM1_11		
# of full brothers or sisters older than you: Top Code	Continuous	Top Code: 8 or more
NCS-R: DE9_4		
# half/adopt/step brothers or sisters older than you: Top Code	Continuous	Top Code: 9 or more
NCS-R: DE9_8		

Variables	Original codes	Recodes
Race/Ancestry Race of spouse/partner: 1 st to 3 rd mention NLAAS SE1301-SE1303	<p>NCS-R</p> <p><u>Main ethnic origin (EO)</u> DA2_01a, 01b (dropped) DM1_03a, 03b, 04a, 04b, 05a, 05b, 06a, 06b (dropped)</p> <p>1 BELIZE 2 CANADA 3 COSTA RICA 4 EL SALVADOR 5 GUATEMALA 6 HONDURAS 7 MEXICO 8 NICARAGUA 9 PANAMA 10 UNITED STATES 11 ARGENTINA 12 BOLIVIA 13 BRAZIL 14 CHILE 15 COLOMBIA 16 ECUADOR 17 FALKLAND ISLAND 18 GUYANA 19 PARAGUAY 20 PERU 21 SURINAME 22 URUGUAY 23 VENEZUELA 24 ALGERIA 25 ANGOLA 26 BENIN 27 BOTSWANA 28 BURKINA FASO 29 CAMEROON 30 CENTRAL AFRICAN REPUBLIC 31 CHAD 32 CONGO 33 COMOROS 34 DJIBOUTI 35 IVORY COAST 36 EGYPT 37 EQUATORIAL GUINEA 38 ERITREA 39 ETHIOPIA 40 GABON</p>	<p>NCS-R: RANCEST</p> <p><u>First Recode</u></p> <p>1 VIETNAMESE (EO=147; RACECAT_=other) 2 FILIPINO (EO=141; RACECAT_=other) 3 CHINESE (EO=128, RACECAT_=other) 4 ALL OTHER ASIAN (EO=122 – 147; DA4 / DM_5_5=Asian) 5 CUBAN (EO=180; RACECAT_=Hispanic; DA1 / DM1_1=Cuban) 6 PUERTO RICAN (EO=190; RACECAT_=Hispanic; DA1 / DM1_1=Puerto Rico) 7 MEXICAN (EO=7; RACECAT_=Hispanic; DA1 / DM1_1=Mexican / Mexican American / Chicano) 8 ALL OTHER HISPANIC (EO=1 – 23; RACECAT_=Hispanic) 9 AFRO-CARIBBEAN (EO=175-199; RACECAT_=Black & EO=9) 10 AFRICAN AMERICAN (EO=10; RACECAT_=Black) 11 NON-LATINO WHITES (EO=76-121) 12 ALL OTHER (RANCEST= 11 and RACECAT_= NOT WHITE)</p> <p><u>Second Recode (Collapse Asian and Hispanic)</u></p> <p>4 ALL OTHER ASIAN (RANCEST = 1, 2, 3, 4) 7 MEXICAN 8 ALL OTHER HISPANIC (RANCEST = 5, 6, 8) 9 AFRO-CARIBBEAN 10 AFRICAN AMERICAN 11 NON-LATINO WHITES 12 ALL OTHER</p> <p>NLAAS: RANCEST</p> <p>1 VIETNAMESE (Asians=1) 2 FILIPINO (Asians=2) 3 CHINESE (Asians=3) 4 ALL OTHER ASIAN (Asians=4) 5 CUBAN (Latinos=2) 6 PUERTO RICAN (Latinos=1) 7 MEXICAN (Latinos=3) 8 ALL OTHER HISPANIC (Latinos=4)</p> <p>NSAL: RANCEST</p> <p>5 CUBAN (Race3cat=Black Caribbean and Maincar=51) 6 PUERTO RICAN (Race3cat=Black Caribbean and Maincar=49) 8 ALL OTHER HISPANIC (Race3cat=Black Caribbean and</p>

Variables	Original codes	Recodes
	41 GHANA 42 GUINEA 43 GUINEA BISSAU 44 KENYA 45 LESOTHO 46 LIBERIA 47 LIBYA 48 MADAGASCAR 49 GAMBIA 50 MALI 51 MAURITANIA 52 MOROCCO 53 MOZAMBIQUE 54 NAMIBIA 55 NIGER 56 NIGERIA 57 DEMOCRATIC REP. OF THE CONGO 58 REUNION 59 RWANDA 60 SENEGAL 61 SIERRA LEONE 62 SOMALIA 63 SOUTH AFRICA 64 SUDAN 65 SWAZILAND 66 TANZANIA 67 TOGO 68 TUNISIA 69 UGANDA 70 WESTERN SAHARA 71 ZAMBIA 72 ZIMBABWE 73 MALAWI 74 SAO TOME AND PRINCIPE 75 WALLIS AND FATUNA 76 ALBANIA 77 AUSTRIA 78 BELGIUM 79 BOSNIA AND HERZEGOVINA 80 BULGARIA 81 CROATIA 82 CYPRUS 83 CZECH REPUBLIC 84 DENMARK 85 ESTONIA 86 ENGLAND	Maincar=8,21,50,52-55) 9 AFRO-CARIBBEAN (other Race3cat=Black Caribbean) 10 AFRICAN AMERICAN (Race3cat=African American) 11 NON-LATINO WHITES (Race3cat=White)

Variables	Original codes	Recodes
	87 FINLAND	
	88 FRANCE	
	89 GERMANY	
	90 GIBRALTAR	
	91 GREECE	
	92 GREENLAND	
	93 HUNGARY	
	94 ICELAND	
	95 IRELAND	
	96 ITALY	
	97 LATVIA	
	98 LITHUANIA	
	99 LUXEMBOURG	
	100 MONACO	
	101 MACEDONIA	
	102 NETHERLANDS	
	103 NEW CALEDONIA	
	104 NORWAY	
	105 POLAND	
	106 PORTUGAL	
	107 ROMANIA	
	108 SERBIA	
	109 SCOTLAND	
	110 SLOVAKIA	
	111 SLOVENIA	
	112 SPAIN	
	113 SWEDEN	
	114 SWITZERLAND	
	115 TURKEY	
	116 MONTENEGRO	
	117 MALTA	
	118 ISLE OF MAN	
	119 ANDORRA	
	120 FAROE ISLAND	
	121 LIECHTENSTEIN	
	122 AFGHANISTAN	
	123 BANGLADESH	
	124 BHUTAN	
	125 BRUNEI	
	126 BURMA / MYANMAI	
	127 CAMBODIA	
	128 CHINA	
	129 FEDERATED STATES OF MICRONESIA	
	130 GUAM	
	131 HONG KONG	
	132 INDIA	

Variables	Original codes	Recodes
	133 INDONESIA 134 JAPAN 135 LAOS 136 MALAYSIA 137 MONGOLIA 138 NEPAL 139 NORTH KOREA 140 PAKISTAN 141 PHILIPPINES 142 SINGAPORE 143 SOUTH KOREA 144 SRI LANKA 145 TAIWAN 146 THAILAND 147 VIETNAM 148 ARMENIA 149 AZERBAIJAN 150 BELARUS 151 GEORGIA 152 KAZAKHSTAN 153 KYRGYZSTAN 154 MOLDOVA 155 RUSSIA 156 TAJIKISTAN 157 TURKMENISTAN 158 UKRAINE 159 UZBEKISTAN 160 GAZA STRIP 161 IRAN 162 IRAQ 163 ISRAEL 164 JORDAN 165 KUWAIT 166 LEBANON 167 OMAN 168 QATAR 169 SAUDI ARABIA 170 SYRIA 171 UNITED ARAB EMIRATES 172 WEST BANK 173 YEMEN 174 BAHRAIN 175 ANGUILLA 176 ANTIGUA AND BARBUDA 177 ARUBA 178 BARBADOS	

Variables	Original codes	Recodes
	179 CAYMAN ISLANDS 180 CUBA 181 DOMINICA 182 DOMINICAN REPUBLIC 183 GRENADA 184 HAITI 185 JAMAICA 186 MARIE GALANTE 187 MARTINQUE 188 MONSERRAT 189 NETHERLAND ANTILLES 190 PUERTO RICO 191 ST. BARTHELEMY 192 ST. KITTS AND NEVIS 193 ST. LUCIA 194 ST. MARTIN 195 ST. VICENT AND THE GRENADINES 196 THE BAHAMAS 197 TRINIDAD 198 VIRGIN ISLANDS (BRITISH) 199 VIRGIN ISLANDS (U.S.) 200 AMERICAN SAMOA ISLANDS 201 AUSTRALIA 202 CAPE VERDE 203 COOK ISLAND 204 FIJI 205 FRENCH POLYNESIA 206 JERSEY 207 KIRIBATI 208 MALDIVES 209 MARSHALL ISLANDS 210 MAYOTTE 211 MICRONESIA 212 NEW ZEALAND 213 PALAU 214 PAPUA NEW GUINEA 215 SAMOA ISLANDS 216 SAN MARINO 217 SEYCHELLES 218 SOLOMON ISLANDS 219 TONGA 220 TUVALU 221 VANUATU 222 USA 996 NONE	

Variables	Original codes	Recodes
	<p>NCS-R</p> <p><u>Race (constructed and dropped)</u> <u>RACECAT_</u></p> <ul style="list-style-type: none"> 1 HISPANIC 2 BLACK 3 OTHER 4 WHITE <p>NLAAS</p> <p><u>Asians (constructed and dropped)</u></p> <ul style="list-style-type: none"> 1 VIETNAMESE 2 FILIPINO 3 CHINESE 4 OTHER ASIAN <p><u>Latinos (constructed and dropped)</u></p> <ul style="list-style-type: none"> 1 PUERTO RICAN 2 CUBAN 3 MEXICAN 4 OTHER LATINO <p>NSAL</p> <p><u>Race (constructed and dropped)</u> <u>Race3cat</u></p> <ul style="list-style-type: none"> 1 African American 2 Black Caribbean 3 White <p><u>Main Caribbean Ancestry (constructed and dropped)</u> <u>Maincar</u></p> <ul style="list-style-type: none"> 1 ANGUILLA 2 ANTIGUA, BARBUDA 3 ARUBA 4 BAHAMAS 5 BARBADOS 6 BELIZE 7 BERMUDA 8 BRITISH VIRGIN ISLANDS 10 TORTOLA 12 CAYMAN ISLANDS 13 CAYMAN BRAC 16 DOMINICA (COMMONWEALTH OF) 	

Variables	Original codes	Recodes
	17 FRENCH GUIANA 18 GRENADA, GRENADINES 20 GRENADINES-GRENADA 21 GUADELOUPE 22 GUYANA 23 HAITI 24 JAMAICA 25 MARTINIQUE 26 MONTSERRAT 27 NETHERLANDS ANTILLES 31 ST EUSTATIUS (STATIA) 32 ST MAARTEN 33 ST KITTS-NEVIS 34 ST LUCIA 35 ST VINCENT AND GRENADINES 36 BEQUIA, E.G. 37 GRENADINES-ST VINCENT 38 SURINAME 39 TRINIDAD, TOBAGO 40 TURKS, CAICOS ISLANDS 41 US VIRGIN ISLANDS 42 ST CROIX 44 ST THOMAS 47 W INDIES, N.E.C. 48 BRITISH W INDIES, N.E.C. 49 PUERTO RICO 50 DOMINICAN REPUBLIC 51 CUBA 52 PANAMA 53 COSTA RICA 54 NICARAGUA 55 HONDURAS (GARIFANO) 97 OTHER	
Country in which you were born	NCS-R, NLAAS <u>Born in United States</u> DM_DE4 DM1_6 1 YES 5 NO NSAL <u>US or foreign born?</u> H2 1 USA 2 NOT USA	V05700 (NCS-R DM_DE4, NLAAS DM1_6, NSAL H2) 1 USA 2 OTHER V09382 (NCS-R DM1_6) 1 USA 5 OTHER

Variables	Original codes	Recodes
# times married: Top code NCS-R: DM_MR16a, DM17 MR16a NLASS: MR16a NSAL: e14a_e15a # marriages ended in divorce / annulment NCS-R: DM_MR18, MR18, DM19 NLAAS: MR18	Continuous	Top code: 3 or more
Own home/renting/buying NSAL: H52	1 OWN HOME OR BUYING IT 2 PAYING RENT 3 (IF VOL) NEITHER OWNS NOR RENTS 4 OTH: BANK OWNS, BANKRUPT 5 OTH: LIVE IN CO-OP 7 OTHER	1 OWN HOME 2 DOES NOT OWN HOME (2,3,4,5) 7 OTHER
Highest grade of school/college completed: Top/Bot Code NCS-R: DM1_14 NLAAS: DM1_14 NSAL: H13	Continuous	Top Code: 17 or more Bottom Code: 4 or less
# years school spouse/partner completed: Top/Bot Code NCS-R: DM6, SE2 NLAAS: SE2 NSAL: H16	Continuous	Top Code: 17 or more Bottom Code: 4 or less
# of years school mother completed: Top/Bot Code NCS-R: CH13a # of years school father completed: Top/Bot Code NCS-R: CH8a	Continuous	Top Code: 17 or more Bottom Code: 4 or less

Variables	Original codes	Recodes
Total height-inches: Top-/Top/Bot Code NCS-R: height NLAAS: height NSAL: c16b Weight in pounds: Top/Bot Code NCS-R: weight NLAAS: weight NSAL: c15	Continuous	Round to whole numbers Height: Top Code: 75 or more Bottom Code: 57 or less Weight: Top Code: 300 or more Bottom Code: 100 or less
Religious preference: 1st / 2nd / 3rd mention NCS-R: DM23_101-DM23_102; DA31B_101- DA31B_103 Original codes do not include SCIENTOLOGY; NLAAS: DA31b_01-DA31b_02 NSAL: B1 Religion when growing up: 1st / 2nd / 3rd mention NCS-R: DE20_901- DE20_903 original codes do not include SCIENTOLOGY Other variables in "enter-all-mentions" arrays with no valid values were dropped	1 PROTESTANT, NO DENOMINATION MENTIONED 2 PROTESTANT, INTERDENOMINATIONAL 3 APOSTOLIC 4 ASSEMBLY OF GOD 5 BAPTIST (ALL TYPES) 6 BORN AGAIN CHRISTIAN 7 BRETHREN 8 DISCIPLES OF CHRIST/CHRISTIAN CHURCH 9 CHRISTIAN REFORMED 10 CHURCH OF GOD 11 CONGREGATIONAL 12 EPISCOPALIAN OR ANGLICAN/CHURCH OF ENGLAND 13 EVANGELICAL 14 HOLINESS 15 JEHOVAH'S WITNESS 16 LUTHERAN 17 MENNONITE 18 METHODIST (ALL TYPES, INCLUDING UNITED BRETHREN) 19 MORMON, LATTER DAY SAINTS 20 NAZARENE 21 PENTECOSTAL 22 PRESBYTERIAN 23 QUAKER, SOCIETY OF FRIENDS 24 SALVATION ARMY 25 SANCTIFIED 26 SEVENTH DAY ADVENTIST 27 SPIRITUAL 28 UNITARIAN	1 PROTESTANTISM / PROTESTANT, NO DENOMINATION MENTIONED (1) 2 BAPTIST (ALL TYPES) (5) (NSAL: 56,78) 3 LUTHERAN (16) 4 METHODIST (ALL TYPES, INCLUDING UNITED BRETHREN) (18) 5 PENTECOSTAL (21) 6 PRESBYTERIAN (22) 7 PROTESTANT, OTHER (PLEASE SPECIFY:) (2-4,6-15,17,19,20,23-30) (NSAL: 50-52,54,55,57-62,70,71,75) 8 CATHOLICISM/CATHOLIC, NO DENOMINATION MENTIONED (31) 9 CATHOLIC, ROMAN (32) 10 CATHOLIC (ALL OTHERS) (33-35) 11 AGNOSTIC OR ATHEIST (46) 12 NO RELIGIOUS PREFERENCE (47) 13 NO RELIGION (48) 14 OTHER (SPECIFY) (36-45,49) (NSAL: 53,63-69,72,73,74,76,77,79-85)

Variables	Original codes	Recodes
	29 UNITED CHURCH OF CHRIST 30 PROTESTANT, OTHER (PLEASE SPECIFY) 31 CATHOLIC, NO DENOMINATION MENTIONED 32 CATHOLIC, ROMAN 33 CATHOLIC, UKRANIAN 34 ORTHODOX (RUSSIAN, GREEK,SERBIAN) 35 CATHOLIC (ALL OTHERS) 36 JEWISH, NO DENOMINATION MENTIONED 37 JEWISH ORTHODOX 38 JEWISH CONSERVATIVE 39 JEWISH REFORM 40 JEWISH RECONSTRUCTIONIST 41 JEWISH (ALL OTHERS) 42 BUDDHIST (ALL TYPES,INCLUDING ZEN) 43 HINDU 44 MUSLIM 45 RASTAFARIAN 46 SCIENTOLOGY 46 AGNOSTIC OR ATHEIST 47 NO RELIGIOUS PREFERENCE 48 NO RELIGION 49 OTHER (SPECIFY)	
Respondent current employment situation: 1st / 2nd / 3rd / 4th mention NCS-R: DM201-DM203; EM7_101-EM7_104; NLAAS: EM7_101-EM7_104: Spouse/partner current employment status: 1st / 2nd / 3rd / 4th mention NCS-R DM801-DM804; SE401-SE403 NLAAS SE401-SE403 Other variables in "enter-all-mentions" arrays with no valid values were dropped	1 EMPLOYED 2 SELF-EMPLOYED 3 UNEMPLOYED 4 TEMP LAID OFF 5 RETIRED 6 HOMEMAKER 7 STUDENT 8 MATERNITY LEAVE 9 ILLNESS/SICKLEAVE 10 DISABLED 11 OTHER (SPECIFY) 97 (IF VOL) NEVER WORKED	1 EMPLOYED (1) 2 SELF-EMPLOYED (2) 3 RETIRED (5) 4 HOMEMAKER (6) 5 STUDENT (7) 6 OTHER (3,4,8,9,10,11) 97 (IF VOL) NEVER WORKED (97)

Variables	Original codes	Recodes
D4: Occupation-Bureau Labor Stats-28 MOGs	NCS-R, NLAAS, and NSAL (NSAL used 3-digit 2000 Census codes, which were recoded to the following 2-digit codes):	
NCS-R: Occ28mog NLAAS: Occ28mog NSAL: Occ28mog	1 LEGISLATORS/SENIOR OFFICIALS 2 CORPORATE MANAGERS 3 GENERAL MANAGERS 4 PHYS/MATH/ENG PROF/UNIV DEG 5 LIFE SCI/HLTH PROF/UNIV DEG 6 TEACHING PROF/UNIV DEG 7 OTHER PROF/UNIV DEG 8 PHYS/ENG ASSOC PROF/SME FORMTRN 9 LIFE SCI/HLTH ASSOC PROF/SMEFORM TRN 10 TEACHING ASSOC PROF/SMEFORM TRN 11 OTHER ASSOC PROF/SME FORMTRN 12 OFFICE CLERKS 13 CUST SERV CLERKS 14 PERS/PROT SERV WORKER 15 MODEL/SALES/DEMOS 16 SKILLED AGR/FISH WORK 17 SUBSTINENCE AGR/FISH WORK 18 EXTRACT AND BUILD TRADES 19 METAL/MACHINE/ RELATEDTRADES 20 PREC/HANDI/PRINT/ RELATEDTRADES 21 OTHER CRAFT/ RELATED TRADES 22 STATIONARY PLANT/ RELATEDOPER 23 MACHINE/ASSEMBLY OPER 24 DRIVER/MOBILE PLANT OPER 25 SALES/SERV/ELEMENTARY 26 AGR/FISH/RELATED LABORER 27 MINING/CONS/MANUF/ TRANSLABORER 28 ARMED FORCES 29 OTHER (SPECIFY)	1 CORP/GENERAL MANAGERS (2, 3) 2 PROFESSIONAL (UNIVDEGREE) (4-7) 3 ASSOC PROFESSIONAL (SOMEFML TRAIN) (8-11) 4 OFFICE CLERKS (12) 5 CUST SERV CLERKS (13) 6 PERS/PROT SERV WORKER (14) 7 TRADES WORKERS (18-21) 8 OPERATORS (22-24) 9 PERF ROUTINE TASKS (25-27) 10 OTHER (1, 15, 16, 17, 28, 29)
Kind of work Respondent normally does: Recoded	NCS-R: EM15 NLAAS: EM15 NSAL: D4	
Kind of work Respondent did at last job: Recoded	NCS-R: EM19 NLAAS: EM19 NSAL: D23	
Kind of work spouse/partner does: Recoded	NCS-R: SE9 NLAAS: SE9 NSAL: H17a	
Kind of work spouse/partner did at last job: Recoded	NCS-R: SE7 NLAAS: SE7 NSAL: H17d	
Kind of work father normally did, job title: Recoded	NCS-R: CH11 NSAL: H8	

Variables	Original codes	Recodes
Kind of work mother normally did, job title: Recoded NCS-R: CH16 NSAL: H11a		
Work status 3 categories NCS-R: wkstat3c NLAAS: workstatus NSAL: wkstat3c	<p>NCS-R, NLAAS <u>Current employment situation</u> Em7_1_01 – Em7_1_03 1 EMPLOYED 2 SELF-EMPLOYED 3 LOOKING FOR WORK; UNEMPLOYED 4 TEMPORARILY LAID OFF 5 RETIRED 6 HOMEMAKER 7 STUDENT 8 MATERNITY LEAVE 9 ILLNESS/SICK LEAVE 10 DISABLED 11 OTHER (SPECIFY)</p> <p>NSAL <u>Work Status</u> D1 1 WORKING NOW FULL-TIME 2 WORKING NOW PART-TIME 3 TEMPORARILY LAID OFF 4 MATERNITY LEAVE 5 ILLNESS, SICK LEAVE 6 UNEMPLOYED 7 RETIRED 8 FULL-TIME HOMEMAKER 9 STUDENT 10 PERMANENTLY DISABLED 11 OTHER 12 TEMPORARILY DISABLED</p> <p>Other variables in “enter-all-mentions” arrays with no valid values were dropped</p>	<p>NCSR, NLAAS</p> <p>1 EMPLOYED (1, 2, 8, 9) 2 UNEMPLOYED (3,4) 3 NOT IN LABOR FORCE (5, 6, 7, 10, 11)</p> <p>NSAL</p> <p>1 EMPLOYED (1,2,4,8,9) 2 UNEMPLOYED (3) 3 NOT IN LABOR FORCE (5,6,7,10,11, 12)</p>

Variables	Original codes	Recodes
Kind of place respondent works for, they make/do: Recode NCS-R: EM16 NLAAS: EM16 NSAL: D5	NCS-R, NLAAS, and NSAL (NSAL used 3-digit 2000 Census codes, which were recoded to the following 2-digit codes): 1 AGRICULTURE, HUNTING AND FORESTRY 2 FISHING 3 MINING AND QUARRYING 4 MANUFACTURING 5 ELECTRICITY, GAS ANDWATER SUPPLY 6 CONSTRUCTION 7 WHOLESALE AND RETAIL TRADE 8 HOTELS AND RESTAURANTS 9 TRANSPORT, STORAGE AND COMMUNICATIONS 10 FINANCIAL INTERMEDIATION 11 REAL ESTATE, RENTING AND BUSINESS ACTIVITIES 12 PUBLIC ADMINISTRATION AND DEFENSE 13 EDUCATION 14 HEALTH AND SOCIAL WORK 15 OTHER COMMUNITY, SOCIAL AND PERSONAL SERVICE ACTIVITIES 16 PRIVATE HH W/ EMP PERSONS 17 EXTRA-TERRITORIAL ORGS/BODIES 18 NOT SURE (SPECIFY)	1 AGRICULTURE, HUNTING AND FORESTRY (1) 2 MANUFACTURING (4) 3 ELECTRICITY, GAS ANDWATER SUPPLY (5) 4 CONSTRUCTION (6) 5 WHOLESALE AND RETAIL TRADE (7) 6 HOTELS AND RESTAURANTS (8) 7 TRANSPORT, STORAGE AND COMMUNICATIONS (9) 8 FINANCIAL INTERMEDIATION (10) 9 REAL ESTATE, RENTING AND BUSINESS ACTIVITIES (11) 10 PUBLIC ADMINISTRATION AND DEFENSE (12) 11 EDUCATION (13) 12 HEALTH AND SOCIAL WORK (14) 13 OTHER COMMUNITY, SOCIAL AND PERSONAL SERVICE ACTIVITIES (15) 14 OTHER (2, 3, 16, 17) 15 NOT SURE (SPECIFY) (18)
Kind of place respondent worked for at last job: Recode NCS-R: EM20 NLAAS: EM20 NSAL: D24		
Kind of place spouse/partner works: Recode NCS-R: SE10 NSAL: H17b		
Kind of place spouse/partner worked: Recode NCS-R: SE8 NLAAS: SE8 NSAL: H17e		
Kind of place father worked for: Recode NCS-R: CH12 NSAL: H9		
Kind of place mother worked for: Recode NCS-R: CH17 NSAL: H11b		
Household Income : Top Code NCS-R: hhinc NLAAS: hhinc NSAL: hhinc	Continuous	Top Code: 200,000 or more

Variables	Original codes	Recodes
Location see counselor-1st / 2nd / 3rd / 4th mentions NCS-R: SR611-SR614 NLAAS: SR61_1-SR61_4 NSAL: SR611-SR614 Location saw social worker-1st / 2nd / 3rd / 4th / 5th mentions NCS-R: SR521-SR525 NLAAS: SR52_1-SR52_5 NSAL: SR521-SR523 Other variables in "enter-all-mentions" arrays with no valid values were dropped	1 A. HOSPITAL EMERGENCY DEPARTMENT 2 B. PSYCHIATRIC OUTPATIENT CLINIC 3 C. DRUG OR ALCOHOL OUTPATIENT CLINIC 4 D. PRIVATE OFFICE 5 E. SOCIAL SERVICE AGENCY OR DEPARTMENT 6 F. PROGRAM IN JAIL OR PRISON 7 G. DROP-IN CENTER OR PROGRAM FOR PEOPLE WITH EMOTIONAL PROBL 8 H. CHURCH OR OTHER RELIGIOUSBUILDING 9 I. OTHER (SPECIFY)	1 A. HOSPITAL EMERGENCY DEPARTMENT 2 B. PSYCHIATRIC OUTPATIENT CLINIC 3 C. DRUG OR ALCOHOL OUTPATIENT CLINIC 4 D. PRIVATE OFFICE 5 E. SOCIAL SERVICE AGENCY OR DEPARTMENT 7 G. DROP-IN CENTER OR PROGRAM FOR PEOPLE WITH EMOTIONAL PROBL 8 H. CHURCH OR OTHER RELIGIOUSBUILDING 9 I. OTHER (SPECIFY) (6, 9)
In-person witness to 911: 1st / 2nd / 3rd / 4th / 5th mentions NCS-R: T4B01-T4B05 Other variables in "enter-all-mentions" arrays with no valid values were dropped	1 R WAS PRESENT IN ONE OF THE AFFECTED BUILDINGS DURING THE ATTACK 2 R WAS INJURED IN ONE OF THE ATTACKS 3 R NARROWLY ESCAPED INJURY 4 R WAS IN THE NEIGHBORHOOD OF THE AFFECTED BUILDINGS DURING THE ATTACK 5 R WAS IN NYC OR DC AND COULD SEE SMOKE OR FIRE FROM THE ATTACK 6 R WAS IN NYC OR DC, BUT COULD NOT SEE SMOKE OR FIRE 7 R TRAVELED TO THE SCENE WITHIN HOURS OF THE ATTACK 8 R TRAVELED TO THE SCENE WITHIN SEVERAL DAYS OF THE ATTACK 9 R SAW ONE OR MORE DEAD BODIES 10 R WAS A RELIEF WORKER (EITHER VOLUNTEER OR PROFESSIONAL) 11 OTHER	1 R WAS PRESENT IN ONE OF THE AFFECTED BUILDINGS DURING THE ATTACK 2 R WAS INJURED IN ONE OF THE ATTACKS 3 R NARROWLY ESCAPED INJURY 4 R WAS IN THE NEIGHBORHOOD OF THE AFFECTED BUILDINGS DURING THE ATTACK 5 R WAS IN NYC OR DC AND COULD SEE SMOKE OR FIRE FROM THE ATTACK 6 R WAS IN NYC OR DC, BUT COULD NOT SEE SMOKE OR FIRE 7 R TRAVELED TO THE SCENE WITHIN HOURS OF THE ATTACK 8 R TRAVELED TO THE SCENE WITHIN SEVERAL DAYS OF THE ATTACK 9 R SAW ONE OR MORE DEAD BODIES 11 OTHER (10, 11)
Location where saw psychiatrist / other mental prof / family doctor / other doctor / other health prof / clergy / other healer / [met w/] support group / other prof NSAL: F8BA, F8BB, F8BC, F8BD, F8BE, F8BF, F8BG, F8BH, F8BI	1 HOSPITAL 2 OUTPATIENT CLINIC 3 PRIVATE OFFICE 4 SOCIAL SERVICE AGENCY 5 JAIL/PRISON 6 CHURCH 7 PRIVATE HOME 8 TELEPHONE 9 SCHOOL 10 PUBLIC PLACE (LIBRARY, RESTAURANT, HOTEL) 97 OTHER	1 HOSPITAL 2 OUTPATIENT CLINIC 3 PRIVATE OFFICE 4 SOCIAL SERVICE AGENCY 97 OTHER (4-10, 97)

Variables	Original codes	Recodes
# brothers while growing up NSAL: J5a	Continuous	Top Code: 5 or more
# sisters while growing up NSAL: J5b		
Racial term respondent prefers to be called NSAL: G1	1 BLACK 2 BLACK AMERICAN 3 NEGRO 4 AFRICAN-AMERICAN 5 AFRO-AMERICAN 6 COLORED 7 NIGGA 8 WEST INDIAN 9 HAITIAN 10 JAMACIAN 11 R'S NAME 12 HUMAN 13 AFRICAN 14 AMERICAN 97 OTHER	1 BLACK 2 BLACK AMERICAN 3 NEGRO 4 AFRICAN-AMERICAN 5 AFRO-AMERICAN 6 COLORED 7 NIGGA 11 OTH: R NAME (97) 12 OTH: HUMAN, PERSON (97) 13 OTH: AFRICAN, BLK AFRICAN (97) 14 OTH: AMERICAN (97) 15 OTH: HISPANIC (97) 18 OTH: BROTHER, SISTER (97) 20 OTH: MIXED (97) 21 OTH: SPECIFIC CARIB COUNTRY NAME (8, 9, 10, 21, 97) 97 OTHER
Digit Symbol Test Correct answers test 1 NSAL: CG50a	0-50. ENTER NUMBER 996. NOT ABLE TO DO 997. PHYSICALLY IMPAIRED 998. DK, PHONE IW 999. REFUSED	0-50. ENTER NUMBER 996. NOT ABLE OR PHYSICALLY IMPAIRED (996,997) 998. DK, PHONE IW 999. REFUSED
Digit Symbol Test Incorrect answers test 1 NSAL: CG50b	0-50. ENTER NUMBER 996. NOT ABLE TO DO 997. PHYSICALLY IMPAIRED 998. DK, PHONE IW 999. REFUSED	0-50. ENTER NUMBER 996. NOT ABLE OR PHYSICALLY IMPAIRED (996,997) 998. DK, PHONE IW 999. REFUSED
Digit Symbol Test Correct answers test 2 NSAL: CG50c	0-50. ENTER NUMBER 996. NOT ABLE TO DO 997. PHYSICALLY IMPAIRED 998. DK, PHONE IW 999. REFUSED	0-50. ENTER NUMBER 996. NOT ABLE OR PHYSICALLY IMPAIRED (996,997) 998. DK, PHONE IW 999. REFUSED
Digit Symbol Test Incorrect answers test 1 NSAL: CG50d	0-50. ENTER NUMBER 996. NOT ABLE TO DO 997. PHYSICALLY IMPAIRED 998. DK, PHONE IW 999. REFUSED	0-50. ENTER NUMBER 996. NOT ABLE OR PHYSICALLY IMPAIRED (996,997) 998. DK, PHONE IW 999. REFUSED

Variables	Original codes	Recodes
\$ amount reimbursed by health insurance NSAL: C26cs, C26acs	Continuous	Rounded to nearest whole number
Race/gender of supervisor NSAL: D14, D32	1 BLACK MALE 2 WHITE MALE 3 BLACK FEMALE 4 WHITE FEMALE 5 NO SUPERVISOR 6 OTH: HISPANIC MALE 7 OTH: HISPANIC FEMALE 8 OTH: HISPANIC - GENDER NA 9 OTH: ASIAN 10 OTH: ARABIC 11 OTH: MULTIPLE SUPERVISORS 97 OTHER	1 BLACK (1,3) 2 WHITE (2, 4) 5 NO SUPERVISOR (5) 6 OTH: HISPANIC (6, 7, 8) 97 OTHER (9, 10, 11, 97)
Partner: Number of yrs lived together: Top/Bot Code NSAL: E13b	Continuous	Top Code: 20 or more Bottom Code: 1 or less
Yrs in current romantic relationship: Top/Bot Code NSAL: E16ab	Continuous	Top Code: 20 or more Bottom Code: 1 or less
Partner's racial background NSAL: E18	1 BLACK, AFRICAN AMERICAN 2 WHITE 3 AMERICAN INDIAN, ALASKAN NATIVE 4 ASIAN 5 PACIFIC ISLANDER 6 OTH: MULTIPLE RACES, NEC 7 OTH: HISPANIC BLACK 8 OTH: BLACK, WHITE MIX 9 OTH: BLACK, AMERICAN INDIAN MIX 10 OTH: ARABIC, MIDDLE EASTERN 11 OTH: HISPANIC 12 OTH: AMERICAN 13 OTH: EAST INDIAN 14 OTH: EUROPEAN ETHNICITY 15 OTH: AFRICAN ETHNICITY 16 OTH: CARIBBEAN ETHNICITY 17 OTH: JEWISH 18 OTH: HUMAN 97 OTHER	1 BLACK (1) 2 WHITE (2) 3. OTHER (3 OR MORE)

Variables	Original codes	Recodes
Race of family doctor NSAL: F8cc	1 BLACK, AFRICAN AMERICAN 2 WHITE 3 AMERICAN INDIAN, ALASKAN NATIVE 4 ASIAN 5 PACIFIC ISLANDER 6 OTH: MULTIPLE RACES, NEC 7 OTH: HISPANIC BLACK 8 OTH: BLACK, WHITE MIX 9 OTH: BLACK, AMERICAN INDIAN MIX 10 OTH: ARABIC, MIDDLE EASTERN 11 OTH: HISPANIC 12 OTH: AMERICAN 13 OTH: EAST INDIAN 14 OTH: EUROPEAN ETHNICITY 15 OTH: AFRICAN ETHNICITY 16 OTH: CARIBBEAN ETHNICITY 17 OTH: JEWISH 18 OTH: HUMAN 97 OTHER	1 BLACK (1) 2 WHITE (2) 3. OTHER (3 OR MORE)
# of kids from partner's other relationships: Top Code NSAL: E20a	Continuous	Top Code: 6 or more
# kids you fathered/gave birth to: Top Code NSAL: E22		
# biological kids 13 yrs or older: Top Code NSAL: E23a		
# of partner's kids that live w/ you: Top Code NSAL: E20b1	Continuous	Top Code: 2 or more

Variables	Original codes	Recodes
# living great-grandparents: Top Code NSAL: J6a	Continuous	Top Code: 3 or more
# living grandparents: Top Code NSAL: J6b		
# kids 13 or older: Top Code NSAL: J6d	Continuous	Top Code: 6 or more
# grandchildren 13 or older: Top Code NSAL: J6e		
# great-grandchildren: Top Code NSAL: J6f		
Reason for discriminating experiences NLAAS: DS3 NSAL: G20	NLAAS DS3 1 YOUR ANCESTRY OR NATIONAL ORIGIN OR ETHNICITY 2 YOUR GENDER OR SEX 3 YOUR RACE 4 YOUR AGE 5 YOUR HEIGHT 6 YOUR SKIN COLOR 7 YOUR SEXUAL ORIENTATION 8 YOUR WEIGHT 9 YOUR INCOME OR EDUCATIONAL LEVEL 10 OTHER NSAL G20 1 YOUR ANCESTRY OR NATIONAL ORIGIN 2 YOUR GENDER 3 YOUR RACE 4 YOUR AGE	NLAAS 1 YOUR ANCESTRY OR NATIONAL ORIGIN OR ETHNICITY 2 YOUR GENDER OR SEX 3 YOUR RACE 4 YOUR AGE 5 YOUR HEIGHT/WEIGHT (5, 8) 6 YOUR SKIN COLOR 10 OTHER (7) NSAL 1 YOUR ANCESTRY OR NATIONAL ORIGIN OR ETHNICITY 2 YOUR GENDER OR SEX 3 YOUR RACE 4 YOUR AGE 5 YOUR HEIGHT/WEIGHT 6 YOUR SKIN COLOR 10 OTHER (8 , 9)

Variables	Original codes	Recodes
	5 YOUR HEIGHT OR WEIGHT 6 YOUR SHADE OF SKIN COLOR 7 OTH: MEDICAL CONDITION 8 OTH: RELIGION 9 OTH: SEXUAL ORIENTATION 97 OTHER	
# of times attempted suicide in lifetime: Top Code NCS-R: SD19a NLAAS: SD19a NSAL: SD19a	Continuous	Top Code: 5 or more
# times hospitalized for mental health/substance use: Top Code NCS-R: SR3 NLAAS: SR3 NSAL: SR3	Continuous	Top Code: 5 or more
Event that led to most problems NCS-R: PT64 NLAAS: PT64 NSAL: PT64	1 COMBAT EXPERIENCE 2 RELIEF WORKER IN WAR ZONE 3 CIVILIAN IN WAR ZONE 4 CIVILIAN IN REGION OF TERROR 5 REFUGEE 6 KIDNAPPED 7 TOXIC CHEMICAL EXPOSURE 8 AUTOMOBILE ACCIDENT 9 LIFE-THREATENING ACCIDENT 10 NATURAL DISASTER 11 MAN-MADE DISASTER 12 LIFE-THREATENING ILLNESS 13 BEATEN UP AS A CHILD BY CAREGIVER 14 BEATEN UP BY A SPOUSE OR ROMANTIC PARTNER 15 BEATEN BY SOMEBODY ELSE 16 MUGGED OR THREATENED WITH A WEAPON 17 RAPED 18 SEXUALLY ASSAULTED 19 STALKED 20 UNEXPECTED DEATH OF A LOVED ONE 21 CHILD'S SERIOUS ILLNESS 22 TRAUMATIC EVENT TO LOVE ONE 23 WITNESSED DEATH OR DEAD BODY OR SAW SOMEONE SERIOUSLY HURT 24 ACCIDENTALLY CAUSED SERIOUS INJURY OR DEATH	1 EVENT SELECTED
# of R's random event type NCS-R: PT122 NLAAS: PT122 NSAL: PT122		
Event that caused most upsetting reaction in past 12 mths NCS-R: PT268 NLAAS: PT268 NSAL: PT268		
Was one event more stressful / upsetting than others NSAL: PT63_7		

Variables	Original codes	Recodes
Random/other event linked: 1st to 17th mention NCS-R: PT121A01 – PT121A17	25 PURPOSELY INJURED, TORTURED OR KILLED SOMEONE 26 SAW ATROCITIES 27 SOME OTHER EVENT (SPECIFY) 28 PRIVATE EVENT 29 WITNESSED PHYSICAL FIGHTS AT HOME	
Most recent real accident/did on purpose/result of fight NCS-R: CC6_1b	1 ACCIDENT 2 DID TO SELF ON PURPOSE 3 DURING FIGHT OR ATTACK 4 OTHER	1 ACCIDENT 4 OTHER (2, 3, 4)
Condition on list resulting from injury: 1st – 5th mention NCS-R CC6_21-CC6_26	1 BROKEN OR DISLOCATE BONES 2 SPRAIN, STRAIN, OR PULLED MUSCLE 3 CUTS, SCRAPES, OR PUNCTURE WOUNDS 4 HEAD INJURY, CONCUSSION 5 BRUISE, CONTUSION, OR INTERNAL BLEEDING 6 BURN, SCALD 7 POISONING FROM CHEMICALS, MEDICINE, OR DRUGS 8 RESPIRATORY PROBLEM SUCH AS BREATHING COUGH, PNEUMONIA 96 OTHER	1 BROKEN OR DISLOCATE BONES 2 SPRAIN, STRAIN, OR PULLED MUSCLE 3 CUTS, SCRAPES, OR PUNCTURE WOUNDS 5 BRUISE, CONTUSION, OR INTERNAL BLEEDING 96 OTHER (4, 6, 7, 8, 96)
Where did injury occur: 1st – 3rd mention NCS-R CC6_301 – CC6_303	1 R'S HOME OR YARD 2 SOMEONE ELSE'S HOME OR YARD 3 SCHOOL (INCLUDING PLAYGROUND) 4 WORKPLACE 5 TRAVELING TO OR FROM WORK OR AS PART OF WORK 6 STREET OR HIGHWAY (NOT TRAVELING FOR WORK) 7 PUBLIC SPACE (E.G., SIDEWALK) OR BUILDING 8 FARM OR AGRICULTURAL AREA 9 OTHER	1 R'S HOME OR YARD 2 SOMEONE ELSE'S HOME OR YARD 4 WORKPLACE 5 TRAVELING TO OR FROM WORK OR AS PART OF WORK 6 STREET OR HIGHWAY (NOT TRAVELING FOR WORK) 7 PUBLIC SPACE (E.G., SIDEWALK) OR BUILDING 8 FARM OR AGRICULTURAL AREA 9 OTHER, INCLUDING SCHOOL (3, 9)
Where cancer located: 1st to 4th mention NCS-R CC6a01 – CC6a04	1 BREAST CANCER 2 COLON CANCER 3 LUNG CANCER 4 LYMPHOMA OR LEUKEMIA 5 PROSTATE CANCER 6 SKIN CANCER (MELANOMA) 7 UTERINE CANCER 8 OVARIAN CANCER 9 CERVICAL CANCER 10 OTHER	1 BREAST CANCER 5 PROSTATE CANCER 6 SKIN CANCER (MELANOMA) 7 UTERINE/OVARIAN CANCER (7, 8) 9 CERVICAL CANCER 10 OTHER (2, 3, 4, 10)

Variables	Original codes	Recodes
Reason didn't live with biological parents until 16: 1st to 4th mention NCS-R CH2_11 – CH2_14	1 MOTHER DIED 2 FATHER DIED 3 PARENTS SEPARATED / DIVORCED 4 PARENTS NEVER LIVED TOGETHER 5 ADOPTED 6 WENT TO BOARDING SCHOOL 7 FOSTER CARE 8 LEFT HOME BEFORE AGE SIXTEEN 9 OTHER	2 MOTHER / FATHER DIED (1, 2) 4 PARENTS SEPARATED / DIVORCED / NEVER LIVED TOGETHER (3, 4) 7 FOSTER CARE 8 LEFT HOME BEFORE AGE SIXTEEN 9 OTHER (5, 6, 9)
Who did thing on List A to you: 1st to 4th mention NCS-R CH28a1 – CH28a4	1 BIOLOGICAL FATHER 2 ADOPTIVE FATHER 3 STEP FATHER 4 BIOLOGICAL MOTHER 5 ADOPTIVE MOTHER 6 STEP MOTHER 7 BROTHER / SISTER 8 OTHER	1 BIOLOGICAL FATHER 3 ADOPTIVE / STEP FATHER (2, 3) 4 BIOLOGICAL MOTHER 6 ADOPTIVE / STEP MOTHER (5, 6) 7 BROTHER / SISTER 8 OTHER
Location 6+ months before 16: 1st to 3rd mention NCS-R CH6a1 – CH6a4	1 LIVING WITH OTHER RELATIVES 2 BOARDING SCHOOL 3 HOSPITAL 4 JUVENILE DETENTION CENTER 5 FOSTER HOME 6 OTHER	1 LIVING WITH OTHER RELATIVES 6 OTHER (2, 3, 4, 5, 6)
How did your child die: 1st and 2nd mention NCS-R CN7d_101 – CN7d_102	1 SUICIDE 2 MURDER 3 ACCIDENT 4 ILLNESS 5 OTHER	3 ACCIDENT 4 ILLNESS 5 OTHER (1, 2, 5)
# of guns in working condition in house: Top Code NCS-R: CC62	Continuous	Top Code: 10 or more
# of miscarriage/stillbirth: Top Code NCS-R: CN5a	Continuous	Top Code: 5 or more

Variables	Original codes	Recodes
# of abortion(s): Top Code NCS-R: CN6a	Continuous	Top Code: 2 or more
# of your children that died: Top Code NCS-R: CN7a		
How did the child die NCS-R: CN7d_101 – CN7d_102	1 SUICIDE 2 MURDER 3 ACCIDENT 4 ILLNESS 5 OTHER	3 ACCIDENT 4 ILLNESS 5 OTHER (1, 2, 5)
Cause of death of biological mother NCS-R: DA39c	1 ILLNESS 2 ACCIDENT/INJURY 3 HOMICIDE 4 SUICIDE 5 OTHER	1 ILLNESS 5 OTHER (2, 3, 4, 5)
Cause of death of biological father NCS-R: DA41c		
# adult males lived with for 6+ mths in childhood: Top Code NCS-R: CH3_1	Continuous	Top Code: 5 or more
# adult females lived with for 6+ mths in childhood: Top Code NCS-R: CH3_2		
# of years attended all-girls/all-boys school: Top Code NCS-R: DE20_2a	Continuous	Top Code: 10 or more
# of different schools attended through high school: Top Code NCS-R: DE20_5		
# times moved to new	Continuous	Top Code: 15 or more

Variables	Original codes	Recodes
neighborhood/town when growing up: Top Code NCS-R: DE20_12		
Location 6+ mths before 16: 1st to 3rd mention NCS-R: CH6a1 – CH6a3	1 LIVING WITH OTHER RELATIVES 2 BOARDING SCHOOL 3 HOSPITAL 4 FOSTER HOME 5 OTHER	1 LIVING WITH OTHER RELATIVES 6 OTHER (2, 3, 4, 5)
Male head of household during most of your childhood NCS-R: CH8	1 BIOLOGICAL FATHER 2 ADOPTIVE FATHER 3 STEP FATHER (SPOUSE/PARTNER OF MOTHER) 4 OTHER MALE 5 NO MALE IN HOUSEHOLD	1 BIOLOGICAL FATHER 2 ADOPTIVE FATHER/STEP FATHER (SPOUSE/PARTNER OF MOTHER) (2,3) 4 OTHER MALE 5 NO MALE IN HOUSEHOLD
Female head of household during most of your childhood NCS-R: CH13	1 BIOLOGICAL MOTHER 2 ADOPTIVE MOTHER 3 STEP MOTHER (SPOUSE/PARTNER OF FATHER) 4 OTHER FEMALE 5 NO FEMALE IN HOUSEHOLD	1 BIOLOGICAL MOTHER 2 ADOPTIVE MOTHER/STEP MOTHER (SPOUSE/PARTNER OF FATHER) (2,3) 4 OTHER FEMALE 5 NO FEMALE IN HOUSEHOLD
# of adults in HH: Top Code NCS-R: Adult NLAAS: Adult NSAL: Adult	Continuous	Top Code: 5 or more
Number of adolescents in HH: Top Code NCS-R: Adol NLAAS: Adol NSAL: Adol	Continuous	Top Code: 3 or more
Number of children in HH: Top Code NCS-R: Children NLAAS: Children NSAL: Children	Continuous	Top Code: 4 or more
Total number of HH member: Top Code NCS-R: HHsize NLAAS: HHsize NSAL: HHsize	Continuous	Top code: 7 or more

Variables	Original codes	Recodes
How much money left over after paying debts NLAAS FN13e		Top code at value 32 (\$199,999)
Close relative with cancer: 1st to 6th mention NCS-R: FB6A11 – FB6A16	1 MOTHER 2 FATHER 3 BROTHER 4 SISTER 5 SON 6 DAUGHTER 7 SPOUSE / PARTNER	2 MOTHER / FATHER (1, 2) 4 BROTHER / SISTER (3, 4) 6 SON / DAUGHTER (5, 6) 7 SPOUSE / PARTNER
Close relative with serious heart problem: 1st to 4th mention NCS-R: FB6B11 – FB6B14	1 MOTHER 2 FATHER 3 BROTHER 4 SISTER 5 SON 6 DAUGHTER 7 SPOUSE / PARTNER	2 MOTHER / FATHER (1, 2) 4 BROTHER / SISTER (3, 4) 6 SON / DAUGHTER (5, 6) 7 SPOUSE / PARTNER
Close relative with serious memory problem: 1st to 6th mention NCS-R: FB6C11 – FB6C14	1 MOTHER 2 FATHER 3 BROTHER 4 SISTER 5 SON 6 DAUGHTER 7 SPOUSE / PARTNER	2 MOTHER / FATHER (1, 2) 4 BROTHER / SISTER (3, 4) 6 SON / DAUGHTER (5, 6) 7 SPOUSE / PARTNER
Close relative with mental retardation: 1st & 2nd mention NCS-R: FB6D11, FB6D12	1 MOTHER 2 FATHER 3 BROTHER 4 SISTER 5 SON 6 DAUGHTER 7 SPOUSE / PARTNER	2 MOTHER / FATHER (1, 2) 4 BROTHER / SISTER (3, 4) 6 SON / DAUGHTER (5, 6) 7 SPOUSE / PARTNER
Close relative with permanent physical disability: 1st & 2nd mention NCS-R: FB6E11, FB6E12	1 MOTHER 2 FATHER 3 BROTHER 4 SISTER 5 SON 6 DAUGHTER 7 SPOUSE / PARTNER	2 MOTHER / FATHER (1, 2) 4 BROTHER / SISTER (3, 4) 6 SON / DAUGHTER (5, 6) 7 SPOUSE / PARTNER
Close relative with other serious chronic physical illness: 1st to 4th mention NCS-R: FB6F11 – FB6F14	1 MOTHER 2 FATHER 3 BROTHER 4 SISTER 5 SON 6 DAUGHTER 7 SPOUSE / PARTNER	2 MOTHER / FATHER (1, 2) 4 BROTHER / SISTER (3, 4) 6 SON / DAUGHTER (5, 6) 7 SPOUSE / PARTNER

Variables	Original codes	Recodes
Close relative with drug / alcohol problem: 1st to 4th mention NCS-R: FB6G11 – FB6G14	1 MOTHER 2 FATHER 3 BROTHER 4 SISTER 5 SON 6 DAUGHTER 7 SPOUSE / PARTNER	2 MOTHER / FATHER (1, 2) 4 BROTHER / SISTER (3, 4) 6 SON / DAUGHTER (5, 6) 7 SPOUSE / PARTNER
Close relative with depression: 1st to 5th mention NCS-R: FB6H11 – FB6H15	1 MOTHER 2 FATHER 3 BROTHER 4 SISTER 5 SON 6 DAUGHTER 7 SPOUSE / PARTNER	2 MOTHER / FATHER (1, 2) 4 BROTHER / SISTER (3, 4) 6 SON / DAUGHTER (5, 6) 7 SPOUSE / PARTNER
Close relative with anxiety: 1st to 5th mention NCS-R: FB6I11 – FB6I15	1 MOTHER 2 FATHER 3 BROTHER 4 SISTER 5 SON 6 DAUGHTER 7 SPOUSE / PARTNER	2 MOTHER / FATHER (1, 2) 4 BROTHER / SISTER (3, 4) 6 SON / DAUGHTER (5, 6) 7 SPOUSE / PARTNER
Close relative with schizophrenia/psychosis: 1st mention NCS-R: FB6J11	1 MOTHER 2 FATHER 3 BROTHER 4 SISTER 5 SON 6 DAUGHTER 7 SPOUSE / PARTNER	2 MOTHER / FATHER (1, 2) 4 BROTHER / SISTER (3, 4) 6 SON / DAUGHTER (5, 6) 7 SPOUSE / PARTNER
Close relative with manic depression: 1st to 3rd mention NCS-R: FB6K11 – FB6K13	1 MOTHER 2 FATHER 3 BROTHER 4 SISTER 5 SON 6 DAUGHTER 7 SPOUSE / PARTNER	2 MOTHER / FATHER (1, 2) 4 BROTHER / SISTER (3, 4) 6 SON / DAUGHTER (5, 6) 7 SPOUSE / PARTNER
Close relative with other chronic mental health problem: 1st & 2nd mention NCS-R: FB6L11, FB6L12	1 MOTHER 2 FATHER 3 BROTHER 4 SISTER 5 SON 6 DAUGHTER 7 SPOUSE / PARTNER	2 MOTHER / FATHER (1, 2) 4 BROTHER / SISTER (3, 4) 6 SON / DAUGHTER (5, 6) 7 SPOUSE / PARTNER

Variables	Original codes	Recodes
What man raised you until age 16 NSAL: H5	1 BIOLOGICAL FATHER 2 STEP FATHER 3 GRANDFATHER 4 UNCLE 5 OTHER 6 (IF VOL) NO MAN	1 BIOLOGICAL FATHER 2 STEP FATHER 3 GRANDFATHER 4 UNCLE 6 NO MAN 7 OTH: BROTHER (5) 9 OTH: FOSTER / ADOPTED FATHER (5) 97 OTHER (5)
What woman raised you until age 16 NSAL: H6	1 BIOLOGICAL MOTHER 2 STEP MOTHER 3 GRANDMOTHER 4 AUNT 5 OTHER 6 (IF VOL:) NO WOMAN	1 BIOLOGICAL MOTHER 2 STEP MOTHER 3 GRANDMOTHER 4 AUNT 6 NO WOMAN 7 OTH: SISTER (5) 9 OTH: FOSTER / ADOPTED MOTHER (5) 97 OTHER (5)
Type of HS (if yrs of ed equal 0-12) NSAL: H13B	1 PRIVATE 2 PAROCHIAL 3 PUBLIC	2 PRIVATE / PAROCHIAL (1, 2) 3 PUBLIC
Type of HS (if yrs of ed equal 13+) NSAL: H13C		
Green card status NSAL: H32	1 CURRENTLY HAS GREEN CARD 2 PAPERWORK FOR GREEN CARD IS BEING PROCESSED 3 (IF VOL:) NEITHER OR OTHER RESPONSE	2 HAS GREEN CARD / GREEN CARD IN PROCESS 3 (VOL) NEITHER, OTHER
Type of area lived in growing up NSAL: H3A	0 IF R VOL: MOVED AROUND ALOT 1 RURAL OR COUNTRY AREA 2 SMALL TOWN 3 SMALL CITY 4 SUBURB OF A CITY 5 LARGE CITY 6 MILITARY BASE OR RESERVATION 7 IF R VOL: OTHER	0 MOVED ARND A LOT 1 RURAL AREA 2 SMALL TOWN 3 SMALL CITY 4 SUBURB OF CITY 5 LARGE CITY 97 OTHER (6, 7)

Variables	Original codes	Recodes
Learning disability: 1st & 2nd mention NCS-R: SC10_5c1 SC10_5c2	1 ASPERGEER'S DISORDER 2 ATTENTION DEFICIT DISORDER (ADD) 3 AUTISM 4 MENTAL RETARDATION 5 RETT'S DISORDER 6 SLOW AT LEARNING 7 STUTTERING 8 OTHER	2 ATTENTION DEFICIT DISORDER (ADD) 6 SLOW AT LEARNING 8 OTHER (1, 3, 4, 5, 7, 8)
Social fear due to health problem: 1st to 4TH / 5th mention NCS-R: SO15A1 – SO15A5 NLAAS: SO15A_1-SO15A_4 NSAL: SO15A1 – SO15A4	1 MENTAL HEALTH PROBLEM 2 ALCOHOL OR DRUG PROBLEM 3 SPEECH, VISION, OR HEARING PROBLEM 4 MOVEMENET OR COORDINATION PROBLEM 5 FACIAL / BODY DISFIGUREMENT OR WEIGHT / BODY IMAGE PROBLEM 6 BAD ODOR OR SWEATING 7 PREGNANCY 8 OTHER PHYSICAL HEALTH PROBLEM	1 MENTAL HEALTH PROBLEM 2 ALCOHOL OR DRUG PROBLEM 3 SPEECH, VISION, OR HEARING PROBLEM 4 MOVEMENET OR COORDINATION PROBLEM 5 FACIAL / BODY DISFIGUREMENT OR WEIGHT / BODY IMAGE PROBLEM 6 BAD ODOR OR SWEATING 8 OTHER PHYSICAL HEALTH PROBLEM (7, 8)
# times hospitalized for worry NSAL: GA50B	Enumerated (1-7, 17, 21, 25)	Top code: 25 or more
# times hospitalized for fear NSAL: AG30B	Enumerated (1-5)	Top code: 5 or more
Close friend / relative near site / not injured in 911: 1st to 3rd mention NCS-R: T3A01 - T3A03	1 PARENT 2 SIBLING 3 CHILD 4 SPOUSE 5 SECOND DEGREE RELATIVE (E.G., COUSIN, NEPHEW, AUNT) 6 OTHER RELATIVE 7 ROMANCE PARTNER 8 FRIEND 9 NEIGHBOR 10 CO-WORKER 11 ACQUAINTANCE 12 OTHER	4 FAMILY MEMBER (1, 2, 3, 4) 6 OTHER RELATIVE (5, 6) 8 FRIEND / NEIGHBOR / COWORKER / ACQUAINTANCE (8, 9, 10, 11) 12 OTHER (7, 12)
Where to go for medical help NSAL: C21A	1 DOCTOR 2 CLINIC 3 HEALTH CENTER 4 HOSPITAL 5 OTHER	1 DOCTOR 2 CLINIC 3 HEALTH CENTER 4 HOSPITAL 5 OTH: RELATIVE (5) 6 OTH: ALTERNATIVE HEALER (5) 97 OTHER (5)

Variables	Original codes	Recodes
How 1st learned about Sept 11 attacks NSAL: TR1	1 SAW IT ON TELEVISION 2 HEARD ABOUT IT FROM SOMEONE (A FRIEND, CO-WORKER OR FAMILY MEMBER) 3 SAW THE STORY ON THE INTERNET 4 RECEIVED A TELEPHONE CALL 5 HEARD ABOUT IT ON THE RADIO 6 READ ABOUT IT IN THE NEWSPAPER 7 WITNESSED ATTACK FROM LOCATION OUTSIDE OF BLDG 8 WAS IN ONE OF THE BLDG'S WHEN ATTACKED 9 OTHER	1 SAW ON TV 2 HEARD FR SOMEONE 3 SAW ON INTERNET 4 RECVD PHONE CALL 5 HEARD ON RADIO 6 READ IN NEWSPAPER 9 OTH: OVERHEARD ON MASS TRANSIT (9) 97 OTHER (7, 8, 9)
Med1-reason stop taking: 1st to 5th mention NLAAS: PH20A_01 – PH20A_05	1 THE MEDICINE WAS NOT HELPING 2 YOU THOUGHT THE PROBLEM WOULD GET BETTER WITHOUT MORE MEDICINE 3 YOU COULDN'T AFFORD TO PAY FOR THE MEDICINE 4 YOU WERE TOO EMBARRASSED TO CONTINUE TAKING THE MEDICINE 5 YOU WANTED TO SOLVE THE PROBLEM WITHOUT MEDICATIONS 6 THE MEDICINE CAUSED SIDE-EFFECTS THAT MADE YOU STOP 7 YOU WERE AFRAID THAT YOU WOULD GET DEPENDENT ON THE MEDICATION	1 THE MEDICINE WAS NOT HELPING 2 YOU THOUGHT THE PROBLEM WOULD GET BETTER WITHOUT MORE MEDICINE 3 YOU COULDN'T AFFORD TO PAY FOR THE MEDICINE 4 YOU WERE TOO EMBARRASSED TO CONTINUE TAKING THE MEDICINE 5 YOU WANTED TO SOLVE THE PROBLEM WITHOUT MEDICATIONS 6 THE MEDICINE CAUSED SIDE-EFFECTS THAT MADE YOU STOP 7 YOU WERE AFRAID THAT YOU WOULD GET DEPENDENT ON THE MEDICATION
Med2-reason stop taking: 1st to 3rd mention NLAAS PH27A_01 – PH27A_03	8 SOMEONE IN YOUR PERSONAL LIFE PRESSURED YOU TO STOP 9 NUMBER OF DOSES PER DAY WERE NOT CONVENIENT 10 MEDICINE INTERACTED WITH ANOTHER MEDICINE 11 WORSENED ANOTHER MEDICAL CONDITION (EG DIABETES) 12 ANY OTHER REASON FOR STOPPING (SPECIFY)	8 SOMEONE IN YOUR PERSONAL LIFE PRESSURED YOU TO STOP 9 NUMBER OF DOSES PER DAY WERE NOT CONVENIENT 10 MEDICINE INTERACTED WITH ANOTHER MEDICINE 11 WORSENED ANOTHER MEDICAL CONDITION (EG DIABETES) 12 ANY OTHER REASON FOR STOPPING (SPECIFY)
Med3-reason stop taking: 1st mention NLAAS: PH34A_01		9 OTHER REASON FOR STOPPING (9, 10, 11, 12)

Bottom-Coding of Diagnostic Variables

In order to maintain consistency with NCS-R protocols, all CPES variables for DSM-IV and ICD age-of-onset and recency of diagnosis have been bottom-coded at 4. These variables are listed below.

Variable Name	Variable Label	NCS-R	NLAAS	NSAL
ADD_OND	DSM-IV Attention Deficit Disorder Onset	X		X
ADD_ONI	ICD Attention Deficit Disorder Onset	X		X
ADD_RECD	DSM-IV Attention Deficit Disorder Recency	X		X
ADD_RECI	ICD Attention Deficit Disorder Recency	X		X
AGO_OND	DSM-IV Agoraphobia w/wout Panic Disorder Onset	X	X	X
AGO_RECD	DSM-IV Agoraphobia w/wout Panic Disorder Recency	X	X	X
AGP_OND	DSM-IV Agoraphobia w/out Panic Disorder Onset	X	X	X
AGP_ONI	ICD Agoraphobia w/out Panic Disorder Onset	X	X	X
AGP_RECD	DSM-IV Agoraphobia w/out Panic Disorder Recency	X	X	X
AGP_RECI	ICD Agoraphobia w/out Panic Disorder Recency	X	X	X
ALA_OND	DSM-IV Alcohol Abuse Onset	X	X	X
ALA_ONI	ICD Alcohol Abuse Onset	X	X	X
ALA_RECD	DSM-IV Alcohol Abuse Recency	X	X	X
ALA_RECI	ICD Alcohol Abuse Recency	X	X	X
ALD_OND	DSM-IV Alcohol Dependence Onset	X	X	X
ALD_ONI	ICD Alcohol Dependence Onset	X	X	X
ALD_RECD	DSM-IV Alcohol Dependence Recency	X	X	X
ALD_RECI	ICD Alcohol Dependence Recency	X	X	X
ANO_OND	DSM-IV Anorexia Onset	X	X	X
ANO_ONI	ICD Anorexia Onset	X	X	X
ANO_RECD	DSM-IV Anorexia Recency	X	X	X
ANO_RECI	ICD Anorexia Recency	X	X	X
ASA_OND	DSM-IV Adult Separation Anxiety Disorder Onset	X		
ASA_ONI	ICD Adult Separation Anxiety Disorder Onset	X		
ASA_RECD	DSM-IV Adult Separation Anxiety Disorder Recency	X		
ASA_RECI	ICD Adult Separation Anxiety Disorder Recency	X		
BINGEANY_OND	DSM-IV Binge Any Onset	X	X	X
BINGEANY_RECD	DSM-IV Binge Any Recency	X	X	X
BINGEH_OND	DSM-IV Binge Eating Disorder w/ hierarchy Onset	X	X	X

Variable Name	Variable Label	NCS-R	NLAAS	NSAL
BINGEH_RECD	DSM-IV Binge Eating Disorder w/ hierarchy Recency	X	X	X
BIPOLARI_OND	DSM-IV Bi-Polar I Onset	X		X
BIPOLARI_RECD	DSM-IV Bi-Polar I Recency	X		X
BIPOLARII_OND	DSM-IV Bi-Polar II Onset	X		X
BIPOLARII_RECD	DSM-IV Bi-Polar II Recency	X		X
BIPOLARSUB_OND	DSM-IV Bi-Polar Subthreshold Onset	X		X
BIPOLARSUB_RECD	DSM-IV Bi-Polar Subthreshold Recency	X		X
BUL_OND	DSM-IV Bulimia Onset	X	X	X
BUL_ONI	ICD Bulimia Onset	X		X
BUL_RECD	DSM-IV Bulimia Recency	X	X	X
BUL_RECI	ICD Bulimia Recency	X	X	X
bulh_ond	DSM-IV Bulimia w/ hierarchy Onset	X	X	X
bulh_recd	DSM-IV Bulimia w/ hierarchy Recency	X	X	X
CD_OND	DSM-IV Conduct Disorder Onset	X	X	X
CD_ONI	ICD Conduct Disorder Onset	X	X	X
CD_RECD	DSM-IV Conduct Disorder Recency	X	X	X
CD_RECI	ICD Conduct Disorder Recency	X	X	X
DRA_OND	DSM-IV Drug Abuse Onset	X	X	X
DRA_ONI	ICD Drug Abuse Onset	X	X	X
DRA_RECD	DSM-IV Drug Abuse Recency	X	X	X
DRA_RECI	ICD Drug Abuse Recency	X	X	X
DRD_OND	DSM-IV Drug Dependence Onset	X	X	X
DRD_ONI	ICD Drug Dependence Onset	X	X	X
DRD_RECD	DSM-IV Drug Dependence Recency	X	X	X
DRD_RECI	ICD Drug Dependence Recency	X	X	X
DYS_OND	DSM-IV Dysthymia Onset	X	X	X
DYS_ONI	ICD Dysthymia Onset	X	X	X
DYS_RECD	DSM-IV Dysthymia Recency	X	X	X
DYS_RECI	ICD Dysthymia Recency	X	X	X
GAD_OND	DSM-IV Generalized Anxiety Disorder Onset	X	X	X
GAD_ONI	ICD Generalized Anxiety Disorder Onset	X		
GAD_RECD	DSM-IV Generalized Anxiety Disorder Recency	X	X	X
GAD_RECI	ICD Generalized Anxiety Disorder Recency	X	X	
IED_OND	DSM-IV Intermittent Explosive Disorder Onset	X	X	

Variable Name	Variable Label	NCS-R	NLAAS	NSAL
IED_RECD	DSM-IV Intermittent Explosive Disorder Recency	X	X	
MDDH_OND	DSM-IV Major Depressive Disorder w/ hierarchy Onset	X	X	X
MDDH_RECD	DSM-IV Major Depression w/ hierarchy Recency	X	X	X
MDE_OND	DSM-IV Major Depressive Episode Onset	X	X	X
MDE_ONI	ICD Severe Depressive Episode Onset	X	X	X
MDE_RECD	DSM-IV Major Depressive Episode Recency	X	X	X
MDE_RECI	ICD Severe Depressive Episode Recency	X	X	X
ODD_OND	DSM-IV Oppositional Defiant Disorder Onset	X		X
ODD_ONI	ICD Oppositional Defiant Disorder Onset	X		X
ODD_RECD	DSM-IV Oppositional Defiant Disorder Recency	X		X
ODD_RECI	ICD Oppositional Defiant Disorder Recency	X		X
PAT_OND	DSM-IV Panic Attack Onset	X	X	X
PAT_ONI	ICD Panic Attack Onset	X	X	X
PAT_RECD	DSM-IV Panic Attack Recency	X	X	X
PAT_RECI	ICD Panic Attack Recency	X	X	X
PD_OND	DSM-IV Panic Disorder Onset	X	X	X
PD_ONI	ICD Panic Disorder Onset	X	X	X
PD_RECD	DSM-IV Panic Disorder Recency	X	X	X
PD_RECI	ICD Panic Disorder Recency	X	X	X
pts_ond	DSM-IV Posttraumatic Stress Disorder Onset	X	X	X
pts_oni	ICD Posttraumatic Stress Disorder Onset	X	X	X
pts_recd	DSM-IV Posttraumatic Stress Disorder Recency	X	X	X
pts_reci	ICD Posttraumatic Stress Disorder Recency	X	X	X
SAD_OND	DSM-IV Separation Anxiety Disorder Onset	X		X
SAD_ONI	ICD Separation Anxiety Disorder Onset	X		
SAD_RECD	DSM-IV Separation Anxiety Disorder Recency	X		X
SAD_RECI	ICD Separation Anxiety Disorder Recency	X		
SO_OND	DSM-IV Social Phobia Onset	X	X	X
SO_ONI	ICD Social Phobia Onset	X	X	X
SO_RECD	DSM-IV Social Phobia Recency	X	X	X
SO_RECI	ICD Social Phobia Recency	X	X	X
SP_OND	DSM-IV Specific Phobia Onset	X		
SP_RECD	DSM-IV Specific Phobia Recency	X		
SPONI	ICD Specific Phobia Onset	X		

Variable Name	Variable Label	NCS-R	NLAAS	NSAL
SPRECI	ICD Specific Phobia Recency	X		
TBD_OND	DSM-IV Nicotine Dependence Onset	X		
TBD_ONI	ICD Nicotine Dependence Onset	X		
TBD_RECD	DSM-IV Nicotine Dependence Recency	X		
TBD_RECI	ICD Nicotine Dependence Recency	X		

Harmonization of Demographics

Additional recoding was required to harmonize demographics across the three CPES surveys, as a result of the division of the NCS-R instrument into two parts, resulting in NCS-R respondents being asked different sets of demographic questions. Part I of the NCS-R includes sections 1-14 (Household Listing, Screening, Depression, Mania, Irritable Depression, Panic Disorder, Specific Phobia, Social Phobia, Agoraphobia, Generalized Anxiety Disorder, Intermittent Explosive Disorder, Suicidality, Services, and Pharmacoepidemiology). At the conclusion of the Pharmacoepidemiology section, a series of assignments to Part II of the survey were made.

All 9,282 respondents were asked the Part I questions, while a subsample of 5,692 respondents completed Part II. In addition, Part II was administered to Part I respondents with a lifetime disorder, as well as to a probability subsample of other respondents. All sections after Pharmacoepidemiology are considered Part II sections. Part II was further subdivided into long, intermediate, and short forms of the questionnaire. Short-form respondents were asked key demographic questions in the Demographics section. Intermediate- and long-form respondents were asked the same key demographic questions as they appeared in other Part II sections.

In order to get the correct total for each of these demographic variables, data for long-/intermediate-, and short-form variables were combined into one constructed variable that could then be linked to the same demographic variables in NLAAS and NSAL. Note that the NCS-R Part II weight (NCSRWTLG) should be applied when looking at NCS-R combined-variable demographics separate from data from the other studies. The original source variables have been retained in the dataset as well, should an analyst want to use those versions of the variables. The following lists the NCS-R source and combined demographic variables and the NLAAS and NSAL variables to which they have been linked in the CPES dataset.

CPES Variable	Variable Label	NCS-R Combined	NCS-R Short	NCS- R Long / Intermediate	NLAAS	NSAL	Data Processing
V09382	Country in which you were born		DM1_6				Recoded
V09383	Country in which you were born			DE4			Recoded
V05700	Country in which you were born	DM_DE4			DM1_6	h2	Recoded
V03125	# parents born in U.S.		DM1_7				
V05701	# parents born in U.S.			DE5_1			Top Code 2
V09391	# parents born in U.S.	DM_DE5_1			DM1_7	no match	
V03078	# brothers and sisters had while grow up, incl step/half: Top Code		DM1_10				Top Code 8
V05707 V05710	# brothers and sisters had while grow up, incl step/half: Top Code			DE9_1 DE9_5			Top Code 8 Top Code 8
V09384	# brothers and sisters had while grow up, incl step/half: Top Code	DM_DE9_1			no match	no match	Top Code 8
V03079	# older than you: Top Code		DM1_11				Top Code 8

CPES Variable	Variable Label	NCS-R Combined	NCS-R Short	NCS- R Long / Intermediate	NLAAS	NSAL	Data Processing
V05708				DE9_3			Top Code 8
V05709				DE9_4			Top Code 8
V05711				DE9_7			
V05712	# older than you: Top Code			DE9_8			Top Code 8
V09385	# older than you: Top Code	DM_DE9_3			no match	no match	Top Code 8
V03080	Male head of household during most childhood		DM1_12				Recoded
V05813	Male head of household during most childhood			CH8			Recoded
V09386	Male head of household during most childhood	DM_CH8			DM1_12	no match	Recoded
V03081	# years school he/father completed		DM1_12a				Bot Code 4 Top Code 17
V05897	# years school he/father completed			CH8a			Bot Code 4 Top Code 17
V09387	# years school he/father completed	DM_CH8a			DM1_12a	h7	Bot Code 4 Top Code 17
V03083	Female head of household during most childhood		DM1_13				Recoded
V05817	Female head of household during most childhood			CH13			Recoded
V09388	Female head of household during most childhood	DM_CH13			DM1_13		Recoded
V03084	# years school she/mother completed		DM1_13a				Bot Code 4 Top Code 17
V05818	# years school she/mother completed			CH13a			Bot Code 4 Top Code 17
V09389	# years school she/mother completed	DM_CH13a			DM1_13a	h10	Bot Code 4 Top Code 17
V09380	Highest grade of school or college completed: Top/Bot Code		DM1_14				Bot Code 4 Top Code 17
V09381	Highest grade of school/college completed :Top/Bot Code			DE20			Bot Code 4 Top Code 17
V03085	Highest grade of school/college completed: Top/Bot Code	DM_DE20			DM1_14	H13	Bot Code 4 Top Code 17
V03086	Age 1st yr worked 6 mths + at paid job		DM1_15				
V05119	Age 1st yr worked 6 mths + at paid job			EM1			
V09390	Age 1st yr worked 6 mths + at paid job	DM_EM1			no match	no match	
V03127	Current employment situation:1st mention		DM201				Recoded
V05138	Current employment situation:1st mention			EM7_101			Recoded

CPES Variable	Variable Label	NCS-R Combined	NCS-R Short	NCS- R Long / Intermediate	NLAAS	NSAL	Data Processing
V09392	Current employment situation:1st mention	DM_EM7_1			EM7_1_01	no match	Recoded
V03130	Current employment situation:2nd mention		DM202				Recoded
V05144	Current employment situation:2nd mention			EM7_102			Recoded
V09393	Current employment situation:2nd mention	DM_EM7_2			EM7_1_02	no match	Recoded
V03131	Current employment situation:3rd mention		DM203				Recoded
V05146	Current employment situation:3rd mention			EM7_103			Recoded
V09394	Current employment situation:3rd mention	DM_EM7_3			EM7_1_03	no match	Recoded
V03138	Illness due to physical/emotional disorder/combination		DM4				
V05185	Illness due to physical/emotional disorder/combination			EM10			
V09395	Illness due to physical/emotional disorder/combination	DM_EM10			EM10	no match	
V03139	# years school spouse/partner completed		DM6				Bot Code 4 Top Code 17
V05255	# years school spouse/partner completed			SE2			Bot Code 4 Top Code 17
V09396	# years school spouse/partner completed	DM_SE2			SE2	h16	Bot Code 4 Top Code 17
V03140	Spouse/partner ever worked for pay		DM7				
V05270	Spouse/partner ever worked for pay			SE6a			
V09397	Spouse/partner ever work for pay?	DM_SE6A			no match	no match	
V03141	Spouse/partner current employment status:1st mention		DM801				Recoded
V05256	Spouse/partner current employment status:1st mention			SE401			Recoded
V09398	Spouse/partner current employ status: 1st mention	DM_SE401			SE4_01	no match	Recoded
V03144	Spouse/partner current employ status:2nd mention		DM802				Recoded
V05260	Spouse/partner current employ status:2nd mention			SE402			Recoded
V09399	Spouse/partner current employ status: 2nd mention	DM_SE402			SE4_02	no match	Recoded
V03145	Spouse/partner current employ status:3rd mention		DM803				Recoded
V05261	Spouse/partner current employ status:3rd mention			SE403			Recoded

CPES Variable	Variable Label	NCS-R Combined	NCS-R Short	NCS- R Long / Intermediate	NLAAS	NSAL	Data Processing
V09400	Spouse/partner current employ status: 3rd mention	DM_SE403			SE4_03	no match	Recoded
V03162	Money left over after liquidating and paying all debts		DM14_6				
V05313	Money left over after liquidating and paying all debts			FN12			
V09401	Money left over after liquidating and paying all debts	DM_FN12			no match	no match	
V03164	# times married: Top Code		DM17				Top Code 3
V05344	# times married: Top Code			MR16a			Top Code 3
V09402	# times married: Top Code	DM_MR16a			MR16a	e14a_e15a	Top Code 3
V03165	# marriages ended in divorce/annulment: Top Code		DM19				Top Code 3
V05346	# marriages ended in divorce/annulment: Top Code			MR18			Top Code 3
V09403	# marriages ended in divorce/annulment: Top Code	DM_MR18			MR18	no match	Top Code 3
V03166	Age you married 1st time: Top/Bot-Code		DM20				Bot Code 14 Top Code 42
V05347	Age you married 1st time: Top/Bot-Code			MR19			Bot Code 14 Top Code 42
V09404	Age you married 1st time: Top/Bot-Code	DM_MR19			MR19	no match	Bot Code 14 Top Code 42
V03171	Amt of time dated first spouse before married		DM21a				
V05348	Amt of time dated first spouse before married			MR20			
V09407	Amt of time dated first spouse before married	DM_MR20			no match	no match	
V03172	Unit of time, DM21A		DM21b				
V05349	Unit of time, MR20A			MR20a			
V09408	Unit of time DM_MR20	DM_MR20a			no match	no match	
V03169	Length been married/sep/div/widow from most recent spouse		DM21_4a				
V05362	Length been married/sep/div/widow from most recent spouse			MR25_4a			
V09405	Length been married/sep/div/widow from most recent spouse	DM_MR25a			MR25_4a	no match	
V03170	Unit of time, DM21_4A		DM21_4b				

CPES Variable	Variable Label	NCS-R Combined	NCS-R Short	NCS- R Long / Intermediate	NLAAS	NSAL	Data Processing
V05363	Unit of time, MR25a_4A			MR25_4b			
V09406	Unit of time, DM_MR25a	DM_MR25b			MR25_4b	no match	
V03173	# living biological children		DM22				Top Code 6
V05423	# living biological children			CN1			Top Code 6
V09409	# living biological children	DM_CN1			CN1	e23	Top Code 6
V03174	# of living/biological children under age 5		DM22a				
V05424				CN1a			
V05425	# of living/biological children under age 5			CN1aa			
V09410	# of living/biological children under age 5	DM_CN1a			no match	no match	
V03175	# of living/biological children between age 5 and 12		DM22b				
V05426				CN1b			
V05427	# of living/biological children between age 5 and 12			CN1bb			
V09411	# of living/biological children between age 5 and 12	DM_CN1b			no match	no match	
V03176	# of living/biological children between age 13 and 17		DM22c				
V05428				CN1c			
V05429	# of living/biological children between age 13 and 17			CN1cc			
V09412	# of living/biological children between age 13 and 17	DM_CN1c			no match	no match	
V03177	# other living children incl step/adopted/raised 5+ years +		DM23				Top Code 6
V05430	# other living children incl step/adopted/raised 5+years +			CN2			Top Code 6
V09413	# other living children incl step/adopted/raised 5+ years +	DM_CN2			CN2	e24_1	Top Code 6
V03174	Number of other child(ren) under age 5		DM23a				
V05431				CN2a			
V05432	Number of other child(ren) under age 5			CN2aa			
V09416	Number of other child(ren) under age 5	DM_CN2a			no match	no match	
V03219	# of other child(ren) between age 5 and 12		DM23b				
V05433				CN2b			
V05434	# of other child(ren) between age 5 and 12			CN2bb			
V09417	Number of other child(ren) between age 5 and 12	DM_CN2b			no match	no match	

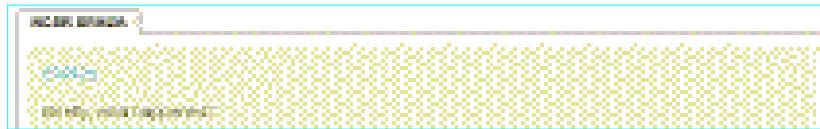
CPES Variable	Variable Label	NCS-R Combined	NCS-R Short	NCS- R Long / Intermediate	NLAAS	NSAL	Data Processing
V03220	# of other child(ren) between age 13 and 17		DM23c				
V05435 V05436	# of other child(ren) between age 13 and 17			CN2c CN2cc			
V09418	Number of other child(ren) between age 13 and 17	DM_CN2c			no match	no match	
V03178	Religious preference:1st mention		DM23_101				Recoded
v05549	Religious preference:1st mention			DA31b_101			Recoded
V09414	Religious preference: 1st mention	DM_DA311			DA31b_01	B1	Recoded
V03189	Religious preference:2nd mention		DM23_102				Recoded
v05571	Religious preference:2nd mention			DA31b_102			Recoded
V09415	Religious preference: 2nd mention	DM_DA312			DA31b_02	no match	Recoded

Dropped Variables

Processors dropped many variables in the NCS-R, NLAAS, and NSAL source datasets, for the following reasons:

1. To protect the identity of research subjects, including dropping source variables for constructed demographics created to mask identity;
2. If they were source variables for constructed variables created for other purposes (e.g., NSAL's variable E14a-e15a, which has combined data from three questions that resulted from routing respondents through three different question wordings to gather the same data); or
3. If they were the following types of computer-assisted instrument variables (the figure below shows examples of how these would appear in the NCS-R, NLAAS, and NSAL interactive codebooks):
 - Open-ended question with text response;
 - Open-ended "other specify" question with text response;
 - Instrument screen with introductory text ("ENTER 1 TO CONTINUE");
 - Interviewer checkpoint or instruction screen; or
 - Interviewing software routing check.

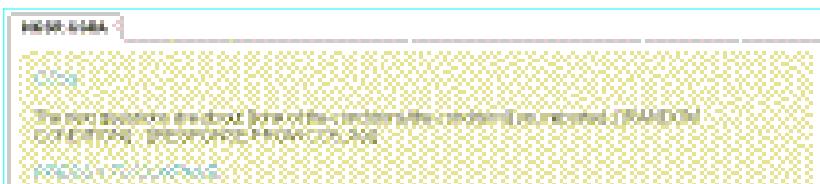
Open-ended question



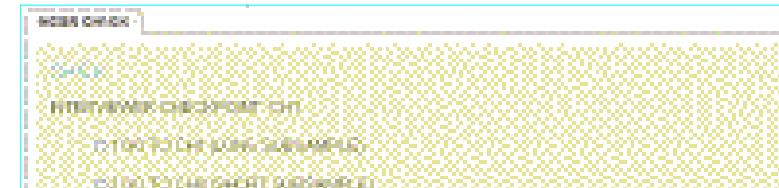
Open-ended "other specify" question



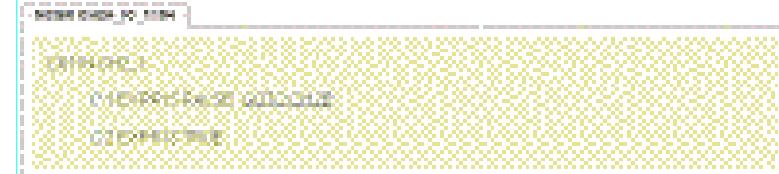
Introductory text



Interviewer checkpoint or instruction screen



Interviewing software routing check



The following table lists variables that were dropped either to protect the identity of research subjects or because they were source variables for constructed variables.

Variable Name	Study	Section	Label
CC1K	NCS-R	Chronic Conditions	Doctor ever tell respondent had TB
CC1R	NCS-R	Chronic Conditions	Doctor ever tell respondent had HIV/AIDS
CC3K	NCS-R	Chronic Conditions	How old when first diagnosed with TB
CC3R	NCS-R	Chronic Conditions	How old when first diagnosed with HIV/AIDS
CC4K	NCS-R	Chronic Conditions	Still have TB during the past 12 months
CC50_16	NCS-R	Chronic Conditions	How much have to pay at plan doctor
CC50_17	NCS-R	Chronic Conditions	How much have to pay for prescriptions
CC50_6	NCS-R	Chronic Conditions	Covered by Indian Health Service
CD16G	NCS-R	Conduct Disorder	As child ever steal someone's purse or bag by grabbing it
CD16H	NCS-R	Conduct Disorder	As a child ever make anyone do something sexual
CD18C	NCS-R	Conduct Disorder	Estimate how old 1st aggressive behavior
CD38	NCS-R	Conduct Disorder	Ever arrested as a child
CD39	NCS-R	Conduct Disorder	Ever sent to a jail / prison / juvenile correctional facility
CD39A	NCS-R	Conduct Disorder	How old first time sent to a jail / prison / juvenile facility
CD39B1	NCS-R	Conduct Disorder	How long stay in any (jail / prison / juvenile) facilities altogether
CD39B2	NCS-R	Conduct Disorder	How long stay in any (jail / prison / juvenile) facilities altogether
CH2D	NCS-R	Childhood	How old at time of adoption
CH2E	NCS-R	Childhood	How old when went to boarding school
CH2F	NCS-R	Childhood	How old when went under foster care
CH2G	NCS-R	Childhood	How old when left home (before age 16)
CH2H	NCS-R	Childhood	How old when respondent left home for other reason
CH65	NCS-R	Childhood	Woman who raised respondent ever arrested or sent to prison
CH95	NCS-R	Childhood	Man who raised respondent ever arrested or sent to prison
CN11	NCS-R	Children	How often do [behavior from list] to children
CN11_3	NCS-R	Children	Which best describes respondent sexual orientation
D38A_3_5	NCS-R	Depression	Month episode start
D38A_3A_5	NCS-R	Depression	Year episode start
D40	NCS-R	Depression	INTERVIEWER QUERY - HOW LONG WAS LONGEST EPISODE
D57	NCS-R	Depression	INTERVIEWER QUERY - HOW LONG WAS LONGEST EPISODE
DA1_S_1	NCS-R	Adult Demographics	Hispanic or Latino descent
DA1_S_2	NCS-R	Adult Demographics	Hispanic or Latino descent

Variable Name	Study	Section	Label
DA1_S_3	NCS-R	Adult Demographics	Hispanic or Latino descent
DA2_01	NCS-R	Adult Demographics	Other main ethnic origins
DA2_01D	NCS-R	Adult Demographics	Other main ethnic origins
DA2_02	NCS-R	Adult Demographics	Other main ethnic origins
DA2_02D	NCS-R	Adult Demographics	Other main ethnic origins
DA2_03	NCS-R	Adult Demographics	Other main ethnic origins
DA2_03D	NCS-R	Adult Demographics	Other main ethnic origins
DA2_04	NCS-R	Adult Demographics	Other main ethnic origins
DA2_04D	NCS-R	Adult Demographics	Other main ethnic origins
DA2_05	NCS-R	Adult Demographics	Other main ethnic origins
DA31B	NCS-R	Adult Demographics	Citizenship in other country - what country
DA36_2	NCS-R	Adult Demographics	Ever in a jail, prison, or correctional facility since age 18
DA36_2A1	NCS-R	Adult Demographics	How long in jail since age 18: number
DA36_2A2	NCS-R	Adult Demographics	How long in jail since age 18: unit of time
DA3A	NCS-R	Adult Demographics	Best describe ethnic background
DA4_S_3	NCS-R	Adult Demographics	Respondent race - mention 3
DA41	NCS-R	Adult Demographics	Respondent race - mention 1
DA42	NCS-R	Adult Demographics	Respondent race - mention 2
DA4B_S_1	NCS-R	Adult Demographics	Best describe race - mention 1
DA4B_S_2	NCS-R	Adult Demographics	Best describe race - mention 2
DA4B_S_3	NCS-R	Adult Demographics	Best describe race - mention 3
DE2A	NCS-R	Childhood Demographics	Respondent birthdate
DE4A	NCS-R	Childhood Demographics	Age when first came to U.S.
DM1_02	NCS-R	Demographics	Other main ethnic origins - 1st mention
DM1_03	NCS-R	Demographics	Other main ethnic origins - 2nd mention
DM1_04	NCS-R	Demographics	Other main ethnic origins - 3rd mention
DM1_05	NCS-R	Demographics	Other main ethnic origins - 4th mention
DM1_06	NCS-R	Demographics	Other main ethnic origins - 5th mention
DM1_1	NCS-R	Demographics	Spanish or Hispanic descent
DM1_1A	NCS-R	Demographics	Spanish or Hispanic descent
DM1_5	NCS-R	Demographics	Respondent race
DM1_6A	NCS-R	Demographics	How old when first came to this country
DM11	NCS-R	Demographics	Before or after taxes
DM13	NCS-R	Demographics	Spouse/partner income letter

Variable Name	Study	Section	Label
DM14	NCS-R	Demographics	Before or after taxes
DM14_1	NCS-R	Demographics	Total personal earnings income of all other family members before taxes
DM14_2	NCS-R	Demographics	Before or after taxes
DM14_3	NCS-R	Demographics	Total family household income from Social Security Retirement benefits
DM14_4	NCS-R	Demographics	Total family household income from government assistance programs
DM14_5	NCS-R	Demographics	Total family household income from any other sources in the past 12 mo
DM14_7	NCS-R	Demographics	How much money left over after paying debts
DM1A	NCS-R	Demographics	Respondent birthdate
DM2A	NCS-R	Demographics	Current employment situation
DM4A	NCS-R	Demographics	Disability) due to physical or emotional disorder
DM8A	NCS-R	Demographics	Spouse/partner current employment situation
EA2	NCS-R	Eating Disorder	Weight in pounds
EA3A	NCS-R	Eating Disorder	How tall at that time (FEET)
EA3B	NCS-R	Eating Disorder	How tall at that time (INCHES)
EM14A1	NCS-R	Employment	Month learn going to leave job
EM14A1_5	NCS-R	Employment	Month learn going to leave job
EM14A2	NCS-R	Employment	Year learn going to leave job
EM8_S_1	NCS-R	Employment	Current employment situation - mention 1
EM8_S_2	NCS-R	Employment	Current employment situation - mention 2
FB6J	NCS-R	Family Burden	Number family members with psychosis
FN10	NCS-R	Finances	Total family household income from government assistance programs
FN11	NCS-R	Finances	Total family household income from other sources in the past 12 months
FN13	NCS-R	Finances	Amount left over after paying debts
FN2INTR1	NCS-R	Finances	Personal earnings income in the past 12 months, before taxes
FN2INTR2	NCS-R	Finances	Personal earnings income in the past 12 months, before taxes
FN5	NCS-R	Finances	Spouse/partners earnings income in the past 12 months
FN7	NCS-R	Finances	Personal earnings income of all other family members
FN9	NCS-R	Finances	Total family household income from Social Security
G26B	NCS-R	Generalized Anxiety Disorder	About how old - first worry episode
G27A_3	NCS-R	Generalized Anxiety Disorder	Worry episode 1+ month - month start
G27A_3A	NCS-R	Generalized Anxiety Disorder	Worry episode 1+ month - year start
IR12C	NCS-R	Irritable Depression	Physical causes of irritability
MR21_4	NCS-R	Marriage	Confirm first spouse died
MR25	NCS-R	Marriage	How old when first spouse died

Variable Name	Study	Section	Label
MR51	NCS-R	Marriage	Spouse/partner ever get involved in criminal activity
MR52	NCS-R	Marriage	Spouse/partner ever arrested or sent to prison
PH10_03A	NCS-R	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH10_04A	NCS-R	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH11_03A	NCS-R	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH11_04A	NCS-R	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH12_03A	NCS-R	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH12_04A	NCS-R	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH13_03A	NCS-R	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH13_04A	NCS-R	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH14_03A	NCS-R	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH14_04A	NCS-R	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH15_03A	NCS-R	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH15_04A	NCS-R	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH16_03A	NCS-R	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH16_04A	NCS-R	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH17_03A	NCS-R	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH17_04A	NCS-R	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH18_03A	NCS-R	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH18_04A	NCS-R	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH19_03A	NCS-R	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH19_04A	NCS-R	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH20_03A	NCS-R	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH20_04A	NCS-R	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH21_03A	NCS-R	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH21_04A	NCS-R	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH4INTR1	NCS-R	Pharmacoepidemiology	Which meds from list take for emotions
PH4INTR2	NCS-R	Pharmacoepidemiology	Which meds from list take for other problems
PH5_03A	NCS-R	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH5_04A	NCS-R	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH6_03A	NCS-R	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH6_04A	NCS-R	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH7_03A	NCS-R	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH7_04A	NCS-R	Pharmacoepidemiology	Best estimate of the day took MedName for the first time

Variable Name	Study	Section	Label
PH8_03A	NCS-R	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH8_04A	NCS-R	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH9_03A	NCS-R	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH9_04A	NCS-R	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PP1A	NCS-R	Perceptions of the Past	First event mentioned
PP1B	NCS-R	Perceptions of the Past	Second event mentioned
PS9	NCS-R	Psychosis	Hospitalized because of psychotic experience
PT1	NCS-R	Post-Traumatic Stress Disorder	Ever participate in combat
PT10	NCS-R	Post-Traumatic Stress Disorder	Ever involved in a major natural disaster
PT11	NCS-R	Post-Traumatic Stress Disorder	Ever in a man-made disaster
PT12	NCS-R	Post-Traumatic Stress Disorder	Ever have a life-threatening illness
PT125	NCS-R	Post-Traumatic Stress Disorder	See anyone killed when refugee
PT119a_1	NCS-R	Post-Traumatic Stress Disorder	Current age
PT120a_1	NCS-R	Post-Traumatic Stress Disorder	Current age
PT125A_S_1	NCS-R	Post-Traumatic Stress Disorder	Who see die when refugee - first mention
PT125A_S_2	NCS-R	Post-Traumatic Stress Disorder	Who see die when refugee - second mention
PT125A6	NCS-R	Post-Traumatic Stress Disorder	Number friends see die when refugee
PT125A7	NCS-R	Post-Traumatic Stress Disorder	Number acquaintances see die when refugee
PT125A8	NCS-R	Post-Traumatic Stress Disorder	Number strangers see die when refugee
PT126	NCS-R	Post-Traumatic Stress Disorder	Anyone (else) close suddenly die unexpectedly
PT126A_S_1	NCS-R	Post-Traumatic Stress Disorder	Who close suddenly died unexpectedly
PT126A6	NCS-R	Post-Traumatic Stress Disorder	Number friends died unexpectedly
PT127	NCS-R	Post-Traumatic Stress Disorder	Anyone (else) close seriously harmed or imprisoned
PT127A_S_1	NCS-R	Post-Traumatic Stress Disorder	Who close suddenly seriously harmed - first mention
PT127A_S_2	NCS-R	Post-Traumatic Stress Disorder	Who close suddenly seriously harmed - second mention
PT127A_S_3	NCS-R	Post-Traumatic Stress Disorder	Who close suddenly seriously harmed - third mention
PT127A_S_4	NCS-R	Post-Traumatic Stress Disorder	Who close suddenly seriously harmed - fourth mention
PT127A7	NCS-R	Post-Traumatic Stress Disorder	Number friends seriously harmed
PT127A8	NCS-R	Post-Traumatic Stress Disorder	Number acquaintances seriously harmed
PT128	NCS-R	Post-Traumatic Stress Disorder	Ever suffer greatly from lack of food, water, shelter
PT129A	NCS-R	Post-Traumatic Stress Disorder	Country of traumatic event/random event
PT129A1	NCS-R	Post-Traumatic Stress Disorder	Country of traumatic event/random event - second mention
PT13	NCS-R	Post-Traumatic Stress Disorder	Ever badly beaten by parents
PT131_S_1	NCS-R	Post-Traumatic Stress Disorder	Affiliation during combat experience

Variable Name	Study	Section	Label
PT132	NCS-R	Post-Traumatic Stress Disorder	Number times go on combat patrol or have other danger
PT133	NCS-R	Post-Traumatic Stress Disorder	Number times fire rounds at the enemy
PT134	NCS-R	Post-Traumatic Stress Disorder	Number times see someone get hit by incoming or outgoing rounds
PT135	NCS-R	Post-Traumatic Stress Disorder	Number times in danger of being injured or killed
PT136	NCS-R	Post-Traumatic Stress Disorder	Number times surrounded by the enemy
PT137	NCS-R	Post-Traumatic Stress Disorder	Percentage of personnel in unit killed, wounded or
PT138A	NCS-R	Post-Traumatic Stress Disorder	Amount of time altogether under enemy fire: number
PT138B	NCS-R	Post-Traumatic Stress Disorder	Amount of time altogether under enemy fire: unit of time
PT14	NCS-R	Post-Traumatic Stress Disorder	Ever badly beaten up by spouse or romantic partner
PT146	NCS-R	Post-Traumatic Stress Disorder	Driving, a passenger, or a pedestrian (RANDOM EVENT: AUTO ACCIDENT)
PT147_S_1	NCS-R	Post-Traumatic Stress Disorder	Whose fault was the accident (RANDOM EVENT: AUTO ACCIDENT)
PT148	NCS-R	Post-Traumatic Stress Disorder	Anyone killed (RANDOM EVENT: AUTO ACCIDENT)
PT148A_S_1	NCS-R	Post-Traumatic Stress Disorder	Who killed (RANDOM EVENT: AUTO ACCIDENT)
PT148A7	NCS-R	Post-Traumatic Stress Disorder	Acquaintances killed (RANDOM EVENT: AUTO ACCIDENT)
PT149	NCS-R	Post-Traumatic Stress Disorder	Anyone seriously injured (RANDOM EVENT: AUTO ACCIDENT)
PT149A_S_1	NCS-R	Post-Traumatic Stress Disorder	Who seriously injured - first mention (RANDOM EVENT: AUTO ACCIDENT)
PT149A_S_2	NCS-R	Post-Traumatic Stress Disorder	Who seriously injured - second mention (RANDOM EVENT: AUTO ACCIDENT)
PT149A_S_3	NCS-R	Post-Traumatic Stress Disorder	Who seriously injured - third mention (RANDOM EVENT: AUTO ACCIDENT)
PT149A3	NCS-R	Post-Traumatic Stress Disorder	Number parents seriously injured (RANDOM EVENT: AUTO ACCIDENT)
PT149A4	NCS-R	Post-Traumatic Stress Disorder	Number children seriously injured (RANDOM EVENT: AUTO ACCIDENT)
PT149A5	NCS-R	Post-Traumatic Stress Disorder	Number siblings seriously injured (RANDOM EVENT: AUTO ACCIDENT)
PT149A6	NCS-R	Post-Traumatic Stress Disorder	Number other relatives seriously injured (RANDOM EVENT: AUTO ACCIDENT)
PT149A7	NCS-R	Post-Traumatic Stress Disorder	Number friends seriously injured (RANDOM EVENT: AUTO ACCIDENT)
PT149A8	NCS-R	Post-Traumatic Stress Disorder	Number acquaintances seriously injured (RANDOM EVENT: AUTO ACCIDENT)
PT15	NCS-R	Post-Traumatic Stress Disorder	Ever badly beaten up by anyone else
PT156	NCS-R	Post-Traumatic Stress Disorder	See anyone die during random event
PT156A_S_1	NCS-R	Post-Traumatic Stress Disorder	Who died during random event - first mention
PT156A6	NCS-R	Post-Traumatic Stress Disorder	Number of friends died during random event
PT156A8	NCS-R	Post-Traumatic Stress Disorder	Number of strangers died during random event
PT157	NCS-R	Post-Traumatic Stress Disorder	Anyone else close die during random event
PT157A_S_1	NCS-R	Post-Traumatic Stress Disorder	Who else died during random event
PT157A_S_2	NCS-R	Post-Traumatic Stress Disorder	Who else died during random event
PT157A_S_3	NCS-R	Post-Traumatic Stress Disorder	Who else died during random event
PT157A6	NCS-R	Post-Traumatic Stress Disorder	Number of friends died during random event

Variable Name	Study	Section	Label
PT158	NCS-R	Post-Traumatic Stress Disorder	Anyone close seriously injured during random event
PT158A_S_1	NCS-R	Post-Traumatic Stress Disorder	Who injured during random event - first mention
PT158A6	NCS-R	Post-Traumatic Stress Disorder	Number other relatives injured during random event
PT158A7	NCS-R	Post-Traumatic Stress Disorder	Number friends injured during random event
PT158A8	NCS-R	Post-Traumatic Stress Disorder	Number acquaintances injured during random event
PT159	NCS-R	Post-Traumatic Stress Disorder	Forced to leave home during random event
PT159A	NCS-R	Post-Traumatic Stress Disorder	Leave home permanently or temporarily
PT16	NCS-R	Post-Traumatic Stress Disorder	Ever mugged, held up, or threatened with a weapon
PT161_S_1	NCS-R	Post-Traumatic Stress Disorder	What kind of natural disaster - first mention
PT17	NCS-R	Post-Traumatic Stress Disorder	Ever raped
PT170_S_1	NCS-R	Post-Traumatic Stress Disorder	Who did this (RANDOM OCCURRENCE OF RANDOM EVENT)
PT170_S_2	NCS-R	Post-Traumatic Stress Disorder	Who did this (RANDOM OCCURRENCE OF RANDOM EVENT)
PT170_S_3	NCS-R	Post-Traumatic Stress Disorder	Who did this (RANDOM OCCURRENCE OF RANDOM EVENT)
PT171	NCS-R	Post-Traumatic Stress Disorder	One-time occurrence or happen repeatedly
PT171A1	NCS-R	Post-Traumatic Stress Disorder	How long continue: number
PT171A2	NCS-R	Post-Traumatic Stress Disorder	How long continue: unit of time
PT172	NCS-R	Post-Traumatic Stress Disorder	Anything could have done to prevent event happening
PT173	NCS-R	Post-Traumatic Stress Disorder	Unexpected death of loved one - relationship to R
PT174	NCS-R	Post-Traumatic Stress Disorder	Unexpected death of loved one - how did person die
PT174A	NCS-R	Post-Traumatic Stress Disorder	Unexpected death of loved one - person been ill
PT174B1	NCS-R	Post-Traumatic Stress Disorder	Unexpected death of loved one - how long ill: number
PT174B2	NCS-R	Post-Traumatic Stress Disorder	Unexpected death of loved one - how long ill: unit of time
PT175	NCS-R	Post-Traumatic Stress Disorder	Unexpected death of loved one - age of person at t
PT176	NCS-R	Post-Traumatic Stress Disorder	Unexpected death of loved one - anything could have done
PT18	NCS-R	Post-Traumatic Stress Disorder	Ever sexually assaulted other than rape
PT19	NCS-R	Post-Traumatic Stress Disorder	Ever been stalked
PT2	NCS-R	Post-Traumatic Stress Disorder	Ever serve as peacekeeper or relief worker in war
PT20	NCS-R	Post-Traumatic Stress Disorder	Someone very close to respondent ever die unexpectedly
PT21	NCS-R	Post-Traumatic Stress Disorder	Ever have child with life-threatening illness or injury
PT218C	NCS-R	Post-Traumatic Stress Disorder	At least once a month
PT22	NCS-R	Post-Traumatic Stress Disorder	Anyone very close ever have extremely traumatic ex
PT22_1	NCS-R	Post-Traumatic Stress Disorder	Ever witness serious physical fights at home as a
PT229C	NCS-R	Post-Traumatic Stress Disorder	At least once a month
PT23	NCS-R	Post-Traumatic Stress Disorder	Ever see someone badly injured or killed / unexpectedly see dead body

Variable Name	Study	Section	Label
PT24	NCS-R	Post-Traumatic Stress Disorder	Ever do something that accidentally led to serious
PT240C	NCS-R	Post-Traumatic Stress Disorder	At least once a month
PT25	NCS-R	Post-Traumatic Stress Disorder	Ever purposefully seriously injure, torture, or kill another
PT26	NCS-R	Post-Traumatic Stress Disorder	Ever see atrocities or carnage
PT27	NCS-R	Post-Traumatic Stress Disorder	Ever experience any other extremely traumatic or I
PT28	NCS-R	Post-Traumatic Stress Disorder	Ever have traumatic event that don't want to talk
PT29A	NCS-R	Post-Traumatic Stress Disorder	How old when first combat experience
PT29B1	NCS-R	Post-Traumatic Stress Disorder	How long serve in first combat: number
PT29B2	NCS-R	Post-Traumatic Stress Disorder	How long serve in first combat: unit of time
PT29C	NCS-R	Post-Traumatic Stress Disorder	How old when second combat experience
PT29D1	NCS-R	Post-Traumatic Stress Disorder	How long serve in second combat: number
PT29D2	NCS-R	Post-Traumatic Stress Disorder	How long serve in second combat: unit of time
PT3	NCS-R	Post-Traumatic Stress Disorder	Ever unarmed civilian where there was a war, revolution, coup, invasion
PT30	NCS-R	Post-Traumatic Stress Disorder	Ever serve as peacekeeper or relief worker in war
PT30A	NCS-R	Post-Traumatic Stress Disorder	How old first time peacekeeper
PT30B1	NCS-R	Post-Traumatic Stress Disorder	How long serve first time peacekeeper: number
PT30B2	NCS-R	Post-Traumatic Stress Disorder	How long serve first time peacekeeper: unit of time
PT30C	NCS-R	Post-Traumatic Stress Disorder	How old second time peacekeeper
PT30D1	NCS-R	Post-Traumatic Stress Disorder	How long serve second time peacekeeper: number
PT30D2	NCS-R	Post-Traumatic Stress Disorder	How long serve second time peacekeeper: unit of time
PT31	NCS-R	Post-Traumatic Stress Disorder	Ever an unarmed civilian in war zone
PT31A	NCS-R	Post-Traumatic Stress Disorder	How old first time unarmed civilian
PT31B1	NCS-R	Post-Traumatic Stress Disorder	How long serve first time unarmed civilian: number
PT31B2	NCS-R	Post-Traumatic Stress Disorder	How long serve first time unarmed civilian: unit of time
PT31C	NCS-R	Post-Traumatic Stress Disorder	How old second time unarmed civilian
PT31D1	NCS-R	Post-Traumatic Stress Disorder	How long serve second time unarmed civilian: number
PT31D2	NCS-R	Post-Traumatic Stress Disorder	How long serve second time unarmed civilian: unit of time
PT32	NCS-R	Post-Traumatic Stress Disorder	Ever live as a civilian where there was ongoing terror
PT32A	NCS-R	Post-Traumatic Stress Disorder	How old first time civilian in terror zone
PT32B1	NCS-R	Post-Traumatic Stress Disorder	How long serve first time civilian in terror zone
PT32B2	NCS-R	Post-Traumatic Stress Disorder	How long serve first time civilian in terror zone
PT32C	NCS-R	Post-Traumatic Stress Disorder	How old second time civilian in terror zone
PT32D1	NCS-R	Post-Traumatic Stress Disorder	How long serve second time civilian in terror zone
PT32D2	NCS-R	Post-Traumatic Stress Disorder	How long serve second time civilian in terror zone

Variable Name	Study	Section	Label
PT33	NCS-R	Post-Traumatic Stress Disorder	Ever a refugee
PT33A	NCS-R	Post-Traumatic Stress Disorder	How old first time refugee
PT33B1	NCS-R	Post-Traumatic Stress Disorder	How long serve first time refugee: number
PT33B2	NCS-R	Post-Traumatic Stress Disorder	How long serve first time refugee: unit of time
PT33C	NCS-R	Post-Traumatic Stress Disorder	How old second time refugee
PT33D1	NCS-R	Post-Traumatic Stress Disorder	How long serve second time refugee: number
PT33D2	NCS-R	Post-Traumatic Stress Disorder	How long serve second time refugee: unit of time
PT34	NCS-R	Post-Traumatic Stress Disorder	Ever kidnapped or held hostage
PT34A	NCS-R	Post-Traumatic Stress Disorder	How old first time kidnapped
PT34B1	NCS-R	Post-Traumatic Stress Disorder	How long held captive first time: number
PT34B2	NCS-R	Post-Traumatic Stress Disorder	How long held captive first time: unit of time
PT34C	NCS-R	Post-Traumatic Stress Disorder	How old second time kidnapped
PT34D1	NCS-R	Post-Traumatic Stress Disorder	How long held captive second time: number
PT34D2	NCS-R	Post-Traumatic Stress Disorder	How long held captive second time: unit of time
PT35	NCS-R	Post-Traumatic Stress Disorder	Ever exposed to a toxic chemical
PT35A	NCS-R	Post-Traumatic Stress Disorder	How old first time exposed
PT35B	NCS-R	Post-Traumatic Stress Disorder	How many times exposed in lifetime
PT36	NCS-R	Post-Traumatic Stress Disorder	Ever involved in life-threatening automobile accident
PT36A	NCS-R	Post-Traumatic Stress Disorder	How old first time auto accident
PT36B	NCS-R	Post-Traumatic Stress Disorder	How many times auto accident in lifetime
PT37	NCS-R	Post-Traumatic Stress Disorder	Ever in any other life-threatening accident
PT37A	NCS-R	Post-Traumatic Stress Disorder	How old first time in life-threatening accident
PT37B	NCS-R	Post-Traumatic Stress Disorder	How many times life-threatening accident in lifetime
PT38	NCS-R	Post-Traumatic Stress Disorder	Ever involved in major natural disaster
PT38A	NCS-R	Post-Traumatic Stress Disorder	How old first time in major natural disaster
PT38B	NCS-R	Post-Traumatic Stress Disorder	How many times major natural disaster in lifetime
PT39	NCS-R	Post-Traumatic Stress Disorder	Ever involved in man-made disaster
PT39A	NCS-R	Post-Traumatic Stress Disorder	How old first time in man-made disaster
PT39B	NCS-R	Post-Traumatic Stress Disorder	How many times man-made disaster in lifetime
PT4	NCS-R	Post-Traumatic Stress Disorder	Ever live as a civilian where there was ongoing terror
PT40	NCS-R	Post-Traumatic Stress Disorder	Ever have life-threatening illness
PT40A	NCS-R	Post-Traumatic Stress Disorder	How old first time have life-threatening illness
PT40B	NCS-R	Post-Traumatic Stress Disorder	How many times life-threatening illness in lifetime
PT41	NCS-R	Post-Traumatic Stress Disorder	Ever badly beaten up by parents

Variable Name	Study	Section	Label
PT41A	NCS-R	Post-Traumatic Stress Disorder	How old first time beaten by parents
PT41B	NCS-R	Post-Traumatic Stress Disorder	How many times beaten by parents in lifetime
PT42	NCS-R	Post-Traumatic Stress Disorder	Ever beaten by spouse/partner
PT42A	NCS-R	Post-Traumatic Stress Disorder	How old first time beaten by spouse/partner
PT42B	NCS-R	Post-Traumatic Stress Disorder	How many times beaten by spouse/partner
PT43	NCS-R	Post-Traumatic Stress Disorder	Ever beaten by anyone else
PT43A	NCS-R	Post-Traumatic Stress Disorder	How old first time beaten by someone else
PT43B	NCS-R	Post-Traumatic Stress Disorder	How many times beaten by someone else in lifetime
PT44	NCS-R	Post-Traumatic Stress Disorder	Ever mugged, held up, or threatened with a weapon
PT44A	NCS-R	Post-Traumatic Stress Disorder	How old first time mugged
PT44B	NCS-R	Post-Traumatic Stress Disorder	How many times mugged in lifetime
PT45	NCS-R	Post-Traumatic Stress Disorder	Ever raped
PT45A	NCS-R	Post-Traumatic Stress Disorder	How old first time raped
PT45B	NCS-R	Post-Traumatic Stress Disorder	How many times raped in lifetime
PT46	NCS-R	Post-Traumatic Stress Disorder	Ever sexually assaulted other than rape
PT46A	NCS-R	Post-Traumatic Stress Disorder	How old first time sexually assaulted
PT46B	NCS-R	Post-Traumatic Stress Disorder	How many times sexually assaulted in lifetime
PT47	NCS-R	Post-Traumatic Stress Disorder	Ever been stalked
PT47A	NCS-R	Post-Traumatic Stress Disorder	How old first time stalked
PT47B	NCS-R	Post-Traumatic Stress Disorder	How many times stalked in lifetime
PT48	NCS-R	Post-Traumatic Stress Disorder	Someone very close ever die unexpectedly
PT48A	NCS-R	Post-Traumatic Stress Disorder	How old first time someone close die unexpectedly
PT48B	NCS-R	Post-Traumatic Stress Disorder	How many times someone close die unexpectedly in
PT49	NCS-R	Post-Traumatic Stress Disorder	Ever have child with life-threatening illness or injury
PT49A	NCS-R	Post-Traumatic Stress Disorder	How old first time child had life-threatening illness
PT49B	NCS-R	Post-Traumatic Stress Disorder	How many times child had life-threatening illness
PT5	NCS-R	Post-Traumatic Stress Disorder	Ever a refugee
PT50	NCS-R	Post-Traumatic Stress Disorder	Anyone close ever have traumatic experience
PT50_1	NCS-R	Post-Traumatic Stress Disorder	Ever witness serious physical fights at home as a
PT50_1A	NCS-R	Post-Traumatic Stress Disorder	How old first time witness physical fights at home
PT50_1B	NCS-R	Post-Traumatic Stress Disorder	How many times witness physical fights at home
PT50A	NCS-R	Post-Traumatic Stress Disorder	How old first time someone close have traumatic ex
PT50B	NCS-R	Post-Traumatic Stress Disorder	How many times someone close have traumatic experience
PT51	NCS-R	Post-Traumatic Stress Disorder	Ever see someone badly injured or killed / unexpectedly see dead body

Variable Name	Study	Section	Label
PT51A	NCS-R	Post-Traumatic Stress Disorder	How old first time see someone badly injured
PT51B	NCS-R	Post-Traumatic Stress Disorder	How many times see someone badly injured
PT52	NCS-R	Post-Traumatic Stress Disorder	Ever do something that accidentally led to serious
PT52A	NCS-R	Post-Traumatic Stress Disorder	How old first time do something to accidentally in
PT52B	NCS-R	Post-Traumatic Stress Disorder	How many times do something to accidentally injure
PT53	NCS-R	Post-Traumatic Stress Disorder	Ever purposefully seriously injure, torture, or kill
PT53A	NCS-R	Post-Traumatic Stress Disorder	How old first time purposefully injure someone
PT53B	NCS-R	Post-Traumatic Stress Disorder	How many times purposefully injure someone in life
PT54	NCS-R	Post-Traumatic Stress Disorder	Ever see atrocities or carnage
PT54A	NCS-R	Post-Traumatic Stress Disorder	How old first time see atrocities
PT54B	NCS-R	Post-Traumatic Stress Disorder	How many times see atrocities in lifetime
PT55	NCS-R	Post-Traumatic Stress Disorder	Ever experience any other extremely traumatic or I
PT55B	NCS-R	Post-Traumatic Stress Disorder	One-time event or on-going
PT57	NCS-R	Post-Traumatic Stress Disorder	Ever have traumatic event that don't want to talk
PT59	NCS-R	Post-Traumatic Stress Disorder	SELECT RANDOM EVENT FROM EVENTS REPORTED
PT59A	NCS-R	Post-Traumatic Stress Disorder	SELECT RANDOM OCCURRENCE FROM EVENTS REPORTED
PT64B	NCS-R	Post-Traumatic Stress Disorder	Which occurrence - worst event
SA47B	NCS-R	Separation Anxiety	How many separate times hospitalized for separation anxiety
SC1	NCS-R	Screening	Respondent Age
SC1_1	NCS-R	Screening	Respondent Sex
SC10_4A	NCS-R	Screening	Blindness-deafness-serious speech problem
SC10_4B	NCS-R	Screening	Hearing problem even with hearing aid
SC10_4C	NCS-R	Screening	Vision problem even with glasses or contacts
SC10_5A1	NCS-R	Screening	Respondent blind
SC10_5A2	NCS-R	Screening	Respondent deaf
SC10_5A3	NCS-R	Screening	Respondent speech impaired
SC10_5A4	NCS-R	Screening	Respondent hearing impaired
SC10_5A5	NCS-R	Screening	Respondent vision impaired
SC10_5EB_S_2	NCS-R	Screening	Physical handicap - mention 1
SC10_5EB_S_3	NCS-R	Screening	Physical handicap - mention 2
SC10_5EB_S_4	NCS-R	Screening	Physical handicap - mention3
SC10_5G_S_1	NCS-R	Screening	Physical handicap
SC10_5G_S_2	NCS-R	Screening	Physical handicap
SC10_5G_S_3	NCS-R	Screening	Physical handicap

Variable Name	Study	Section	Label
SC10_6	NCS-R	Screening	Strangers on the street consider R disabled
SC10_6A	NCS-R	Screening	People who know R consider R disabled
SC2	NCS-R	Screening	How long lived at current address: unit
SC2_1	NCS-R	Screening	Years lived in this state
SC2_2	NCS-R	Screening	Miles live from place raised
SC2_3	NCS-R	Screening	Number of homes since age 18
SC2A	NCS-R	Screening	How long lived at current address: time period
SC3	NCS-R	Screening	Marital status
SC3A	NCS-R	Screening	Living in marriage-like relationship
SC4	NCS-R	Screening	Height (FEET)
SC4A	NCS-R	Screening	Height (INCHES)
SC5	NCS-R	Screening	Weight: number
SD11	NCS-R	Suicidality	Injury or poisoning - first suicide attempt
SD12	NCS-R	Suicidality	Medical attention needed - first suicide attempt
SD13	NCS-R	Suicidality	Overnight hospitalization - first suicide attempt
SD14_2_S_1	NCS-R	Suicidality	Suicide method: 1 st mention
SD14_2_S_2	NCS-R	Suicidality	Suicide method: 2 nd mention
SD14_2_S_3	NCS-R	Suicidality	Suicide method: 3 rd mention
SD24	NCS-R	Suicidality	Injury or poisoning - last suicide attempt
SD25	NCS-R	Suicidality	Medical attention needed - last suicide attempt
SD26	NCS-R	Suicidality	Overnight hospitalization - last suicide attempt
SD29	NCS-R	Suicidality	Method used - last suicide attempt
SE8A	NCS-R	Employment	Kind of place respondent's spouse / partner worked on last job
SO3B	NCS-R	Social Phobia	About how old was respondent
SO6A	NCS-R	Social Phobia	How old when first avoided social performance
SR133A	NCS-R	Services	Type of self-help group attended in past 12 months
SR135A	NCS-R	Services	Relationship self-help group to professional help
SU12D	NCS-R	Substance Use	Arrested more than once because drunk driving
SU65D	NCS-R	Substance Use	Arrested more than once because high
T4	NCS-R	Terror	In-person witness to attack/scene few days after 911
T4b_S_1	NCS-R	Terror	In-person witness to 911:1 st mention
T4b_S_2	NCS-R	Terror	In-person witness to 911:2 nd mention
T4b_S_3	NCS-R	Terror	In-person witness to 911:3 rd mention
T4b_S_4	NCS-R	Terror	In-person witness to 911:4 th mention

Variable Name	Study	Section	Label
T4b_S_5	NCS-R	Terror	In-person witness to 911:5 th mention
TB21B	NCS-R	Tobacco	About how old - first time problems due to smoking
TB23	NCS-R	Tobacco	About how old - last time problems due to smoking
TB26	NCS-R	Tobacco	How old first time three or more problems due to smoking
TB3	NCS-R	Tobacco	How old first time smoked
TB5INTR1	NCS-R	Tobacco	How old first time smoked - current smoker
TB5INTR2	NCS-R	Tobacco	How old first time smoked - former smoker
TB6	NCS-R	Tobacco	How old first time smoked once a week for at least two months
TB6A	NCS-R	Tobacco	How old first time smoked nearly everyday for at least two months
AT2O	NLAAS	Nervous Attacks	Try to hurt self or attempt suicide when totally lost control
AT4	NLAAS	Nervous Attacks	Cause of nervous attack when totally lost control
CC16B	NLAAS	Chronic Conditions	Cause of chronic condition
CC16C	NLAAS	Chronic Conditions	Cause of chronic condition
CC16D	NLAAS	Chronic Conditions	Cause of chronic condition
CC16E	NLAAS	Chronic Conditions	Cause of chronic condition
CC16F	NLAAS	Chronic Conditions	Cause of chronic condition
CC16G	NLAAS	Chronic Conditions	Cause of chronic condition
CC16H	NLAAS	Chronic Conditions	Cause of chronic condition
CC16I	NLAAS	Chronic Conditions	Cause of chronic condition
CC16J	NLAAS	Chronic Conditions	Cause of chronic condition
CC16K	NLAAS	Chronic Conditions	Cause of chronic condition
CC16L	NLAAS	Chronic Conditions	Cause of chronic condition
CC16M	NLAAS	Chronic Conditions	Cause of chronic condition
CC16N	NLAAS	Chronic Conditions	Cause of chronic condition
CC16O	NLAAS	Chronic Conditions	Cause of chronic condition
CC1K	NLAAS	Chronic Conditions	Doctor ever tell respondent had TB
CC1R	NLAAS	Chronic Conditions	Doctor ever tell respondent had HIV/AIDS
CC3K	NLAAS	Chronic Conditions	How old when first diagnosed with TB
CC3R	NLAAS	Chronic Conditions	How old when first diagnosed with HIV/AIDS
CC4K	NLAAS	Chronic Conditions	Still have TB during the past 12 months
CC5K	NLAAS	Chronic Conditions	Receive any treatment for TB during the past 12 months
CD16G	NLAAS	Conduct Disorder	As child ever steal someone's purse or bag by grabbing it
CD16H	NLAAS	Conduct Disorder	As a child ever make anyone do something sexual
CD38	NLAAS	Conduct Disorder	Ever arrested as a child

Variable Name	Study	Section	Label
CD39	NLAAS	Conduct Disorder	Ever sent to a jail / prison / juvenile correctional facility
CD39A	NLAAS	Conduct Disorder	How old first time sent to a jail / prison / juvenile facility
CD39B1	NLAAS	Conduct Disorder	How long stay in any (jail / prison / juvenile) facilities altogether
CD39B2	NLAAS	Conduct Disorder	How long stay in any (jail / prison / juvenile) facilities altogether
CN11	NLAAS	Children	How often do [behavior from list] to children
CN11_3	NLAAS	Children	Which best describes respondent sexual orientation
D55	NLAAS	Depression	Checkpoint - number of years with depressive episodes
DA36_1B	NLAAS	Adult Demographics	Ever been arrested
DA36_1BB	NLAAS	Adult Demographics	Exact age first time arrested
DA36_1CC	NLAAS	Adult Demographics	How old first time arrested
DA36_1DD	NLAAS	Adult Demographics	About how old first time arrested
DA36_1DD1	NLAAS	Adult Demographics	Before teens first time arrested
DA36_1DD2	NLAAS	Adult Demographics	Before twenties first time arrested
DA36_1EE	NLAAS	Adult Demographics	When last time arrested
DA36_1FF	NLAAS	Adult Demographics	How old last time arrested
DA36_2	NLAAS	Adult Demographics	Ever in a jail, prison, or correctional facility since age 18
DA36_2AA	NLAAS	Adult Demographics	Exact age first time in jail
DA36_2BB	NLAAS	Adult Demographics	How old first time in jail
DA36_2CC	NLAAS	Adult Demographics	About how old first time in jail
DA36_2CC1	NLAAS	Adult Demographics	Before teens first time in jail
DA36_2CC2	NLAAS	Adult Demographics	Before twenties first time in jail
DA36_2DD	NLAAS	Adult Demographics	How old last time in jail
DA36_2EE	NLAAS	Adult Demographics	How long altogether in jail since age 18 (ENTER NUMBER)
DA36_2EUNIT	NLAAS	Adult Demographics	Unit of time in jail
DA39A_S_1	NLAAS	Adult Demographics	Relationship of victim(s) killed in 911 attack.
DA40A_S_1	NLAAS	Adult Demographics	Relationship of victim(s) injured in 911 attack.
DA41	NLAAS	Adult Demographics	Witnessed 911 in person or at scene few days after
DM1	NLAAS	Demographics	Month, day, and year of birth
DM1_1	NLAAS	Demographics	Spanish or Hispanic descent
DM1_6A	NLAAS	Demographics	How old when first came to this country
FN10	NLAAS	Finances	Total family household income from government assistance programs
FN11	NLAAS	Finances	Total family household income from other sources in the past 12 months
FN13	NLAAS	Finances	Amount left over after paying debts
FN5	NLAAS	Finances	Spouse/partners earnings income in the past 12 months

Variable Name	Study	Section	Label
FN7	NLAAS	Finances	Personal earnings income of all other family members
FN9	NLAAS	Finances	Total family household income from Social Security
G27A_3	NLAAS	Generalized Anxiety Disorder	Worry episode 1+ month - month start
G27A_3A	NLAAS	Generalized Anxiety Disorder	Worry episode 1+ month - year start
MR21_4	NLAAS	Marriage	Confirm first spouse died
MR25	NLAAS	Marriage	How old when first spouse died
MR51	NLAAS	Marriage	Spouse/partner ever get involved in criminal activity
MR52	NLAAS	Marriage	Spouse/partner ever arrested or sent to prison
PH10_03A	NLAAS	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH10_04A	NLAAS	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH11_03A	NLAAS	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH11_04A	NLAAS	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH12_03A	NLAAS	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH12_04A	NLAAS	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH13_03A	NLAAS	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH13_04A	NLAAS	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH14_03A	NLAAS	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH14_04A	NLAAS	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH15_03A	NLAAS	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH15_04A	NLAAS	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH16_03A	NLAAS	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH16_04A	NLAAS	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH17_03A	NLAAS	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH17_04A	NLAAS	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH18_03A	NLAAS	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH18_04A	NLAAS	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH19_03A	NLAAS	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH19_04A	NLAAS	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH6_03A	NLAAS	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH6_04A	NLAAS	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH7_03A	NLAAS	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH7_04A	NLAAS	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH8_03A	NLAAS	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH8_04A	NLAAS	Pharmacoepidemiology	Best estimate of the day took MedName for the first time

Variable Name	Study	Section	Label
PH9_03A	NLAAS	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH9_04A	NLAAS	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PS9	NLAAS	Psychosis	Hospitalized because of psychotic experience
PT1	NLAAS	Post-Traumatic Stress Disorder	Ever participate in combat
PT10	NLAAS	Post-Traumatic Stress Disorder	Ever involved in a major natural disaster
PT11	NLAAS	Post-Traumatic Stress Disorder	Ever in a man-made disaster
PT12	NLAAS	Post-Traumatic Stress Disorder	Ever have a life-threatening illness
PT119a_1	NLAAS	Post-Traumatic Stress Disorder	Current age
PT120a_1	NLAAS	Post-Traumatic Stress Disorder	Current age
PT123	NLAAS	Post-Traumatic Stress Disorder	Describe random event
PT124	NLAAS	Post-Traumatic Stress Disorder	Describe situation when became refugee
PT125	NLAAS	Post-Traumatic Stress Disorder	See anyone killed when refugee
PT125a_S_1	NLAAS	Post-Traumatic Stress Disorder	Who see die when refugee - first mention
PT125a_S_2	NLAAS	Post-Traumatic Stress Disorder	Who see die when refugee - second mention
PT125A5	NLAAS	Post-Traumatic Stress Disorder	Number relatives see die when refugee
PT125A6	NLAAS	Post-Traumatic Stress Disorder	Number friends see die when refugee
PT125A8	NLAAS	Post-Traumatic Stress Disorder	Number strangers see die when refugee
PT126	NLAAS	Post-Traumatic Stress Disorder	Anyone (else) close suddenly die unexpectedly
PT126A2	NLAAS	Post-Traumatic Stress Disorder	Number parents died unexpectedly
PT126A3	NLAAS	Post-Traumatic Stress Disorder	Number children died unexpectedly
PT126A4	NLAAS	Post-Traumatic Stress Disorder	Number siblings died unexpectedly
PT126A5	NLAAS	Post-Traumatic Stress Disorder	Number other relatives died unexpectedly
PT126A6	NLAAS	Post-Traumatic Stress Disorder	Number friends died unexpectedly
PT126A7	NLAAS	Post-Traumatic Stress Disorder	Number acquaintances died unexpectedly
PT127	NLAAS	Post-Traumatic Stress Disorder	Anyone (else) close seriously harmed or imprisoned
PT127a_S_1	NLAAS	Post-Traumatic Stress Disorder	Who close suddenly seriously harmed - first mention
PT127a_S_2	NLAAS	Post-Traumatic Stress Disorder	Who close suddenly seriously harmed - second mention
PT127a_S_3	NLAAS	Post-Traumatic Stress Disorder	Who close suddenly seriously harmed - third mention
PT127a_S_4	NLAAS	Post-Traumatic Stress Disorder	Who close suddenly seriously harmed - fourth mention
PT127a_S_5	NLAAS	Post-Traumatic Stress Disorder	Who close suddenly seriously harmed - fifth mention
PT127A3	NLAAS	Post-Traumatic Stress Disorder	Number parents seriously harmed
PT127A5	NLAAS	Post-Traumatic Stress Disorder	Number siblings seriously harmed
PT127A6	NLAAS	Post-Traumatic Stress Disorder	Number other relatives seriously harmed
PT127A7	NLAAS	Post-Traumatic Stress Disorder	Number friends seriously harmed

Variable Name	Study	Section	Label
PT127A8	NLAAS	Post-Traumatic Stress Disorder	Number acquaintances seriously harmed
PT127A9	NLAAS	Post-Traumatic Stress Disorder	Number strangers seriously harmed
PT128	NLAAS	Post-Traumatic Stress Disorder	Ever suffer greatly from lack of food, water, shelter
PT129a	NLAAS	Post-Traumatic Stress Disorder	Country in which random event occurred
PT129b	NLAAS	Post-Traumatic Stress Disorder	Country in which random event occurred
PT129c	NLAAS	Post-Traumatic Stress Disorder	Country in which random event occurred
PT129A1	NLAAS	Post-Traumatic Stress Disorder	Country of traumatic event/random event - second mention
PT13	NLAAS	Post-Traumatic Stress Disorder	Ever badly beaten by parents
PT131_S_1	NLAAS	Post-Traumatic Stress Disorder	Affiliation during combat experience
PT132	NLAAS	Post-Traumatic Stress Disorder	Number times go on combat patrol or have other danger
PT133	NLAAS	Post-Traumatic Stress Disorder	Number times fire rounds at the enemy
PT134	NLAAS	Post-Traumatic Stress Disorder	Number times see someone get hit by incoming or outgoing rounds
PT135	NLAAS	Post-Traumatic Stress Disorder	Number times in danger of being injured or killed
PT136	NLAAS	Post-Traumatic Stress Disorder	Number times surrounded by the enemy
PT137	NLAAS	Post-Traumatic Stress Disorder	Percentage of personnel in unit killed, wounded or
PT138A	NLAAS	Post-Traumatic Stress Disorder	Amount of time altogether under enemy fire: number
PT138B	NLAAS	Post-Traumatic Stress Disorder	Amount of time altogether under enemy fire: unit of time
PT14	NLAAS	Post-Traumatic Stress Disorder	Ever badly beaten up by spouse or romantic partner
PT146	NLAAS	Post-Traumatic Stress Disorder	Driving, a passenger, or a pedestrian (RANDOM EVENT: AUTO ACCIDENT)
PT147_S_1	NLAAS	Post-Traumatic Stress Disorder	Whose fault was the accident (RANDOM EVENT: AUTO ACCIDENT)
PT148	NLAAS	Post-Traumatic Stress Disorder	Anyone killed (RANDOM EVENT: AUTO ACCIDENT)
PT148a_S_1	NLAAS	Post-Traumatic Stress Disorder	Who killed (RANDOM EVENT: AUTO ACCIDENT)
PT148A5	NLAAS	Post-Traumatic Stress Disorder	Number other relatives killed (RANDOM EVENT: AUTO ACCIDENT)
PT148A8	NLAAS	Post-Traumatic Stress Disorder	Number strangers killed (RANDOM EVENT: AUTO ACCIDENT)
PT149	NLAAS	Post-Traumatic Stress Disorder	Anyone seriously injured (RANDOM EVENT: AUTO ACCIDENT)
PT149a_S_1	NLAAS	Post-Traumatic Stress Disorder	Who seriously injured - first mention (RANDOM EVENT: AUTO ACCIDENT)
PT149a_S_2	NLAAS	Post-Traumatic Stress Disorder	Who seriously injured - second mention (RANDOM EVENT: AUTO ACCIDENT)
PT149a_S_3	NLAAS	Post-Traumatic Stress Disorder	Who seriously injured - third mention (RANDOM EVENT: AUTO ACCIDENT)
PT149A3	NLAAS	Post-Traumatic Stress Disorder	Number parents seriously injured (RANDOM EVENT: AUTO ACCIDENT)
PT149A4	NLAAS	Post-Traumatic Stress Disorder	Number children seriously injured (RANDOM EVENT: AUTO ACCIDENT)
PT149A5	NLAAS	Post-Traumatic Stress Disorder	Number siblings seriously injured (RANDOM EVENT: AUTO ACCIDENT)
PT149A6	NLAAS	Post-Traumatic Stress Disorder	Number other relatives seriously injured (RANDOM EVENT: AUTO ACCIDENT)
PT149A7	NLAAS	Post-Traumatic Stress Disorder	Number friends seriously injured (RANDOM EVENT: AUTO ACCIDENT)
PT15	NLAAS	Post-Traumatic Stress Disorder	Ever badly beaten up by anyone else

Variable Name	Study	Section	Label
PT156	NLAAS	Post-Traumatic Stress Disorder	See anyone die during random event
PT156a_S_1	NLAAS	Post-Traumatic Stress Disorder	Who died during random event - first mention
PT156a_S_2	NLAAS	Post-Traumatic Stress Disorder	Who died during random event - second mention
PT156A5	NLAAS	Post-Traumatic Stress Disorder	Number of relatives died during random event
PT156A6	NLAAS	Post-Traumatic Stress Disorder	Number of friends died during random event
PT156A7	NLAAS	Post-Traumatic Stress Disorder	Number of acquaintances died during random event
PT156A8	NLAAS	Post-Traumatic Stress Disorder	Number of strangers died during random event
PT157	NLAAS	Post-Traumatic Stress Disorder	Anyone else close die during random event
PT157a_S_1	NLAAS	Post-Traumatic Stress Disorder	Who else died during random event
PT157A5	NLAAS	Post-Traumatic Stress Disorder	Number other relatives died during random event
PT157A6	NLAAS	Post-Traumatic Stress Disorder	Number of friends died during random event
PT158	NLAAS	Post-Traumatic Stress Disorder	Anyone close seriously injured during random event
PT158a_S_1	NLAAS	Post-Traumatic Stress Disorder	Who injured during random event - first mention
PT158a_S_2	NLAAS	Post-Traumatic Stress Disorder	Who injured during random event - second mention
PT158A3	NLAAS	Post-Traumatic Stress Disorder	Number parents injured during random event
PT158A6	NLAAS	Post-Traumatic Stress Disorder	Number other relatives injured during random event
PT159	NLAAS	Post-Traumatic Stress Disorder	Forced to leave home during random event
PT159A	NLAAS	Post-Traumatic Stress Disorder	Leave home permanently or temporarily
PT16	NLAAS	Post-Traumatic Stress Disorder	Ever mugged, held up, or threatened with a weapon
PT161_S_1	NLAAS	Post-Traumatic Stress Disorder	What kind of natural disaster - first mention
PT161_S_2	NLAAS	Post-Traumatic Stress Disorder	What kind of natural disaster - second mention
PT161_S_3	NLAAS	Post-Traumatic Stress Disorder	What kind of natural disaster - third mention
PT161_S_4	NLAAS	Post-Traumatic Stress Disorder	What kind of natural disaster - fourth mention
PT17	NLAAS	Post-Traumatic Stress Disorder	Ever raped
PT170_S_1	NLAAS	Post-Traumatic Stress Disorder	Who did this (RANDOM OCCURRENCE OF RANDOM EVENT)
PT171	NLAAS	Post-Traumatic Stress Disorder	One-time occurrence or happen repeatedly
PT171A1	NLAAS	Post-Traumatic Stress Disorder	How long continue: number
PT171A2	NLAAS	Post-Traumatic Stress Disorder	How long continue: unit of time
PT172	NLAAS	Post-Traumatic Stress Disorder	Anything could have done to prevent event happening
PT173	NLAAS	Post-Traumatic Stress Disorder	Unexpected death of loved one - relationship to R
PT174	NLAAS	Post-Traumatic Stress Disorder	Unexpected death of loved one - how did person die
PT174A	NLAAS	Post-Traumatic Stress Disorder	Unexpected death of loved one - person been ill
PT174B1	NLAAS	Post-Traumatic Stress Disorder	Unexpected death of loved one - how long ill: number
PT174B2	NLAAS	Post-Traumatic Stress Disorder	Unexpected death of loved one - how long ill: unit of time

Variable Name	Study	Section	Label
PT175	NLAAS	Post-Traumatic Stress Disorder	Unexpected death of loved one - age of person at t
PT176	NLAAS	Post-Traumatic Stress Disorder	Unexpected death of loved one - anything could have done
PT18	NLAAS	Post-Traumatic Stress Disorder	Ever sexually assaulted other than rape
PT19	NLAAS	Post-Traumatic Stress Disorder	Ever been stalked
PT2	NLAAS	Post-Traumatic Stress Disorder	Ever serve as peacekeeper or relief worker in war
PT20	NLAAS	Post-Traumatic Stress Disorder	Someone very close to respondent ever die unexpectedly
PT21	NLAAS	Post-Traumatic Stress Disorder	Ever have child with life-threatening illness or injury
PT22	NLAAS	Post-Traumatic Stress Disorder	Anyone very close ever have extremely traumatic ex
PT22_1	NLAAS	Post-Traumatic Stress Disorder	Ever witness serious physical fights at home as a
PT23	NLAAS	Post-Traumatic Stress Disorder	Ever see someone badly injured or killed / unexpectedly see dead body
PT24	NLAAS	Post-Traumatic Stress Disorder	Ever do something that accidentally led to serious
PT25	NLAAS	Post-Traumatic Stress Disorder	Ever purposefully seriously injure, torture, or kill another
PT26	NLAAS	Post-Traumatic Stress Disorder	Ever see atrocities or carnage
PT27	NLAAS	Post-Traumatic Stress Disorder	Ever experience any other extremely traumatic or I
PT28	NLAAS	Post-Traumatic Stress Disorder	Ever have traumatic event that don't want to talk
PT29A	NLAAS	Post-Traumatic Stress Disorder	How old when first combat experience
PT29B1	NLAAS	Post-Traumatic Stress Disorder	How long serve in first combat: number
PT29B2	NLAAS	Post-Traumatic Stress Disorder	How long serve in first combat: unit of time
PT29C	NLAAS	Post-Traumatic Stress Disorder	How old when second combat experience
PT29C1	NLAAS	Post-Traumatic Stress Disorder	Checkpoint - report more than one combat occurrence
PT29D1	NLAAS	Post-Traumatic Stress Disorder	How long serve in second combat: number
PT29D2	NLAAS	Post-Traumatic Stress Disorder	How long serve in second combat: unit of time
PT3	NLAAS	Post-Traumatic Stress Disorder	Ever unarmed civilian where there was a war, revolution, coup, invasion
PT30	NLAAS	Post-Traumatic Stress Disorder	Ever serve as peacekeeper or relief worker in war
PT30A	NLAAS	Post-Traumatic Stress Disorder	How old first time peacekeeper
PT30B1	NLAAS	Post-Traumatic Stress Disorder	How long serve first time peacekeeper: number
PT30B2	NLAAS	Post-Traumatic Stress Disorder	How long serve first time peacekeeper: unit of time
PT30C	NLAAS	Post-Traumatic Stress Disorder	How old second time peacekeeper
PT30C1	NLAAS	Post-Traumatic Stress Disorder	Checkpoint - report more than one peacekeeper occurrence
PT30D1	NLAAS	Post-Traumatic Stress Disorder	How long serve second time peacekeeper: number
PT30D2	NLAAS	Post-Traumatic Stress Disorder	How long serve second time peacekeeper: unit of time
PT31	NLAAS	Post-Traumatic Stress Disorder	Ever an unarmed civilian in war zone
PT31A	NLAAS	Post-Traumatic Stress Disorder	How old first time unarmed civilian
PT31B1	NLAAS	Post-Traumatic Stress Disorder	How long serve first time unarmed civilian: number

Variable Name	Study	Section	Label
PT31B2	NLAAS	Post-Traumatic Stress Disorder	How long serve first time unarmed civilian: unit of time
PT31C	NLAAS	Post-Traumatic Stress Disorder	How old second time unarmed civilian
PT31C1	NLAAS	Post-Traumatic Stress Disorder	Checkpoint - report more than one unarmed civilian occurrence
PT31D1	NLAAS	Post-Traumatic Stress Disorder	How long serve second time unarmed civilian: number
PT31D2	NLAAS	Post-Traumatic Stress Disorder	How long serve second time unarmed civilian: unit of time
PT32	NLAAS	Post-Traumatic Stress Disorder	Ever live as a civilian where there was ongoing terror
PT32A	NLAAS	Post-Traumatic Stress Disorder	How old first time civilian in terror zone
PT32B1	NLAAS	Post-Traumatic Stress Disorder	How long serve first time civilian in terror zone
PT32B2	NLAAS	Post-Traumatic Stress Disorder	How long serve first time civilian in terror zone
PT32C	NLAAS	Post-Traumatic Stress Disorder	How old second time civilian in terror zone
PT32C1	NLAAS	Post-Traumatic Stress Disorder	Checkpoint - report more than one civilian where ongoing terror occurrence
PT32D1	NLAAS	Post-Traumatic Stress Disorder	How long serve second time civilian in terror zone
PT32D2	NLAAS	Post-Traumatic Stress Disorder	How long serve second time civilian in terror zone
PT33	NLAAS	Post-Traumatic Stress Disorder	Ever a refugee
PT33A	NLAAS	Post-Traumatic Stress Disorder	How old first time refugee
PT33B1	NLAAS	Post-Traumatic Stress Disorder	How long serve first time refugee: number
PT33B2	NLAAS	Post-Traumatic Stress Disorder	How long serve first time refugee: unit of time
PT33C	NLAAS	Post-Traumatic Stress Disorder	How old second time refugee
PT33C1	NLAAS	Post-Traumatic Stress Disorder	Checkpoint - report more than one refugee occurrence
PT33D1	NLAAS	Post-Traumatic Stress Disorder	How long serve second time refugee: number
PT33D2	NLAAS	Post-Traumatic Stress Disorder	How long serve second time refugee: unit of time
PT34	NLAAS	Post-Traumatic Stress Disorder	Ever kidnapped or held hostage
PT34A	NLAAS	Post-Traumatic Stress Disorder	How old first time kidnapped
PT34B1	NLAAS	Post-Traumatic Stress Disorder	How long held captive first time: number
PT34B2	NLAAS	Post-Traumatic Stress Disorder	How long held captive first time: unit of time
PT34C	NLAAS	Post-Traumatic Stress Disorder	How old second time kidnapped
PT34C1	NLAAS	Post-Traumatic Stress Disorder	Checkpoint - report more than one kidnapped occurrence
PT34D1	NLAAS	Post-Traumatic Stress Disorder	How long held captive second time: number
PT34D2	NLAAS	Post-Traumatic Stress Disorder	How long held captive second time: unit of time
PT35	NLAAS	Post-Traumatic Stress Disorder	Ever exposed to a toxic chemical
PT35A	NLAAS	Post-Traumatic Stress Disorder	How old first time exposed
PT35B	NLAAS	Post-Traumatic Stress Disorder	How many times exposed in lifetime
PT36	NLAAS	Post-Traumatic Stress Disorder	Ever involved in life-threatening automobile accident
PT36A	NLAAS	Post-Traumatic Stress Disorder	How old first time auto accident

Variable Name	Study	Section	Label
PT36B	NLAAS	Post-Traumatic Stress Disorder	How many times auto accident in lifetime
PT37	NLAAS	Post-Traumatic Stress Disorder	Ever in any other life-threatening accident
PT37A	NLAAS	Post-Traumatic Stress Disorder	How old first time in life-threatening accident
PT37B	NLAAS	Post-Traumatic Stress Disorder	How many times life-threatening accident in lifetime
PT38	NLAAS	Post-Traumatic Stress Disorder	Ever involved in major natural disaster
PT38A	NLAAS	Post-Traumatic Stress Disorder	How old first time in major natural disaster
PT38B	NLAAS	Post-Traumatic Stress Disorder	How many times major natural disaster in lifetime
PT39	NLAAS	Post-Traumatic Stress Disorder	Ever involved in man-made disaster
PT39A	NLAAS	Post-Traumatic Stress Disorder	How old first time in man-made disaster
PT39B	NLAAS	Post-Traumatic Stress Disorder	How many times man-made disaster in lifetime
PT4	NLAAS	Post-Traumatic Stress Disorder	Ever live as a civilian where there was ongoing terror
PT40	NLAAS	Post-Traumatic Stress Disorder	Ever have life-threatening illness
PT40A	NLAAS	Post-Traumatic Stress Disorder	How old first time have life-threatening illness
PT40B	NLAAS	Post-Traumatic Stress Disorder	How many times life-threatening illness in lifetime
PT41	NLAAS	Post-Traumatic Stress Disorder	Ever badly beaten up by parents
PT41A	NLAAS	Post-Traumatic Stress Disorder	How old first time beaten by parents
PT41B	NLAAS	Post-Traumatic Stress Disorder	How many times beaten by parents in lifetime
PT42	NLAAS	Post-Traumatic Stress Disorder	Ever beaten by spouse/partner
PT42A	NLAAS	Post-Traumatic Stress Disorder	How old first time beaten by spouse/partner
PT42B	NLAAS	Post-Traumatic Stress Disorder	How many times beaten by spouse/partner
PT43	NLAAS	Post-Traumatic Stress Disorder	Ever beaten by anyone else
PT43A	NLAAS	Post-Traumatic Stress Disorder	How old first time beaten by someone else
PT43B	NLAAS	Post-Traumatic Stress Disorder	How many times beaten by someone else in lifetime
PT44	NLAAS	Post-Traumatic Stress Disorder	Ever mugged, held up, or threatened with a weapon
PT44A	NLAAS	Post-Traumatic Stress Disorder	How old first time mugged
PT44B	NLAAS	Post-Traumatic Stress Disorder	How many times mugged in lifetime
PT45	NLAAS	Post-Traumatic Stress Disorder	Ever raped
PT45A	NLAAS	Post-Traumatic Stress Disorder	How old first time raped
PT45B	NLAAS	Post-Traumatic Stress Disorder	How many times raped in lifetime
PT46	NLAAS	Post-Traumatic Stress Disorder	Ever sexually assaulted other than rape
PT46A	NLAAS	Post-Traumatic Stress Disorder	How old first time sexually assaulted
PT46B	NLAAS	Post-Traumatic Stress Disorder	How many times sexually assaulted in lifetime
PT47	NLAAS	Post-Traumatic Stress Disorder	Ever been stalked
PT47A	NLAAS	Post-Traumatic Stress Disorder	How old first time stalked

Variable Name	Study	Section	Label
PT47B	NLAAS	Post-Traumatic Stress Disorder	How many times stalked in lifetime
PT48	NLAAS	Post-Traumatic Stress Disorder	Someone very close ever die unexpectedly
PT48A	NLAAS	Post-Traumatic Stress Disorder	How old first time someone close die unexpectedly
PT48B	NLAAS	Post-Traumatic Stress Disorder	How many times someone close die unexpectedly in
PT49	NLAAS	Post-Traumatic Stress Disorder	Ever have child with life-threatening illness or injury
PT49A	NLAAS	Post-Traumatic Stress Disorder	How old first time child had life-threatening illness
PT49B	NLAAS	Post-Traumatic Stress Disorder	How many times child had life-threatening illness
PT5	NLAAS	Post-Traumatic Stress Disorder	Ever a refugee
PT50	NLAAS	Post-Traumatic Stress Disorder	Anyone close ever have traumatic experience
PT50_1	NLAAS	Post-Traumatic Stress Disorder	Ever witness serious physical fights at home as a
PT50_1A	NLAAS	Post-Traumatic Stress Disorder	How old first time witness physical fights at home
PT50_1B	NLAAS	Post-Traumatic Stress Disorder	How many times witness physical fights at home
PT50A	NLAAS	Post-Traumatic Stress Disorder	How old first time someone close have traumatic ex
PT50B	NLAAS	Post-Traumatic Stress Disorder	How many times someone close have traumatic experience
PT51	NLAAS	Post-Traumatic Stress Disorder	Ever see someone badly injured or killed / unexpectedly see dead body
PT51A	NLAAS	Post-Traumatic Stress Disorder	How old first time see someone badly injured
PT51B	NLAAS	Post-Traumatic Stress Disorder	How many times see someone badly injured
PT52	NLAAS	Post-Traumatic Stress Disorder	Ever do something that accidentally led to serious
PT52A	NLAAS	Post-Traumatic Stress Disorder	How old first time do something to accidentally in
PT52B	NLAAS	Post-Traumatic Stress Disorder	How many times do something to accidentally injure
PT53	NLAAS	Post-Traumatic Stress Disorder	Ever purposefully seriously injure, torture, or kill
PT53A	NLAAS	Post-Traumatic Stress Disorder	How old first time purposefully injure someone
PT53B	NLAAS	Post-Traumatic Stress Disorder	How many times purposefully injure someone in life
PT54	NLAAS	Post-Traumatic Stress Disorder	Ever see atrocities or carnage
PT54A	NLAAS	Post-Traumatic Stress Disorder	How old first time see atrocities
PT54B	NLAAS	Post-Traumatic Stress Disorder	How many times see atrocities in lifetime
PT55	NLAAS	Post-Traumatic Stress Disorder	Ever experience any other extremely traumatic or I
PT55B	NLAAS	Post-Traumatic Stress Disorder	One-time event or on-going
PT56	NLAAS	Post-Traumatic Stress Disorder	Checkpoint - most traumatic event involve threat of death or serious injury
PT57	NLAAS	Post-Traumatic Stress Disorder	Ever have traumatic event that don't want to talk
PT59	NLAAS	Post-Traumatic Stress Disorder	SELECT RANDOM EVENT FROM EVENTS REPORTED
PT59A	NLAAS	Post-Traumatic Stress Disorder	SELECT RANDOM OCCURRENCE FROM EVENTS REPORTED
PT64B	NLAAS	Post-Traumatic Stress Disorder	Which occurrence - worst event
SC1	NLAAS	Screening	Respondent Age

Variable Name	Study	Section	Label
SC1_1	NLAAS	Screening	Respondent Sex
SC10_4A	NLAAS	Screening	Blindness-deafness-serious speech problem
SC10_4B	NLAAS	Screening	Hearing problem even with hearing aid
SC10_4C	NLAAS	Screening	Vision problem even with glasses or contacts
SC2	NLAAS	Screening	How long lived at current address: unit
SC2_1	NLAAS	Screening	Years lived in this state
SC2A	NLAAS	Screening	How long lived at current address: time period
SC3	NLAAS	Screening	Marital status
SC3A	NLAAS	Screening	Living in marriage-like relationship
SC4	NLAAS	Screening	Height (FEET)
SC4IN	NLAAS	Screening	Height: inches
SC4U	NLAAS	Screening	Height: feet or centimeters
SC5	NLAAS	Screening	Weight: number
SC5U	NLAAS	Screening	Weight: pounds or kilograms
SD11	NLAAS	Suicidality	Injury or poisoning - first suicide attempt
SD12	NLAAS	Suicidality	Medical attention needed - first suicide attempt
SD13	NLAAS	Suicidality	Overnight hospitalization - first suicide attempt
SD24	NLAAS	Suicidality	Injury or poisoning - last suicide attempt
SD25	NLAAS	Suicidality	Medical attention needed - last suicide attempt
SD26	NLAAS	Suicidality	Overnight hospitalization - last suicide attempt
SD29	NLAAS	Suicidality	Method used - last suicide attempt
SD14_201	NLAAS	Suicidality	What method: mention 1
SD14_202	NLAAS	Suicidality	What method: mention 2
SD14_203	NLAAS	Suicidality	What method: mention 3
SE12	NLAAS	Employment	Is spouse/partner of Spanish or Hispanic descent
SR130_S_1	NLAAS	Services	Types of herbal medicines used for emotions or mental health
SR133A	NLAAS	Services	Type of self-help group attended in past 12 months
SR135A	NLAAS	Services	Relationship self-help group to professional help
SU12D	NLAAS	Substance Use	Arrested more than once because drunk driving
SU33	NLAAS	Substance Use	Checkpoint logic based on number of attempts to quit drinking
SU65D	NLAAS	Substance Use	Arrested more than once because high
AD18A	NSAL	Attention Deficit	Which professional helpful
AD21B	NSAL	Attention Deficit	Why not ADD help from family/friends
AD47A	NSAL	Attention Deficit	Which professional helpful

Variable Name	Study	Section	Label
AD50B	NSAL	Attention Deficit	Main reason not get help from family/friends for impatience
AG28A	NSAL	Agoraphobia	Which professional helpful
AG31B	NSAL	Agoraphobia	Main reason not get help from family or friends
AGE_B_1	NSAL	Neighborhood	Respondent age
B18_RP	NSAL	Neighborhood	Random probe - religious
B19_RP	NSAL	Neighborhood	Random probe - spiritual
C10N	NSAL	Psychological Resources and Health	Ever told have HIV
C10P	NSAL	Psychological Resources and Health	Ever told have TB
C11N	NSAL	Psychological Resources and Health	HIV/AIDS interfere daily tasks
C11P	NSAL	Psychological Resources and Health	Tuberculosis interfere daily tasks
C16	NSAL	Psychological Resources and Health	Height (FEET)
C16A	NSAL	Psychological Resources and Health	Height (INCHES)
C18	NSAL	Psychological Resources and Health	Weight at age 18
C8_RP	NSAL	Psychological Resources and Health	Random probe - health
C8B_RP	NSAL	Psychological Resources and Health	Random probe - mental health
CD16G	NSAL	Conduct Disorder	As child ever steal someone's purse or bag by grabbing it
CD16H	NSAL	Conduct Disorder	As a child ever make anyone do something sexual
CD38	NSAL	Conduct Disorder	Ever arrested as a child
CD39	NSAL	Conduct Disorder	Ever sent to a jail / prison / juvenile correctional facility
CD39A	NSAL	Conduct Disorder	How old first time sent to a jail / prison / juvenile facility
CD39B1	NSAL	Conduct Disorder	How long stay in any (jail / prison / juvenile) facilities altogether
CD39B2	NSAL	Conduct Disorder	How long stay in any (jail / prison / juvenile) facilities altogether
D10_RP	NSAL	Employment	Random probe - what mean satisfied
D28_RP	NSAL	Employment	Random probe - what mean satisfied
D7	NSAL	Employment	How much paid
DP29C	NSAL	Depression	Physical causes of depression
DP73A	NSAL	Depression	Which professional helpful
DP76B	NSAL	Depression	Main reasons not get help from family or friends
E13	NSAL	Family and Friends	Current marital status
E13A	NSAL	Family and Friends	Current marriage - month married
E13AB	NSAL	Family and Friends	Current marriage - year married
E13D	NSAL	Family and Friends	Number times married
E13E	NSAL	Family and Friends	Other marriage - month married
E13EB	NSAL	Family and Friends	Other marriage - year married

Variable Name	Study	Section	Label
E13F	NSAL	Family and Friends	Last marriage - month married
E13FB	NSAL	Family and Friends	Last marriage - year married
E13G	NSAL	Family and Friends	Month separated/divorced/widowed
E13GB	NSAL	Family and Friends	Year separated/divorced/widowed
E13H	NSAL	Family and Friends	Month marriage began
E13HB	NSAL	Family and Friends	Year marriage began
E14A	NSAL	Family and Friends	Number times married including current marriage
E15A	NSAL	Family and Friends	Number times married
E5_RP	NSAL	Family and Friends	Random probe - closeness of feelings in family
EA39A	NSAL	Eating Disorders	Which professional helpful
EA42B	NSAL	Eating Disorders	Main reasons not get help from family or friends
F5	NSAL	Use of Help Resources	Describe most serious personal problem
F7C1	NSAL	Use of Help Resources	Race of person 1 talk to
F7C2	NSAL	Use of Help Resources	Race of person 2 talk to
F7C3	NSAL	Use of Help Resources	Race of person 3 talk to
F7C4	NSAL	Use of Help Resources	Race of person 4 talk to
F7C5	NSAL	Use of Help Resources	Race of person 5 talk to
F8CA	NSAL	Use of Help Resources	Race psychiatrist
F8CB	NSAL	Use of Help Resources	Race other mental health professional
F8CC	NSAL	Use of Help Resources	Race of family doctor
F8CD	NSAL	Use of Help Resources	Race other doctor
F8CE	NSAL	Use of Help Resources	Race other health professional
F8CF	NSAL	Use of Help Resources	Race clergy
F8CG	NSAL	Use of Help Resources	Race other healer
F8CI	NSAL	Use of Help Resources	Race other professional
G2_RP	NSAL	Group and Personal Identity, Discrimination	Random probe - discriminating circ
G6_RP	NSAL	Group and Personal Identity, Discrimination	Random probe - G6
G6A_CBRP	NSAL	Group and Personal Identity, Discrimination	More specific - random probe
G7	NSAL	Group and Personal Identity, Discrimination	Respondent skin color
G9	NSAL	Group and Personal Identity, Discrimination	Spouse skin color
GA1INTR1	NSAL	Generalized Anxiety Disorder	Interviewer introduction text
GA1INTR2	NSAL	Generalized Anxiety Disorder	Interviewer introduction text
GA1INTR3	NSAL	Generalized Anxiety Disorder	Interviewer introduction text
GA27A_3	NSAL	Generalized Anxiety Disorder	Worry episode 1+ month - month start

Variable Name	Study	Section	Label
GA27A_3A	NSAL	Generalized Anxiety Disorder	Worry episode 1+ month - year start
GA48A	NSAL	Generalized Anxiety Disorder	Which professional helpful
GA51B	NSAL	Generalized Anxiety Disorder	Main reason not get help from family/friends
GENDER	NSAL	Neighborhood	Respondent gender
H1	NSAL	Personal Data	Date of birth
H13D	NSAL	Personal Data	College attended
H14A	NSAL	Personal Data	Year enter military
H14B	NSAL	Personal Data	Year leave military
H20	NSAL	Personal Data	Ethnic background
H24B	NSAL	Personal Data	Best describes race
H25	NSAL	Personal Data	Biological father's racial background
H26	NSAL	Personal Data	Biological mother's racial background
H27A	NSAL	Personal Data	State/country biological father born
H27B	NSAL	Personal Data	State/country paternal grandmother born
H27C	NSAL	Personal Data	State/country paternal grandfather born
H27D	NSAL	Personal Data	State/country biological mother born
H27E	NSAL	Personal Data	State/country maternal grandmother born
H27F	NSAL	Personal Data	State/country maternal grandfather born
H29	NSAL	Personal Data	Age when came to U.S.
H2A	NSAL	Personal Data	State born
H2B	NSAL	Personal Data	Country born
H34	NSAL	Personal Data	Type of visa when first came to US
H37_RP	NSAL	Personal Data	Random probe - liberal/conservative
H3A1	NSAL	Personal Data	State live while growing up
H3B1	NSAL	Personal Data	Country live while growing up
H43	NSAL	Personal Data	Personal income from all sources last year
H44	NSAL	Personal Data	Total income before taxes
H45	NSAL	Personal Data	Family income before taxes
H46	NSAL	Personal Data	Total family income before taxes
H49C	NSAL	Personal Data	Last year received public assistance
H52	NSAL	Personal Data	Own/rent/buying home
H52A	NSAL	Personal Data	Family home worth
H54	NSAL	Personal Data	Remaining principal on mortgage
H58	NSAL	Personal Data	Currently on parole

Variable Name	Study	Section	Label
H5S	NSAL	Personal Data	Describe man who raised
H591	NSAL	Personal Data	Ever in confinement by type -1st mention
H592	NSAL	Personal Data	Ever in confinement by type -2nd mention
H593	NSAL	Personal Data	Ever in confinement by type -3rd mention
H594	NSAL	Personal Data	Ever in confinement by type -4th mention
H61A	NSAL	Personal Data	Number times served time in jail
H61B	NSAL	Personal Data	Amount of time in jail (ENTER YEARS)
H61BA	NSAL	Personal Data	Amount of time in jail (ENTER MONTHS)
H61BC	NSAL	Personal Data	Amount of time in jail (ENTER WEEKS)
H61BD	NSAL	Personal Data	Amount of time in jail (ENTER DAYS)
H61CA	NSAL	Personal Data	When first went to jail for month or more (MONTH)
H61CB	NSAL	Personal Data	When first went to jail for month or more (YEAR)
H61DA	NSAL	Personal Data	When released from jail (MONTH)
H61DB	NSAL	Personal Data	When released from jail (YEAR)
H61EA	NSAL	Personal Data	When last went to jail for month or more (MONTH)
H61EB	NSAL	Personal Data	When last went to jail for month or more (YEAR)
H61FA	NSAL	Personal Data	When released from jail last time (MONTH)
H61FB	NSAL	Personal Data	When released from jail last time (YEAR)
H6S	NSAL	Personal Data	Describe woman who raised
HISP_B_1	NSAL	Neighborhood	Respondent Hispanic
J5AA	NSAL	Technology and Roots	Birth order of respondent
M37A	NSAL	Mania	Which professional helpful
M40B	NSAL	Mania	Main reasons not get help from family or friends
OD16A	NSAL	Oppositional Defiant Disorder	Which professional helpful
OD19B	NSAL	Oppositional Defiant Disorder	Main reasons not get help from family or friends
PD54A	NSAL	Panic Disorder	Which professional helpful
PD57B	NSAL	Panic Disorder	Main reasons not get help from family or friends
PH10_03A	NSAL	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH10_04A	NSAL	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH11_03A	NSAL	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH11_04A	NSAL	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH12_03A	NSAL	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH12_04A	NSAL	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH13_03A	NSAL	Pharmacoepidemiology	Best estimate of the month took MedName for the first time

Variable Name	Study	Section	Label
PH13_04A	NSAL	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH14_03A	NSAL	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH14_04A	NSAL	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH15_03A	NSAL	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH15_04A	NSAL	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH16_03A	NSAL	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH16_04A	NSAL	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH17_03A	NSAL	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH17_04A	NSAL	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH18_03A	NSAL	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH18_04A	NSAL	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH19_03A	NSAL	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH19_04A	NSAL	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH4INTR1	NSAL	Pharmacoepidemiology	Which meds from list take for emotions
PH4INTR2	NSAL	Pharmacoepidemiology	Which meds from list take for other problems
PH5_03A	NSAL	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH5_04A	NSAL	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH6_03A	NSAL	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH6_04A	NSAL	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH7_03A	NSAL	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH7_04A	NSAL	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH8_03A	NSAL	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH8_04A	NSAL	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PH9_03A	NSAL	Pharmacoepidemiology	Best estimate of the month took MedName for the first time
PH9_04A	NSAL	Pharmacoepidemiology	Best estimate of the day took MedName for the first time
PS9	NSAL	Psychosis	Hospitalized because of psychotic experience
PT1	NSAL	Post-Traumatic Stress Disorder	Ever participate in combat
PT10	NSAL	Post-Traumatic Stress Disorder	Ever involved in a major natural disaster
PT11	NSAL	Post-Traumatic Stress Disorder	Ever in a man-made disaster
PT12	NSAL	Post-Traumatic Stress Disorder	Ever have a life-threatening illness
PT13	NSAL	Post-Traumatic Stress Disorder	Ever badly beaten by parents
PT14	NSAL	Post-Traumatic Stress Disorder	Ever badly beaten up by spouse or romantic partner
PT15	NSAL	Post-Traumatic Stress Disorder	Ever badly beaten up by anyone else
PT16	NSAL	Post-Traumatic Stress Disorder	Ever mugged, held up, or threatened with a weapon

Variable Name	Study	Section	Label
PT17	NSAL	Post-Traumatic Stress Disorder	Ever raped
PT18	NSAL	Post-Traumatic Stress Disorder	Ever sexually assaulted other than rape
PT19	NSAL	Post-Traumatic Stress Disorder	Ever been stalked
PT2	NSAL	Post-Traumatic Stress Disorder	Ever serve as peacekeeper or relief worker in war
PT20	NSAL	Post-Traumatic Stress Disorder	Someone very close to respondent ever die unexpectedly
PT21	NSAL	Post-Traumatic Stress Disorder	Ever have child with life-threatening illness or injury
PT22	NSAL	Post-Traumatic Stress Disorder	Anyone very close ever have extremely traumatic ex
PT22_1	NSAL	Post-Traumatic Stress Disorder	Ever witness serious physical fights at home as a
PT23	NSAL	Post-Traumatic Stress Disorder	Ever see someone badly injured or killed / unexpectedly see dead body
PT24	NSAL	Post-Traumatic Stress Disorder	Ever do something that accidentally led to serious
PT25	NSAL	Post-Traumatic Stress Disorder	Ever purposefully seriously injure, torture, or kill another
PT250A	NSAL	Post-Traumatic Stress Disorder	Which professional helpful
PT253B	NSAL	Post-Traumatic Stress Disorder	Main reasons did not get help from family or friends
PT26	NSAL	Post-Traumatic Stress Disorder	Ever see atrocities or carnage
PT27	NSAL	Post-Traumatic Stress Disorder	Ever experience any other extremely traumatic or I
PT28	NSAL	Post-Traumatic Stress Disorder	Ever have traumatic event that don't want to talk
PT29A	NSAL	Post-Traumatic Stress Disorder	How old when first combat experience
PT29B1	NSAL	Post-Traumatic Stress Disorder	How long serve in first combat: number
PT29B2	NSAL	Post-Traumatic Stress Disorder	How long serve in first combat: unit of time
PT29C	NSAL	Post-Traumatic Stress Disorder	How old when second combat experience
PT29C1	NSAL	Post-Traumatic Stress Disorder	Checkpoint - report more than one combat occurrence
PT29D1	NSAL	Post-Traumatic Stress Disorder	How long serve in second combat: number
PT29D2	NSAL	Post-Traumatic Stress Disorder	How long serve in second combat: unit of time
PT3	NSAL	Post-Traumatic Stress Disorder	Ever unarmed civilian where there was a war, revolution, coup, invasion
PT30	NSAL	Post-Traumatic Stress Disorder	Ever serve as peacekeeper or relief worker in war
PT30A	NSAL	Post-Traumatic Stress Disorder	How old first time peacekeeper
PT30B1	NSAL	Post-Traumatic Stress Disorder	How long serve first time peacekeeper: number
PT30B2	NSAL	Post-Traumatic Stress Disorder	How long serve first time peacekeeper: unit of time
PT30C	NSAL	Post-Traumatic Stress Disorder	How old second time peacekeeper
PT30C1	NSAL	Post-Traumatic Stress Disorder	Checkpoint - report more than one peacekeeper occurrence
PT30D1	NSAL	Post-Traumatic Stress Disorder	How long serve second time peacekeeper: number
PT30D2	NSAL	Post-Traumatic Stress Disorder	How long serve second time peacekeeper: unit of time
PT31	NSAL	Post-Traumatic Stress Disorder	Ever an unarmed civilian in war zone
PT31A	NSAL	Post-Traumatic Stress Disorder	How old first time unarmed civilian

Variable Name	Study	Section	Label
PT31B1	NSAL	Post-Traumatic Stress Disorder	How long serve first time unarmed civilian: number
PT31B2	NSAL	Post-Traumatic Stress Disorder	How long serve first time unarmed civilian: unit of time
PT31C	NSAL	Post-Traumatic Stress Disorder	How old second time unarmed civilian
PT31C1	NSAL	Post-Traumatic Stress Disorder	Checkpoint - report more than one unarmed civilian
PT31D1	NSAL	Post-Traumatic Stress Disorder	How long serve second time unarmed civilian: number
PT31D2	NSAL	Post-Traumatic Stress Disorder	How long serve second time unarmed civilian: unit of time
PT32	NSAL	Post-Traumatic Stress Disorder	Ever live as a civilian where there was ongoing terror
PT32A	NSAL	Post-Traumatic Stress Disorder	How old first time civilian in terror zone
PT32B1	NSAL	Post-Traumatic Stress Disorder	How long serve first time civilian in terror zone
PT32B2	NSAL	Post-Traumatic Stress Disorder	How long serve first time civilian in terror zone
PT32C	NSAL	Post-Traumatic Stress Disorder	How old second time civilian in terror zone
PT32C1	NSAL	Post-Traumatic Stress Disorder	Checkpoint - report more than one occurrence
PT32D1	NSAL	Post-Traumatic Stress Disorder	How long serve second time civilian in terror zone
PT32D2	NSAL	Post-Traumatic Stress Disorder	How long serve second time civilian in terror zone
PT33	NSAL	Post-Traumatic Stress Disorder	Ever a refugee
PT33A	NSAL	Post-Traumatic Stress Disorder	How old first time refugee
PT33B1	NSAL	Post-Traumatic Stress Disorder	How long serve first time refugee: number
PT33B2	NSAL	Post-Traumatic Stress Disorder	How long serve first time refugee: unit of time
PT33C	NSAL	Post-Traumatic Stress Disorder	How old second time refugee
PT33C1	NSAL	Post-Traumatic Stress Disorder	Checkpoint - report more than one refugee occurrence
PT33D1	NSAL	Post-Traumatic Stress Disorder	How long serve second time refugee: number
PT33D2	NSAL	Post-Traumatic Stress Disorder	How long serve second time refugee: unit of time
PT34	NSAL	Post-Traumatic Stress Disorder	Ever kidnapped or held hostage
PT34A	NSAL	Post-Traumatic Stress Disorder	How old first time kidnapped
PT34B1	NSAL	Post-Traumatic Stress Disorder	How long held captive first time: number
PT34B2	NSAL	Post-Traumatic Stress Disorder	How long held captive first time: unit of time
PT34C	NSAL	Post-Traumatic Stress Disorder	How old second time kidnapped
PT34C1	NSAL	Post-Traumatic Stress Disorder	Checkpoint - report more than one kidnapped occurrence
PT34D1	NSAL	Post-Traumatic Stress Disorder	How long held captive second time: number
PT34D2	NSAL	Post-Traumatic Stress Disorder	How long held captive second time: unit of time
PT35	NSAL	Post-Traumatic Stress Disorder	Ever exposed to a toxic chemical
PT35A	NSAL	Post-Traumatic Stress Disorder	How old first time exposed
PT35B	NSAL	Post-Traumatic Stress Disorder	How many times exposed in lifetime
PT36	NSAL	Post-Traumatic Stress Disorder	Ever involved in life-threatening automobile accident

Variable Name	Study	Section	Label
PT36A	NSAL	Post-Traumatic Stress Disorder	How old first time auto accident
PT36B	NSAL	Post-Traumatic Stress Disorder	How many times auto accident in lifetime
PT37	NSAL	Post-Traumatic Stress Disorder	Ever in any other life-threatening accident
PT37A	NSAL	Post-Traumatic Stress Disorder	How old first time in life-threatening accident
PT37B	NSAL	Post-Traumatic Stress Disorder	How many times life-threatening accident in lifetime
PT38	NSAL	Post-Traumatic Stress Disorder	Ever involved in major natural disaster
PT38A	NSAL	Post-Traumatic Stress Disorder	How old first time in major natural disaster
PT38B	NSAL	Post-Traumatic Stress Disorder	How many times major natural disaster in lifetime
PT39	NSAL	Post-Traumatic Stress Disorder	Ever involved in man-made disaster
PT39A	NSAL	Post-Traumatic Stress Disorder	How old first time in man-made disaster
PT39B	NSAL	Post-Traumatic Stress Disorder	How many times man-made disaster in lifetime
PT4	NSAL	Post-Traumatic Stress Disorder	Ever live as a civilian where there was ongoing terror
PT40	NSAL	Post-Traumatic Stress Disorder	Ever have life-threatening illness
PT40A	NSAL	Post-Traumatic Stress Disorder	How old first time have life-threatening illness
PT40B	NSAL	Post-Traumatic Stress Disorder	How many times life-threatening illness in lifetime
PT41	NSAL	Post-Traumatic Stress Disorder	Ever badly beaten up by parents
PT41A	NSAL	Post-Traumatic Stress Disorder	How old first time beaten by parents
PT41B	NSAL	Post-Traumatic Stress Disorder	How many times beaten by parents in lifetime
PT42	NSAL	Post-Traumatic Stress Disorder	Ever beaten by spouse/partner
PT42A	NSAL	Post-Traumatic Stress Disorder	How old first time beaten by spouse/partner
PT42B	NSAL	Post-Traumatic Stress Disorder	How many times beaten by spouse/partner
PT43	NSAL	Post-Traumatic Stress Disorder	Ever beaten by anyone else
PT43A	NSAL	Post-Traumatic Stress Disorder	How old first time beaten by someone else
PT43B	NSAL	Post-Traumatic Stress Disorder	How many times beaten by someone else in lifetime
PT44	NSAL	Post-Traumatic Stress Disorder	Ever mugged, held up, or threatened with a weapon
PT44A	NSAL	Post-Traumatic Stress Disorder	How old first time mugged
PT44B	NSAL	Post-Traumatic Stress Disorder	How many times mugged in lifetime
PT45	NSAL	Post-Traumatic Stress Disorder	Ever raped
PT45A	NSAL	Post-Traumatic Stress Disorder	How old first time raped
PT45B	NSAL	Post-Traumatic Stress Disorder	How many times raped in lifetime
PT46	NSAL	Post-Traumatic Stress Disorder	Ever sexually assaulted other than rape
PT46A	NSAL	Post-Traumatic Stress Disorder	How old first time sexually assaulted
PT46B	NSAL	Post-Traumatic Stress Disorder	How many times sexually assaulted in lifetime
PT47	NSAL	Post-Traumatic Stress Disorder	Ever been stalked

Variable Name	Study	Section	Label
PT47A	NSAL	Post-Traumatic Stress Disorder	How old first time stalked
PT47B	NSAL	Post-Traumatic Stress Disorder	How many times stalked in lifetime
PT48	NSAL	Post-Traumatic Stress Disorder	Someone very close ever die unexpectedly
PT48A	NSAL	Post-Traumatic Stress Disorder	How old first time someone close die unexpectedly
PT48B	NSAL	Post-Traumatic Stress Disorder	How many times someone close die unexpectedly in
PT49	NSAL	Post-Traumatic Stress Disorder	Ever have child with life-threatening illness or injury
PT49A	NSAL	Post-Traumatic Stress Disorder	How old first time child had life-threatening illness
PT49B	NSAL	Post-Traumatic Stress Disorder	How many times child had life-threatening illness
PT5	NSAL	Post-Traumatic Stress Disorder	Ever a refugee
PT50	NSAL	Post-Traumatic Stress Disorder	Anyone close ever have traumatic experience
PT50_1	NSAL	Post-Traumatic Stress Disorder	Ever witness serious physical fights at home as a
PT50_1A	NSAL	Post-Traumatic Stress Disorder	How old first time witness physical fights at home
PT50_1B	NSAL	Post-Traumatic Stress Disorder	How many times witness physical fights at home
PT50A	NSAL	Post-Traumatic Stress Disorder	How old first time someone close have traumatic ex
PT50B	NSAL	Post-Traumatic Stress Disorder	How many times someone close have traumatic experience
PT51	NSAL	Post-Traumatic Stress Disorder	Ever see someone badly injured or killed / unexpectedly see dead body
PT51A	NSAL	Post-Traumatic Stress Disorder	How old first time see someone badly injured
PT51B	NSAL	Post-Traumatic Stress Disorder	How many times see someone badly injured
PT52	NSAL	Post-Traumatic Stress Disorder	Ever do something that accidentally led to serious
PT52A	NSAL	Post-Traumatic Stress Disorder	How old first time do something to accidentally in
PT52B	NSAL	Post-Traumatic Stress Disorder	How many times do something to accidentally injure
PT53	NSAL	Post-Traumatic Stress Disorder	Ever purposefully seriously injure, torture, or kill
PT53A	NSAL	Post-Traumatic Stress Disorder	How old first time purposefully injure someone
PT53B	NSAL	Post-Traumatic Stress Disorder	How many times purposefully injure someone in life
PT54	NSAL	Post-Traumatic Stress Disorder	Ever see atrocities or carnage
PT54A	NSAL	Post-Traumatic Stress Disorder	How old first time see atrocities
PT54B	NSAL	Post-Traumatic Stress Disorder	How many times see atrocities in lifetime
PT55	NSAL	Post-Traumatic Stress Disorder	Ever experience any other extremely traumatic or I
PT55B	NSAL	Post-Traumatic Stress Disorder	One-time event or on-going
PT56	NSAL	Post-Traumatic Stress Disorder	Checkpoint - most traumatic event involve threat of death
PT57	NSAL	Post-Traumatic Stress Disorder	Ever have traumatic event that don't want to talk
PT64B	NSAL	Post-Traumatic Stress Disorder	Which occurrence - worst event
RACE_B_1	NSAL	Neighborhood	Respondent Race
SA47A	NSAL	Separation Anxiety	Which professional helpful

Variable Name	Study	Section	Label
SA50B	NSAL	Separation Anxiety	Main reasons not get help from family or friends
SC21_RP	NSAL	Screening	Main reasons not get help from family/friends for separation anxiety
SD11	NSAL	Suicidality	Injury or poisoning - first suicide attempt
SD12	NSAL	Suicidality	Medical attention needed - first suicide attempt
SD13	NSAL	Suicidality	Overnight hospitalization - first suicide attempt
SD14_2	NSAL	Suicidality	Suicide method
SO32B	NSAL	Social Phobia	Which professional helpful
SR105A	NSAL	Services	Main reasons not get help from family/friends for social phobia
SR135A	NSAL	Services	Type of self-help group attended in past 12 months
SU12D	NSAL	Substance Use	Main reasons not get help from family/friends for substance abuse
SU33	NSAL	Substance Use	Arrested more than once because drunk driving
SU65D	NSAL	Substance Use	Checkpoint logic based on number of attempts to quit
SU99A	NSAL	Substance Use	Arrested more than once because high
TR1B	NSAL	Terror	Injured in 911
TR2A	NSAL	Terror	Someone close witness 911 - relationship
TR2C	NSAL	Terror	Were these (close witnesses) injured?
TR3A	NSAL	Terror	Someone close in buildings during 911 - relationship
TR3C	NSAL	Terror	What happened to close persons in bldgs
WI_CAR_B_1	NSAL	Neighborhood	Respondent WI or Caribbean

Missing Data Codes

The CPES dataset uses the following missing data codes:

- 7 Missing (Other)
- 8 Don't Know
- 9 Refused

"Missing (Other)" generally is used for numeric questions for which interviewers were instructed to enter a special code for responses that did not fall within a valid code range, for example, "97" for "DOES NOT APPLY" in response to a frequency question that allowed for a two-digit response. In the public release dataset all such responses have been changed to "-7". The following table summarizes questions for which this missing data code applies.

CPES Variable	Study	Study Variable Name	Variable Label	Value Recoded to -7 Missing (Other)	Interviewer Instruction
V05940	NCS-R	AD10a	Worst month in past year-attention diffic interf w/ home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V05940	NSAL	AD10a	Worst month in past year-attention diffic interf w/ home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V05941	NCS-R	AD10b	Worst month in past year-atten diffic interf w/ ability to work	97	IF 'DOES NOT APPLY', CODE 97
V05941	NSAL	AD10b	Worst month in past year-atten diffic interf w/ ability to work	97	IF 'DOES NOT APPLY', CODE 97
V05942	NCS-R	AD10c	Worst mth in past yr-atten diffic interf w/ form/maint relations	97	IF 'DOES NOT APPLY', CODE 97
V05942	NSAL	AD10c	Worst mth in past yr-atten diffic interf w/ form/maint relations	97	IF 'DOES NOT APPLY', CODE 97
V05943	NCS-R	AD10d	Worst month in past yr-attention diffic interf w/ social life	97	IF 'DOES NOT APPLY', CODE 97
V05943	NSAL	AD10d	Worst month in past yr-attention diffic interf w/ social life	97	IF 'DOES NOT APPLY', CODE 97
V06013	NCS-R	AD39a	Worst month in past year-impatience interf w/ home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V06013	NSAL	AD39a	Worst month in past year-impatience interf w/ home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V06014	NCS-R	AD39b	Worst month in past year-impatience interf w/ ability to work	97	IF 'DOES NOT APPLY', CODE 97
V06014	NSAL	AD39b	Worst month in past year-impatience interf w/ ability to work	97	IF 'DOES NOT APPLY', CODE 97
V06015	NCS-R	AD39c	Worst month past year-impat interf w/ form/maint relation	97	IF 'DOES NOT APPLY', CODE 97
V06015	NSAL	AD39c	Worst month past year-impat interf w/ form/maint relation	97	IF 'DOES NOT APPLY', CODE 97
V06016	NCS-R	AD39d	Worst month in past yr-impatience interf w/ social life	97	IF 'DOES NOT APPLY', CODE 97
V06016	NSAL	AD39d	Worst month in past yr-impatience interf w/ social life	97	IF 'DOES NOT APPLY', CODE 97
V01689	NCS-R	AG20a	Severe mth-extent to which fear interfere home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V01689	NLAAS	AG20a	Severe mth-extent to which fear interfere home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V01689	NSAL	AG20a	Severe mth-extent to which fear interfere home mgmt	97	INTERVIEWER: IF 'DOES NOT APPLY', CODE 97

CPES Variable	Study	Study Variable Name	Variable Label	Value Recoded to -7 Missing (Other)	Interviewer Instruction
V01690	NCS-R	AG20b	Severe mth-extent to which fear interf with ability to work	97	IF 'DOES NOT APPLY', CODE 97
V01690	NLAAS	AG20b	Severe mth-extent to which fear interf with ability to work	97	IF 'DOES NOT APPLY', CODE 97
V01690	NSAL	AG20b	Severe mth-extent to which fear interf with ability to work	97	INTERVIEWER: IF 'DOES NOT APPLY', CODE 97
V01691	NCS-R	AG20c	Severe month-extent to which fear interf form/maintain rel	97	IF 'DOES NOT APPLY', CODE 97
V01691	NLAAS	AG20c	Severe month-extent to which fear interf form/maintain rel	97	IF 'DOES NOT APPLY', CODE 97
V01691	NSAL	AG20c	Severe month-extent to which fear interf form/maintain rel	97	INTERVIEWER: IF 'DOES NOT APPLY', CODE 97
V01692	NCS-R	AG20d	Severe month-exent to which fear interfere with social life	97	IF 'DOES NOT APPLY', CODE 97
V01692	NLAAS	AG20d	Severe month-exent to which fear interfere with social life	97	IF 'DOES NOT APPLY', CODE 97
V01692	NSAL	AG20d	Severe month-exent to which fear interfere with social life	97	INTERVIEWER: IF 'DOES NOT APPLY', CODE 97
V04140	NCS-R	CC10a	Extent to which condition interfered with home management	97	IF 'DOES NOT APPLY', CODE 97
V04140	NLAAS	CC10a	Extent to which condition interfered with home management	97	IF 'DOES NOT APPLY', CODE 97
V04141	NCS-R	CC10b	Extent to which condition interfered with ability to work	97	IF 'DOES NOT APPLY', CODE 97
V04141	NLAAS	CC10b	Extent to which condition interfered with ability to work	97	IF 'DOES NOT APPLY', CODE 97
V04142	NCS-R	CC10c	Extent to which condition interfered w/ form/maintain relations	97	IF 'DOES NOT APPLY', CODE 97
V04142	NLAAS	CC10c	Extent to which condition interfered w/ form/maintain relations	97	IF 'DOES NOT APPLY', CODE 97
V04143	NCS-R	CC10d	The extent to which the condition interfered with social life	97	IF 'DOES NOT APPLY', CODE 97
V04143	NLAAS	CC10d	The extent to which the condition interfered with social life	97	IF 'DOES NOT APPLY', CODE 97
V04319	NLAAS	CC50_16_	Cost of going to plan doctor for routine visit	997	FULL PRICE: CODE 997
V04319	NCS-R	CC50_16_5	Cost of going to plan doctor for routine visit	997	FULL PRICE: CODE 997
V04321	NLAAS	CC50_17_	Cost for prescription medicines?	997	FULL PRICE: CODE 997
V04321	NCS-R	CC50_17_5	Cost for prescription medicines?	997	FULL PRICE: CODE 997
V05448	NCS-R	CN3	Age of 1st sexual intercourse	997	IF R SAYS 'NEVER': CODE 997
V05448	NLAAS	CN3	Age of 1st sexual intercourse	997	IF R SAYS 'NEVER': CODE 997
V00989	NCS-R	D66a	Severe month in past year interfered w/ home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V00989	NLAAS	D66a	Severe month in past year interfered w/ home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V00990	NCS-R	D66b	Severe month in past year interfered w/ ability to work	97	IF 'DOES NOT APPLY', CODE 97
V00990	NLAAS	D66b	Severe month in past year interfered w/ ability to work	97	IF 'DOES NOT APPLY', CODE 97
V00991	NCS-R	D66c	Severe mth in past yr interfered w/ form/maint close relations	97	IF 'DOES NOT APPLY', CODE 97
V00991	NLAAS	D66c	Severe mth in past yr interfered w/ form/maint close relations	97	IF 'DOES NOT APPLY', CODE 97

CPES Variable	Study	Study Variable Name	Variable Label	Value Recoded to -7 Missing (Other)	Interviewer Instruction
V00992	NCS-R	D66d	Severe month in past interfered with social life	97	IF 'DOES NOT APPLY', CODE 97
V00992	NLAAS	D66d	Severe month in past interfered with social life	97	IF 'DOES NOT APPLY', CODE 97
V03086	NCS-R	DM1_15	Age 1st yr worked 6 mths + at paid job	997	IF VOL: "NEVER WORKED" CODE: 997
V00989	NSAL	DP66a	Severe month in past year interfered w/ home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V00990	NSAL	DP66b	Severe month in past year interfered w/ ability to work	97	IF 'DOES NOT APPLY', CODE 97
V00991	NSAL	DP66c	Severe mth in past yr interfered w/ form/maint close relations	97	IF 'DOES NOT APPLY', CODE 97
V00992	NSAL	DP66d	Severe month in past interfered with social life	97	IF 'DOES NOT APPLY', CODE 97
V04724	NCS-R	EA32a	Worst month past yr-eating/wgt interf with chores at home	97	IF 'DOES NOT APPLY', CODE 97
V04725	NLAAS	EA32a	Worst month past yr-eating/wgt interf with chores at home	97	IF 'DOES NOT APPLY', CODE 97
V04725	NSAL	EA32a	Worst month past yr-eating/wgt interf with chores at home	97	IF 'DOES NOT APPLY', CODE 97
V04726	NCS-R	EA32b	Worst month past yr-eating/wgt interfere with work/school	97	IF 'DOES NOT APPLY', CODE 97
V04727	NLAAS	EA32b	Worst month past yr-eating/wgt interfere with work/school	97	IF 'DOES NOT APPLY', CODE 97
V04727	NSAL	EA32b	Worst month past yr-eating/wgt interfere with work/school	97	IF 'DOES NOT APPLY', CODE 97
V04729	NCS-R	EA32c	Worst month past yr-eating/wgt interf w/ family relations	97	IF 'DOES NOT APPLY', CODE 97
V04728	NLAAS	EA32c	Worst month past yr-eating/wgt interf w/ form/maint relations	97	IF 'DOES NOT APPLY', CODE 97
V04728	NSAL	EA32c	Worst month past yr-eating/wgt interf w/ form/maint relations	97	IF 'DOES NOT APPLY', CODE 97
V04730	NCS-R	EA32d	Worst month past yr-eating/wgt interfere with social life	97	IF 'DOES NOT APPLY', CODE 97
V04730	NLAAS	EA32d	Worst month past yr-eating/wgt interfere with social life	97	IF 'DOES NOT APPLY', CODE 97
V04730	NSAL	EA32d	Worst month past yr-eating/wgt interfere with social life	97	IF 'DOES NOT APPLY', CODE 97
V05119	NCS-R	EM1	Age 1st yr worked more than 6 months at paid job	996	IF VOL: 'NEVER WORKED SIX MONTHS', CODE '996'
V05119	NCS-R	EM1	Age 1st yr worked more than 6 months at paid job	997	IF VOL: 'NEVER WORKED', CODE '997'
V05119	NLAAS	EM1	Age 1st yr worked more than 6 months at paid job	997	IF VOL: 'NEVER WORKED', CODE '997'
V05119	NLAAS	EM1	Age 1st yr worked more than 6 months at paid job	996	IF VOL: 'NEVER WORKED SIX MONTHS', CODE '996'
V05186	NCS-R	EM10_1a	Length of time expect ill/disability to prevent you from working	996	ENTER 996 FOR 'PERMANENT'
V05189	NCS-R	EM12a	Length of time since last worked	997	(IF VOL) CURRENTLY WORK CODE: 997
V05204	NCS-R	EM17	# hours work for pay/profit in average week	97	IF LESS THAN ONE HOUR PER WEEK, ENTER '97'
V05121	NCS-R	EM2	# years employed at least 6 mths/year part/full time	996	IF VOL: 'NEVER WORKED SIX MONTHS', CODE '996'
V05121	NCS-R	EM2	# years employed at least 6 mths/year part/full time	997	IF VOL: 'NEVER WORKED', CODE '997'

CPES Variable	Study	Study Variable Name	Variable Label	Value Recoded to -7 Missing (Other)	Interviewer Instruction
V05121	NLAAS	EM2	# years employed at least 6 mths/year part/full time	997	IF VOL: 'NEVER WORKED', CODE '997'
V05121	NLAAS	EM2	# years employed at least 6 mths/year part/full time	996	IF VOL: 'NEVER WORKED SIX MONTHS', CODE '996'
V05213	NCS-R	EM23b	Amt of \$ could earn w/ your health/ed/training if employed	997	(IF R VOL: 'SOMEONE IN MY HEALTH COULD NOT GET A JOB', CODE THE RESPONSE '997')
V05213	NLAAS	EM23b	Amt of \$ could earn w/ your health/ed/training if employed	997	IF R VOL: 'SOMEONE IN MY HEALTH COULD NOT GET A JOB', CODE THE RESPONSE '997'
V05239	NCS-R	EM37	Overall performance on days worked in past 30 days	97	DOES NOT APPLY 97
V05240	NCS-R	EM38	Usual job performance in past year or 2	97	DOES NOT APPLY 97
V05241	NCS-R	EM39	Usual performance of most workers on your job	97	DOES NOT APPLY 97
V05123	NCS-R	EM4a	Longest time not working for pay excl student/retirement	97	IF NONE, ENTER '97'
V05123	NLAAS	EM4a	Longest time not working for pay excl student/retirement	97	IF NONE, ENTER '97'
V01867	NCS-R	G38a	Extent which severe worry interfered w/ home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V01867	NLAAS	G38a	Extent which severe worry interfered w/ home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V01868	NCS-R	G38b	Extent which severe worry interfered w/ ability to work	97	IF 'DOES NOT APPLY', CODE 97
V01868	NLAAS	G38b	Extent which severe worry interfered w/ ability to work	97	IF 'DOES NOT APPLY', CODE 97
V01869	NCS-R	G38c	Extent which severe worry interf w/ form/maint relations	97	IF 'DOES NOT APPLY', CODE 97
V01869	NLAAS	G38c	Extent which severe worry interf w/ form/maint relations	97	IF 'DOES NOT APPLY', CODE 97
V01870	NCS-R	G38d	Extent which severe worry interfered w/ social life	97	IF 'DOES NOT APPLY', CODE 97
V01870	NLAAS	G38d	Extent which severe worry interfered w/ social life	97	IF 'DOES NOT APPLY', CODE 97
V01780	NCS-R	G5	Longest period mths/years worry/anxious/nerv most days	995	IF VOL 'WHOLE LIFE' OR 'AS LONG AS I CAN REMEMBER,' CODE: 995 YEARS
V01780	NLAAS	G5	Longest period mths/years worry/anxious/nerv most days	995	IF VOL 'WHOLE LIFE' OR 'AS LONG AS I CAN REMEMBER,' CODE: 995 YEARS
V01867	NSAL	GA38a	Extent which severe worry interfered w/ home mgmt	97	INTERVIEWER: IF 'DOES NOT APPLY', CODE 97
V01868	NSAL	GA38b	Extent which severe worry interfered w/ ability to work	97	INTERVIEWER: IF 'DOES NOT APPLY', CODE 97
V01869	NSAL	GA38c	Extent which severe worry interf w/ form/maint relations	97	INTERVIEWER: IF 'DOES NOT APPLY', CODE 97

CPES Variable	Study	Study Variable Name	Variable Label	Value Recoded to -7 Missing (Other)	Interviewer Instruction
V01870	NSAL	GA38d	Extent which severe worry interfered w/ social life	97	INTERVIEWER: IF 'DOES NOT APPLY', CODE 97
V01780	NSAL	GA5	Longest period mths/years worry/anxious/nerv most days	995	IF VOL 'WHOLE LIFE' OR 'AS LONG AS I CAN REMEMBER,' CODE: 995
V01965	NCS-R	IED26a	Extent severe attack interfere home management	97	USE "97" FOR DOES NOT APPLY
V01965	NLAAS	IED26a	Extent severe attack interfere home management	97	USE "97" FOR DOES NOT APPLY
V01966	NCS-R	IED26b	Extent severe attack interfere with ability to work	97	IF NEC: use 97 for does not apply
V01966	NLAAS	IED26b	Extent severe attack interfere with ability to work	97	IF NEC: use 97 for does not apply
V01967	NCS-R	IED26c	Extent severe attack interfere with form/maint relations	97	IF NEC: use 97 for does not apply
V01967	NLAAS	IED26c	Extent severe attack interfere with form/maint relations	97	IF NEC: use 97 for does not apply
V01968	NCS-R	IED26d	Extent severe attack interfere social life	97	IF NEC: use 97 for does not apply
V01968	NLAAS	IED26d	Extent severe attack interfere social life	97	IF NEC: use 97 for does not apply
V01235	NCS-R	IR50a	Exent to which irritability interfered with home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V01235	NLAAS	IR50a	Exent to which irritability interfered with home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V01236	NCS-R	IR50b	Exent to which irritability interfered with work	97	IF 'DOES NOT APPLY', CODE 97
V01236	NLAAS	IR50b	Exent to which irritability interfered with work	97	IF 'DOES NOT APPLY', CODE 97
V01237	NCS-R	IR50c	Extent to which irritability interf w/ form/maint close relations	97	IF 'DOES NOT APPLY', CODE 97
V01237	NLAAS	IR50c	Extent to which irritability interf w/ form/maint close relations	97	IF 'DOES NOT APPLY', CODE 97
V01238	NCS-R	IR50d	Extent to which irritability interfered with social life	97	IF 'DOES NOT APPLY', CODE 97
V01238	NLAAS	IR50d	Extent to which irritability interfered with social life	97	IF 'DOES NOT APPLY', CODE 97
V01103	NCS-R	M27a	Severe month past year-exc/grouch ep interfered home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V01103	NSAL	M27a	Severe month past year-exc/grouch ep interfered home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V01104	NCS-R	M27b	Severe month in past year-exc/grouch ep interfered w/ work	97	IF 'DOES NOT APPLY', CODE 97
V01104	NSAL	M27b	Severe month in past year-exc/grouch ep interfered w/ work	97	IF 'DOES NOT APPLY', CODE 97
V01105	NCS-R	M27c	Severe mth in past year-ep interf with form/maint close friends	97	IF 'DOES NOT APPLY', CODE 97
V01105	NSAL	M27c	Severe mth in past year-ep interf with form/maint close friends	97	IF 'DOES NOT APPLY', CODE 97
V01106	NCS-R	M27d	Severe mth in past yr-exc/grouch ep interfered w/ social life	97	IF 'DOES NOT APPLY', CODE 97
V01106	NSAL	M27d	Severe mth in past yr-exc/grouch ep interfered w/ social life	97	IF 'DOES NOT APPLY', CODE 97
V05328	NCS-R	MR1_2	Age at first date	77	(IF VOL) 'Never Dated': CODE 77
V04428	NCS-R	N26A	Worst month past yr-tiredness interfered w/ home mgmt	97	IF 'DOES NOT APPLY', CODE 97

CPES Variable	Study	Study Variable Name	Variable Label	Value Recoded to -7 Missing (Other)	Interviewer Instruction
V04428	NLAAS	N26A	Worst month past yr-tiredness interfered w/ home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V04429	NCS-R	N26b	Worst month past year-tiredness interfered w/ ability to work	97	IF 'DOES NOT APPLY', CODE 97
V04429	NLAAS	N26b	Worst month past year-tiredness interfered w/ ability to work	97	IF 'DOES NOT APPLY', CODE 97
V04430	NCS-R	N26c	Worst month past year-tiredness interf w/ form/maint relations	97	IF 'DOES NOT APPLY', CODE 97
V04430	NLAAS	N26c	Worst month past year-tiredness interf w/ form/maint relations	97	IF 'DOES NOT APPLY', CODE 97
V04431	NCS-R	N26d	Worst month past year-tiredness interfered w/ social life	97	IF 'DOES NOT APPLY', CODE 97
V04431	NLAAS	N26d	Worst month past year-tiredness interfered w/ social life	97	IF 'DOES NOT APPLY', CODE 97
V04902	NCS-R	O49a	Worst mth past yr-OCD behav interfere w/ home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V04903	NCS-R	O49b	Worst mth past yr-OCD behav interfere w/ ability to work	97	IF 'DOES NOT APPLY', CODE 97
V04904	NCS-R	O49c	Worst mth past yr-OCD behav interf w/ form/maint relations	97	IF 'DOES NOT APPLY', CODE 97
V04905	NCS-R	O49d	Worst mth past yr-OCD behav interfere with social life	97	IF 'DOES NOT APPLY', CODE 97
V06080	NCS-R	OD8a	Worst month in past year-behavior interfered w/ home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V06080	NSAL	OD8a	Worst month in past year-behavior interfered w/ home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V06081	NCS-R	OD8b	Worst month in past year-behavior interfered w/ ability to work	97	IF 'DOES NOT APPLY', CODE 97
V06081	NSAL	OD8b	Worst month in past year-behavior interfered w/ ability to work	97	IF 'DOES NOT APPLY', CODE 97
V06082	NCS-R	OD8c	Worst month in past year-behav interf w/ form/maint relations	97	IF 'DOES NOT APPLY', CODE 97
V06082	NSAL	OD8c	Worst month in past year-behav interf w/ form/maint relations	97	IF 'DOES NOT APPLY', CODE 97
V06083	NCS-R	OD8d	Worst month in past year-behavior interfered w/ social life	97	IF 'DOES NOT APPLY', CODE 97
V06083	NSAL	OD8d	Worst month in past year-behavior interfered w/ social life	97	IF 'DOES NOT APPLY', CODE 97
V01320	NCS-R	PD17a	# of lifetime attacks occur unexpectedly	995	IF R REPORTS 'MORE THAN I CAN REMEMBER': CODE 995
V01320	NLAAS	PD17a	# of lifetime attacks occur unexpectedly	995	IF R REPORTS 'MORE THAN I CAN REMEMBER': CODE 995
V01320	NSAL	PD17a	# of lifetime attacks occur unexpectedly	995	IF R REPORTS 'MORE THAN I CAN REMEMBER': CODE 995
V01322	NCS-R	PD18	# of lifetime attacks due to unreasonable fear of situation	995	IF R REPORTS 'MORE THAN I CAN REMEMBER', CODE 995
V01322	NLAAS	PD18	# of lifetime attacks due to unreasonable fear of situation	995	IF R REPORTS 'MORE THAN I CAN REMEMBER', CODE 995

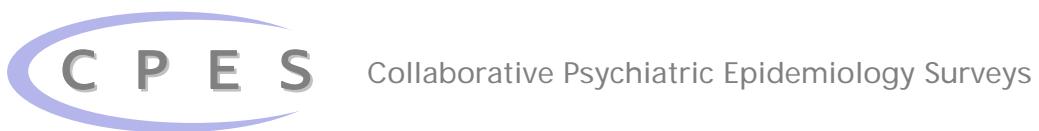
CPES Variable	Study	Study Variable Name	Variable Label	Value Recoded to -7 Missing (Other)	Interviewer Instruction
V01322	NSAL	PD18	# of lifetime attacks due to unreasonable fear of situation	995	IF R REPORTS 'MORE THAN I CAN REMEMBER', CODE 995
V01323	NCS-R	PD19	# of lifetime attacks due to real danger	995	IF R REPORTS 'MORE THAN I CAN REMEMBER', CODE 995
V01323	NLAAS	PD19	# of lifetime attacks due to real danger	995	IF R REPORTS 'MORE THAN I CAN REMEMBER', CODE 995
V01323	NSAL	PD19	# of lifetime attacks due to real danger	995	IF R REPORTS 'MORE THAN I CAN REMEMBER', CODE 995
V01283	NCS-R	PD4	# of sudden attacks in lifetime	995	IF R REPORTS 'MORE THAN I CAN REMEMBER', CODE 995
V01283	NLAAS	PD4	# of sudden attacks in lifetime	995	IF R REPORTS 'MORE THAN I CAN REMEMBER', CODE 995
V01283	NSAL	PD4	# of sudden attacks in lifetime	995	IF R REPORTS 'MORE THAN I CAN REMEMBER', CODE 995
V01350	NCS-R	PD44a	Worst month in past year-attack interfered with home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V01350	NLAAS	PD44a	Worst month in past year-attack interfered with home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V01350	NSAL	PD44a	Worst month in past year-attack interfered with home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V01351	NCS-R	PD44b	Worst month in past year-attack interfered with work	97	IF 'DOES NOT APPLY', CODE 97
V01351	NLAAS	PD44b	Worst month in past year-attack interfered with work	97	IF 'DOES NOT APPLY', CODE 97
V01351	NSAL	PD44b	Worst month in past year-attack interfered with work	97	IF 'DOES NOT APPLY', CODE 97
V01352	NCS-R	PD44c	Worst month in past year-attack interf w/ form/maint relations	97	IF 'DOES NOT APPLY', CODE 97
V01352	NLAAS	PD44c	Worst month in past year-attack interf w/ form/maint relations	97	IF 'DOES NOT APPLY', CODE 97
V01352	NSAL	PD44c	Worst month in past year-attack interf w/ form/maint relations	97	IF 'DOES NOT APPLY', CODE 97
V01353	NCS-R	PD44d	Worst month in past year-attack interfere with social life	97	IF 'DOES NOT APPLY', CODE 97
V01353	NLAAS	PD44d	Worst month in past year-attack interfere with social life	97	IF 'DOES NOT APPLY', CODE 97
V01353	NSAL	PD44d	Worst month in past year-attack interfere with social life	97	IF 'DOES NOT APPLY', CODE 97
V02766	NCS-R	PH16	Med1-typical month-# days forget or take less	996	(IF VOL) NOT SUPPOSED TO TAKE REGULARLY, CODE: 996
V02766	NCS-R	PH16	Med1-typical month-# days forget or take less	997	(IF VOL) NEVER TOOK FOR FULL MONTH, CODE: 997
V02766	NLAAS	PH16	Med1-typical month-# days forget or take less	996	(IF VOL) NOT SUPPOSED TO TAKE REGULARLY, CODE: 996

CPES Variable	Study	Study Variable Name	Variable Label	Value Recoded to -7 Missing (Other)	Interviewer Instruction
V02766	NLAAS	PH16	Med1-typical month-# days forget or take less	997	(IF VOL) NEVER TOOK FOR FULL MONTH, CODE: 997
V02766	NSAL	PH16	Med1-typical month-# days forget or take less	96	NOT SUPPOSED TO TAKE REGULARLY, CODE: 96
V02766	NSAL	PH16	Med1-typical month-# days forget or take less	97	(IF VOL) NEVER TOOK FOR FULL MONTH, CODE: 97
V02909	NCS-R	PH23	Med2-typical month-# days forget to take	996	(IF VOL) NOT SUPPOSED TO TAKE REGULARLY, CODE: 996
V02909	NCS-R	PH23	Med2-typical month-# days forget to take	997	(IF VOL) NEVER TOOK FOR FULL MONTH, CODE: 997
V02909	NLAAS	PH23	Med2-typical month-# days forget to take	996	(IF VOL) NOT SUPPOSED TO TAKE REGULARLY, CODE: 996
V02909	NLAAS	PH23	Med2-typical month-# days forget to take	997	(IF VOL) NEVER TOOK FOR FULL MONTH, CODE: 997
V02909	NSAL	PH23	Med2-typical month-# days forget to take	96	(IF VOL) NOT SUPPOSED TO TAKE REGULARLY, CODE: 96
V02909	NSAL	PH23	Med2-typical month-# days forget to take	97	(IF VOL) NEVER TOOK FOR FULL MONTH, CODE: 97
V03001	NCS-R	PH30	Med3-typical month-# days forget to take	996	(IF VOL) NOT SUPPOSED TO TAKE REGULARLY, CODE: 996
V03001	NCS-R	PH30	Med3-typical month-# days forget to take	997	(IF VOL) NEVER TOOK FOR FULL MONTH, CODE: 997
V03001	NLAAS	PH30	Med3-typical month-# days forget to take	996	(IF VOL) NOT SUPPOSED TO TAKE REGULARLY, CODE: 996
V03001	NLAAS	PH30	Med3-typical month-# days forget to take	997	(IF VOL) NEVER TOOK FOR FULL MONTH, CODE: 997
V03001	NSAL	PH30	Med3-typical month-# days forget to take	96	(IF VOL) NOT SUPPOSED TO TAKE REGULARLY, CODE: 96
V03001	NSAL	PH30	Med3-typical month-# days forget to take	97	(IF VOL) NEVER TOOK FOR FULL MONTH, CODE: 97
V02631	NLAAS	PH4Intr3	Meds taken in past 12 mths for emotion, etc:3rd mention	997	IF "NONE" CODE "997"
V04765	NCS-R	PR2	Age of 1st period	997	'NEVER HAD A MENSTRUAL PERIOD', CODE '997'

CPES Variable	Study	Study Variable Name	Variable Label	Value Recoded to -7 Missing (Other)	Interviewer Instruction
V04765	NLAAS	PR2	Age of 1st period	997	'NEVER HAD A MENSTRUAL PERIOD', CODE '997'
V04765	NSAL	PR2	Age of 1st period	997	IF VOL: 'NEVER HAD A MENSTRUAL PERIOD', CODE 997
V04800	NCS-R	PR22	# different years in life with PMS	777	IF VOL 'EVERY SINCE YEAR THEY STARTED', CODE '777'
V04800	NLAAS	PR22	# different years in life with PMS	777	IF VOL 'EVERY SINCE YEAR THEY STARTED', CODE '777'
V04034	NCS-R	PT278a	Worst month past year-PTSD interfered with home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V04034	NLAAS	PT278a	Worst month past year-PTSD interfered with home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V04034	NSAL	PT278a	Worst month past year-PTSD interfered with home mgmt	97	INTERVIEWER: IF 'DOES NOT APPLY', CODE 97
V04035	NCS-R	PT278b	Worst month past year-PTSD interfered with work	97	IF 'DOES NOT APPLY', CODE 97
V04035	NLAAS	PT278b	Worst month past year-PTSD interfered with work	97	IF 'DOES NOT APPLY', CODE 97
V04035	NSAL	PT278b	Worst month past year-PTSD interfered with work	97	INTERVIEWER: IF 'DOES NOT APPLY', CODE 97
V04036	NCS-R	PT278c	Worst month past year-PTSD interf w/ form/maint relations	97	IF 'DOES NOT APPLY', CODE 97
V04036	NLAAS	PT278c	Worst month past year-PTSD interf w/ form/maint relations	97	IF 'DOES NOT APPLY', CODE 97
V04036	NSAL	PT278c	Worst month past year-PTSD interf w/ form/maint relations	97	INTERVIEWER: IF 'DOES NOT APPLY', CODE 97
V04037	NCS-R	PT278d	Worst month past year-PTSD interfered with social life	97	IF 'DOES NOT APPLY', CODE 97
V04037	NLAAS	PT278d	Worst month past year-PTSD interfered with social life	97	IF 'DOES NOT APPLY', CODE 97
V04037	NSAL	PT278d	Worst month past year-PTSD interfered with social life	97	INTERVIEWER: IF 'DOES NOT APPLY', CODE 97
V06243	NCS-R	SA25a	Sev sep anx past yr-interf with home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V06243	NSAL	SA25a	Sev sep anx past yr-interf with home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V06244	NCS-R	SA25b	Sev sep anx past yr-interfere w/ ability to work	97	IF 'DOES NOT APPLY', CODE 97
V06244	NSAL	SA25b	Sev sep anx past yr-interfere w/ ability to work	97	IF 'DOES NOT APPLY', CODE 97
V06245	NCS-R	SA25c	Sev sep anx past yr-interf w/ ability to form/maint relations	97	IF 'DOES NOT APPLY', CODE 97
V06245	NSAL	SA25c	Sev sep anx past yr-interf w/ ability to form/maint relations	97	IF 'DOES NOT APPLY', CODE 97
V06246	NCS-R	SA25d	Sev sep anx past yr-interfere w/ social life	97	IF 'DOES NOT APPLY', CODE 97
V06246	NSAL	SA25d	Sev sep anx past yr-interfere w/ social life	97	IF 'DOES NOT APPLY', CODE 97

CPES Variable	Study	Study Variable Name	Variable Label	Value Recoded to -7 Missing (Other)	Interviewer Instruction
V00248	NCS-R	SC10_12a	How long activities limited because condition/problem	997	(IF VOL) ACTIVITIES NOT LIMITED, CODE 997
V00248	NLAAS	SC10_12a	How long activities limited because condition/problem	997	(IF VOL) ACTIVITIES NOT LIMITED, CODE 997
V00452	NCS-R	SC10_8b	How long had these difficulties mentioned	997	(IF VOL) ACTIVITIES NOT LIMITED: CODE 997
V00455	NCS-R	SC10_8c	How long limited activity due to difficulties in 3 mths	997	(IF VOL) ACTIVITIES NOT LIMITED: CODE 997
V00458	NCS-R	SC10_8d	How long assisted care for personal/routine needs	997	(IF VOL) ACTIVITIES NOT LIMITED: CODE 997
V05276	NCS-R	SE11	# hours spouse/partner works for pay in average week	97	IF LESS THAN ONE HOUR PER WEEK, ENTER '97'
V05276	NLAAS	SE11	# hours spouse/partner works for pay in average week	97	IF LESS THAN ONE HOUR PER WEEK, ENTER '97'
V05270	NCS-R	SE6a	Length of time since spouse/partner worked	97	(IF VOL) NEVER WORKED CODE: 97
V01576	NCS-R	SO21a	Worst mth in yr-extent to which fear interf with home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V01576	NLAAS	SO21a	Worst mth in yr-extent to which fear interf with home mgmt	97	IF 'DOES NOT APPLY', CODE 97
V01576	NSAL	SO21a	Worst mth in yr-extent to which fear interf with home mgmt	97	INTERVIEWER: IF 'DOES NOT APPLY', CODE 97
V01577	NCS-R	SO21b	Worst mth in yr-extent to which fear interfered with work	97	IF 'DOES NOT APPLY', CODE 97
V01577	NLAAS	SO21b	Worst mth in yr-extent to which fear interfered with work	97	IF 'DOES NOT APPLY', CODE 97
V01577	NSAL	SO21b	Worst mth in yr-extent to which fear interfered with work	97	INTERVIEWER: IF 'DOES NOT APPLY', CODE 97
V01578	NCS-R	SO21c	Worst mth in yr-extent to which fear interf with relations	97	IF 'DOES NOT APPLY', CODE 97
V01578	NLAAS	SO21c	Worst mth in yr-extent to which fear interf with relations	97	IF 'DOES NOT APPLY', CODE 97
V01578	NSAL	SO21c	Worst mth in yr-extent to which fear interf with relations	97	INTERVIEWER: IF 'DOES NOT APPLY', CODE 97
V01579	NCS-R	SO21d	Worst mth in yr-extent to which fear interf with social life	97	IF 'DOES NOT APPLY', CODE 97
V01579	NLAAS	SO21d	Worst mth in yr-extent to which fear interf with social life	97	IF 'DOES NOT APPLY', CODE 97
V01579	NSAL	SO21d	Worst mth in yr-extent to which fear interf with social life	97	INTERVIEWER: IF 'DOES NOT APPLY', CODE 97
V01489	NCS-R	SP23a	Exent to which fear interfered with home management	97	IF 'DOES NOT APPLY', CODE 97
V01490	NCS-R	SP23b	Exent to which fear interfered with ability to work	97	IF 'DOES NOT APPLY', CODE 97

CPES Variable	Study	Study Variable Name	Variable Label	Value Recoded to -7 Missing (Other)	Interviewer Instruction
V01491	NCS-R	SP23c	Exent to which fear interfered with form/maint close relations	97	IF 'DOES NOT APPLY', CODE 97
V01492	NCS-R	SP23d	Exent to which fear interfered with social life	97	IF 'DOES NOT APPLY', CODE 97
V03266	NCS-R	SU1	Age 1st drank alcohol	997	(IF VOL): 'NEVER', CODE 997
V03266	NLAAS	SU1	Age 1st drank alcohol	997	(IF VOL): 'NEVER', CODE 997
V03266	NSAL	SU1	Age 1st drank alcohol	97	(IF VOL): 'NEVER', CODE 997
V03267	NCS-R	SU2	Age 1st drank 12 drinks per year-compute	997	(IF VOL): 'NEVER', CODE 997
V03267	NSAL	SU2	Age 1st drank 12 drinks per year-compute	97	(IF VOL): 'NEVER', CODE 997
V03267	NSAL	SU2	Age 1st drank 12 drinks per year-compute	997	(IF VOL): 'NEVER', CODE 998
V03268	NLAAS	SU2a	Age 1st drank 12 drinks per year	997	(IF VOL): 'NEVER', CODE 997
V03268	NSAL	SU2a	Age 1st drank 12 drinks per year	97	(IF VOL): 'NEVER', CODE 997
V03401	NCS-R	SU87a	Age 1st opportunity to use alcohol	997	IF VOL "NEVER", CODE 997
V03401	NLAAS	SU87a	Age 1st opportunity to use alcohol	997	IF VOL "NEVER", CODE 997
V03401	NSAL	SU87a	Age 1st opportunity to use alcohol	997	IF VOL "NEVER", CODE 997
V03404	NCS-R	SU87b	Age 1st opportunity to use drugs	997	IF VOL "NEVER", CODE 997
V03404	NLAAS	SU87b	Age 1st opportunity to use drugs	997	IF VOL "NEVER", CODE 997
V03404	NSAL	SU87b	Age 1st opportunity to use drugs	997	IF VOL "NEVER", CODE 997
V03408	NCS-R	SU88a	# of opportunities before trying alcohol	997	IF R SAYS "TOO MANY TIMES TO COUNT", CODE '997'
V03408	NLAAS	SU88a	# of opportunities before trying alcohol	997	IF R SAYS "TOO MANY TIMES TO COUNT", CODE '997'
V03408	NSAL	SU88a	# of opportunities before trying alcohol	997	IF R SAYS "TOO MANY TIMES TO COUNT", CODE '997'.
V03409	NCS-R	SU88b	# of opportunities before trying drugs	997	IF R SAYS "TOO MANY TIMES TO COUNT", CODE '997'
V03409	NLAAS	SU88b	# of opportunities before trying drugs	997	IF R SAYS "TOO MANY TIMES TO COUNT", CODE '997'
V03409	NSAL	SU88b	# of opportunities before trying drugs	997	IF R SAYS "TOO MANY TIMES TO COUNT", CODE '997'.



CPES Weights Chart

April 30, 2008

CPES Weights Chart: Revised April 30, 2008

Rule of Thumb: When analyzing race groups that cross over more than one study (e.g., Latinos or Asians in all 3 studies, Blacks in NSAL and NCS-R), use the CPESWTSH or CPESWTLG weights. When excluding one of the studies in its entirety, use the appropriate paired weight. TOTAL of 14 weights.

Target Sample	Selection Process	Weight Variable
Entire CPES race/ethnic samples.	None	Use CPESWTLG if at least one variable in analyses is in NCS-R long form. If not, use CPESWTSH.
All CPES Asians	rancest = 1-4	Use CPESWTLG if at least one of the variables is in NCS-R's long form. If not, use CPESWTSH.
All CPES Latinos	rancest = 5-8	Use CPESWTLG if at least one of the variables is in NCS-R's long form. If not, use CPESWTSH.
All CPES Blacks	rancest = 9, 10	Use CPESWTLG if at least one of the variables is in NCS-R's long form. If not, use CPESWTSH.
NSAL with NLAAS only	No selection needed. Excluded cases have weight =. (missing)	NSNLWT
NLAAS with NCS-R	No selection needed. Excluded cases have weight =. (missing)	Use NCNLWTLG or NCNLWTSH. Use NCNLWTLG if at least one of the variables is in NCS-R's long form. If not, use NCNLWTSH.
NSAL with NCS-R	No selection needed. Excluded cases have weight =. (missing)	Use NCNSWTLG or NCNSWTSH. Use NCNSWTLG if at least one of the variables is in NCS-R's long form. If not, use NCNSWTSH
NCS-R only	Download DS2: NCS-R only	Use NCSRWTLG or NCSRWTSH (NOTE: these are centered to the sample size). Use NCSRWTLG if at least one of the variables is in NCS-R's long form. If not, use NCSRWTSH.
NSAL only	Download DS3: NSAL only	NSALWTPN (Population weight) or NSALWTCT (centered to sample size). Provide same results.
NLAAS only	Download DS4: NLAAS only	NLAASWGT
NLAAS Latino sample only	Download DS4: NLAAS only. No selection needed. Excluded cases have weight =. (missing)	NLSWTLAT
NLAAS Asian sample only	Download DS4: NLAAS only. No selection needed. Excluded cases have weight =. (missing)	NLSWTASN
NSAL sample with NCS-R non-Latino Whites (IMP: This example should be used only for analyses when the NSAL variables were not asked of the NSAL white sample.)	(cpesproj = 3 & rancest = 8-10) or (cpesproj = 1 & rancest = 11) Create new rancest variable, recoding the 183 NSAL latinos to the Afro-Caribbean sample.	Combine NSALWTCT and NCSRWTLG if at least one of the variables is in NCS-R's long form. If not, combine NSALWTCT and NCSRWTSH into one weight variable.
NLAAS sample with NCS-R non-Latino Whites	CPESPROJ = 2 or (CPESPROJ = 1 & rancest = 11)	Center NLAASWGT to the NLAAS sample size and combine this new weight with NCSRWTLG if at least one of the variables is in NCS-R's long form. If not, combine with NCSRWTSH into one weight variable.

Race/Ancestry variable:

rancest

- 1 = 'VIETNAMESE'
- 2 = 'FILIPINO'
- 3 = 'CHINESE'
- 4 = 'ALL OTHER ASIAN'
- 5 = 'CUBAN'
- 6 = 'PUERTO RICAN'
- 7 = 'MEXICAN'
- 8 = 'ALL OTHER HISPANIC'
- 9 = 'AFRO/CARIBBEAN'
- 10 = 'AFRICAN AMERICAN'
- 11 = 'NON-LATINO WHITE'
- 12 = 'OTHER'

Study Variable:

CPESPROJ

- 1 = 'NCS-R'
- 2 = 'NLAAS'
- 3 = 'NSAL'

How to create the Weights in SAS for the Combined NSAL and NCS-R Whites Dataset:

First, create the Race/ancestry variable to be used in conjunction with the weight:

```
label racencns = 'Race/Ancestry for NSAL & NCSR Whites anal';
if (cpesproj = 3 and rancest = 10) then racencns = 1;
if (cpesproj = 3 and rancest in (8,9)) then racencns = 2;
if (cpesproj = 1 and rancest = 11) then racencns = 3;
```

Second, create the Short and Long Weights:

```
label NCNSWTSH_whites = 'NSAL and NCSR Whites Short Weight';
if (cpesproj = 3 and rancest in (8,9,10)) then NCNSWTSH_whites = NSALWTPN;
if (cpesproj = 1 and rancest = 11) then NCNSWTSH_whites = NCSRWTSH*152403407/6798.2569;
```

```
label NCNSWTLG_whites = 'NSAL and NCSR Whites Long Weight';
if (cpesproj = 3 and rancest in (8,9,10)) then NCNSWTLG_whites = NSALWTPN;
if (cpesproj = 1 and rancest = 11) then NCNSWTLG_whites = NCSRWTLG*152403407/4141.0897;
```

How to create the Weights in SAS for the Combined NLAAS and NCS-R Whites Dataset:

```
label NCNLWTSH_whites = 'NLAAS and NCSR Whites Short Weight';
if cpesproj = 2 then NCNLWTSH_whites = NLAASWGT;
if (cpesproj = 1 and rancest = 11) then NCNLWTSH_whites = NCSRWTSH*152403407/6798.2569;
```

```
label NCNLWTLG_whites = 'NLAAS and NCSR Whites Long Weight';
if cpesproj = 2 then NCNLWTLG_whites = NLAASWGT;
IF (cpesproj = 1 and rancest = 11) NCNLWTLG_whites = NCSRWTLG*152403407/4141.0897;
```



Collaborative Psychiatric Epidemiology Surveys

CCPES Questionnaire Sections and Average Time to Administer Section by Study

April 30, 2008

Looking through Questionnaire sections and average time to administer section by study table in the Questionnaire Development section of About CPES, it is possible to determine which sections were included in more than one study.

- Although the Screening section was a core section, only questions SC20 to SC36 were used in all three studies.
- In the Personality section, only a subset of 10 Personality questions were considered core. The service use questions at the end of each core section also varied by study.
- There are also questions interspersed throughout the three study instruments that were included in two or all three studies.

You can also view the CPES section list including the diagnostic sections.

NCS-R	Time	NSAL	Time	NLAAS	Time
1. Household Listing	5:12	0. Household Listing	4:41	1. Household Listing	n/a
2. Screening	16:55	8. Screening	9:21	3. Screening	18:52
3. Depression	8:04	9. Depression	6:45	4. Depression	10:20
4. Mania	5:52	10. Mania	4:58	-	-
5. Irritable Depression	2:43	-	-	5. Irritable Depression	5:41
6. Panic (PD)	4:55	11. Panic (PD)	4:51	6. Panic (PD)	5:08
7. Specific Phobia	7:13	-	-	-	-
8. Social Phobia	7:45	12. Social Phobia	8:42	7. Social Phobia	9:32
9. Agoraphobia	6:46	13. Agoraphobia	7:11	8. Agoraphobia	8:02
10. Generalized Anxiety (GAD)	5:33	14. Generalized Anxiety (GAD)	4:46	9. Generalized Anxiety (GAD)	6:22
11. Intermittent Explosive (IED)	3:07	-	-	10. Intermittent Explosive (IED)	3:33
12. Suicidality	0:49	15. Suicidality	0:39	11. Suicidality	0:37
17. Substance Use	6:33	16. Substance Use	5:23	17. Substance Use	5:43
13. Services	4:58	32. Services	3:16	13. Services	4:04
14. Pharmacoepidemiology	3:03	17. Pharmacoepidemiology	2:31	14. Pharmacoepidemiology	4:59
15. Demographics	3:06	-	-	15. Demographics	6:32
16. Personality	5:15	18. Personality	5:21	16. Personality	1:46
18. Post-Traumatic Stress (PTSD)	10:05	19. Post-Traumatic Stress (PTSD)	9:06	18. Post-Traumatic Stress (PTSD)	10:33
19. Chronic Conditions	12:02	-	-	20. Chronic Conditions	14:27
20. Neurasthenia	1:02	-	-	19. Neurasthenia	0:49
21. 30-Day Functioning	6:55	-	-	21. 30-Day Functioning	8:34
22. 30-Day Symptoms	7:27	20. 30-Day Symptoms	3:14	-	-
23. Tobacco	3:46	21. Tobacco	0:36	-	-
24. Eating Disorders	1:28	22. Eating Disorders	1:07	22. Eating Disorders	1:20

NCS-R	Time	NSAL	Time	NLAAS	Time
25. Premenstrual Syndrome	2:26	23. Premenstrual Syndrome	2:04	24. Premenstrual Syndrome	2:15
26. Obsessive-Compulsive (OCD)	2:53	24. Obsessive-Compulsive (OCD)	1:55	-	-
27. Psychosis	2:38	25. Psychosis	2:19	25. Psychosis	2:48
28. Gambling	3:15	26. Gambling	1:14	-	-
29. Worries and Unhappiness	3:29		-	-	-
30. Employment	10:06	6. Employment	5:34	26. Employment	11:44
31. Finances	3:52	-	-	27. Finances	5:53
32. Marriage	4:44	-	-	28. Marriage	4:21
33. Children	2:30	-	-	29. Children	3:36
34. Social Networks	2:47	-	-	30. Social Networks	2:49
35. Adult Demographics	6:30	-	-	31. Adult Demographics	7:02
36. Childhood Demographics	3:95	-	-	33. Childhood Demographics	0:34
37. Childhood	9:08	-	-	-	-
38. Attention Deficit (ADHD)	3:09	28. Attention Deficit (ADHD)	3:23	-	-
39. Oppositional-Defiant (ODD)	2:01	29. Oppositional-Defiant (ODD)	2:30	-	-
40. Conduct (CD)	3:02	30. Conduct (CD)	2:55	34. Conduct (CD)	3:08
41. Separation Anxiety Disorder	4:24	31. Separation Anxiety Disorder	5:07	-	-
42. Family Burden	2:31	-	-	-	-
43. Perceptions of the Past	2:57	-	-	-	-
44. Terror	1:06	38. Terror	-	-	-
45. Respondent Contacts	n/a	-	-	-	-
46. Interviewer Observations	n/a	43. Interviewer Observations	n/a	41. Interviewer Observations	n/a
47. Dementia - paper only	n/a	42. Dementia - paper only	n/a	-	-

Geography Codeframe

CaribdataList

CaribID CaribName

1	Anguilla
2	Antigua and Barbuda
3	Aruba
4	Bahamas
5	Barbados
6	Belize
7	Bermuda
8	British Virgin Islands
9	Anegada
10	Tortola
11	Virgin Gorda
12	Cayman Islands
13	Cayman Brac
14	Grand Cayman
15	Little Cayman
16	Dominica (Commonwealth of)
17	French Guiana
18	Grenada and Grenadines
19	"Carriacou
20	Grenadines - Grenada
21	Guadeloupe
22	Guyana
23	Haiti
24	Jamaica
25	Martinique
26	Montserrat
27	Netherlands Antilles
28	Bonaire
29	Curacao
30	Saba
31	St. Eustatius (Statia)
32	St. Maarten
33	St. Kitts-Nevis
34	St. Lucia
35	St. Vincent and Grenadines

- 36 "Bequia
- 37 Grenadines – St. Vincent
- 38 Suriname
- 39 Trinidad and Tobago
- 40 Turks and Caicos Islands
- 41 U.S. Virgin Islands
- 42 St. Croix
- 43 St. John
- 44 St. Thomas
- 45 "Leeward Islands
- 46 "Windward Islands
- 47 "West Indies
- 48 "British West Indies
- 49 Puerto Rico
- 50 Dominican Republic
- 51 Cuba
- 52 Panama
- 53 Cota Rica
- 54 Nicaragua
- 55 Honduras (Garifano)
- 97 Other (SPECIFY)

COUNTRYDATALIST

CountryID	SecondCountryID	CountryName	RegionName
1	1	Belize	North and Central America
2	2	Canada	North and Central America
3	3	Costa Rica	North and Central America
4	4	El Salvador	North and Central America
5	5	Guatemala	North and Central America
6	6	Honduras	North and Central America
7	7	Mexico	North and Central America
8	8	Nicaragua	North and Central America
9	9	Panama	North and Central America
10	10	United States	North and Central America
11	11	Argentina	South America
12	12	Bolivia	South America
13	13	Brazil	South America
14	14	Chile	South America
15	15	Colombia	South America
16	16	Ecuador	South America
17	17	Falkland Island	South America
18	18	Guyana	South America
19	19	Paraguay	South America
20	20	Peru	South America
21	21	Suriname	South America
22	22	Uruguay	South America
23	23	Venezuela	South America
24	24	Algeria	Africa
25	25	Angola	Africa
26	26	Benin	Africa
27	27	Botswana	Africa
28	28	Burkina Faso	Africa
29	29	Cameroon	Africa
30	30	Central African Republic	Africa
31	31	Chad	Africa
32	32	Congo	Africa
33	33	Comoros	Africa
34	34	Djibouti	Africa
35	35	Ivory Coast	Africa

36	36	Egypt	Africa
37	37	Equatorial Guinea	Africa
38	38	Eritrea	Africa
39	39	Ethiopia	Africa
40	40	Gabon	Africa
41	41	Ghana	Africa
42	42	Guinea	Africa
43	43	Guinea Bissau	Africa
44	44	Kenya	Africa
45	45	Lesotho	Africa
46	46	Liberia	Africa
47	47	Libya	Africa
48	48	Madagascar	Africa
49	49	Gambia	Africa
50	50	Mali	Africa
51	51	Mauritania	Africa
52	52	Morocco	Africa
53	53	Mozambique	Africa
54	54	Namibia	Africa
55	55	Niger	Africa
56	56	Nigeria	Africa
57	57	Democratic Rep. Of The Congo	Africa
58	58	Reunion	Africa
59	59	Rwanda	Africa
60	60	Senegal	Africa
61	61	Sierra Leone	Africa
62	62	Somalia	Africa
63	63	South Africa	Africa
64	64	Sudan	Africa
65	65	Swaziland	Africa
66	66	Tanzania	Africa
67	67	Togo	Africa
68	68	Tunisia	Africa
69	69	Uganda	Africa
70	70	Western Sahara	Africa
71	71	Zambia	Africa
72	72	Zimbabwe	Africa

73	73	Malawi	Africa
74	74	Sao Tome And Principe	Africa
75	75	Wallis And Fatuna	Africa
76	76	Albania	Europe
77	77	Austria	Europe
78	78	Belgium	Europe
79	79	Bosnia And Herzegovina	Europe
80	80	Bulgaria	Europe
81	81	Croatia	Europe
82	82	Cyprus	Europe
83	83	Czech Republic	Europe
84	84	Denmark	Europe
85	85	Estonia	Europe
86	86	England	Europe
87	87	Finland	Europe
88	88	France	Europe
89	89	Germany	Europe
90	90	Gibraltar	Europe
91	91	Greece	Europe
92	92	Greenland	Europe
93	93	Hungary	Europe
94	94	Iceland	Europe
95	95	Ireland	Europe
96	96	Italy	Europe
97	97	Latvia	Europe
98	98	Lithuania	Europe
99	99	Luxembourg	Europe
100	100	Monaco	Europe
101	101	Macedonia	Europe
102	102	Netherlands	Europe
103	103	New Caledonia	Europe
104	104	Norway	Europe
105	105	Poland	Europe
106	106	Portugal	Europe
107	107	Romania	Europe
108	108	Serbia	Europe
109	109	Scotland	Europe
110	110	Slovakia	Europe

111	111	Slovenia	Europe
112	112	Spain	Europe
113	113	Sweden	Europe
114	114	Switzerland	Europe
115	115	Turkey	Europe
116	116	Montenegro	Europe
117	117	Malta	Europe
118	118	Isle Of Man	Europe
119	119	Andorra	Europe
120	120	Faroe Island	Europe
121	121	Liechtenstein	Europe
122	122	Afghanistan	Asia
123	123	Bangladesh	Asia
124	124	Bhutan	Asia
125	125	Brunei	Asia
126	126	Burma/Myanmar	Asia
127	127	Cambodia	Asia
128	128	China	Asia
129	129	Federated States Of Micronesia	Asia
130	130	Guam	Asia
131	131	Hong Kong	Asia
132	132	India	Asia
133	133	Indonesia	Asia
134	134	Japan	Asia
135	135	Laos	Asia
136	136	Malaysia	Asia
137	137	Mongolia	Asia
138	138	Nepal	Asia
139	139	North Korea	Asia
140	140	Pakistan	Asia
141	141	Philippines	Asia
142	142	Singapore	Asia
143	143	South Korea	Asia
144	144	Sri Lanka	Asia
145	145	Taiwan	Asia
146	146	Thailand	Asia
147	147	Vietnam	Asia

148	148	Armenia	Commonwealth of Independent States (RUSSIA)
149	149	Azerbaijan	Commonwealth of Independent States (RUSSIA)
150	150	Belarus	Commonwealth of Independent States (RUSSIA)
151	151	Georgia	Commonwealth of Independent States (RUSSIA)
152	152	Kazakhstan	Commonwealth of Independent States (RUSSIA)
153	153	Kyrgyzstan	Commonwealth of Independent States (RUSSIA)
154	154	Moldova	Commonwealth of Independent States (RUSSIA)
155	155	Russia	Commonwealth of Independent States (RUSSIA)
156	156	Tajikistan	Commonwealth of Independent States (RUSSIA)
157	157	Turkmenistan	Commonwealth of Independent States (RUSSIA)
158	158	Ukraine	Commonwealth of Independent States (RUSSIA)
159	159	Uzbekistan	Commonwealth of Independent States (RUSSIA)
160	160	Gaza Strip	Middle East
161	161	Iran	Middle East
162	162	Iraq	Middle East
163	163	Israel	Middle East
164	164	Jordan	Middle East
165	165	Kuwait	Middle East
166	166	Lebanon	Middle East
167	167	Oman	Middle East
168	168	Qatar	Middle East
169	169	Saudi Arabia	Middle East
170	170	Syria	Middle East
171	171	United Arab Emirates	Middle East
172	172	West Bank	Middle East
173	173	Yemen	Middle East
174	174	Bahrain	Middle East
175	175	Anguilla	Islands
176	176	Antigua And Barbuda	Islands

177	177	Aruba	Islands
178	178	Barbados	Islands
179	179	Cayman Islands	Islands
180	180	Cuba	Islands
181	181	Dominica	Islands
182	182	Dominican Republic	Islands
183	183	Grenada	Islands
184	184	Haiti	Islands
185	185	Jamaica	Islands
186	186	Marie Galante	Islands
187	187	Martinque	Islands
188	188	Monserrat	Islands
189	189	Netherland Antilles	Islands
190	190	Puerto Rico	Islands
191	191	St. Barthelemy	Islands
192	192	St. Kitts And Nevis	Islands
193	193	St. Lucia	Islands
194	194	St. Martin	Islands
195	195	St. Vicent And The Grenadines	Islands
196	196	The Bahamas	Islands
197	197	Trinidad	Islands
198	198	Virgin Islands (British)	Islands
199	199	Virgin Islands (U.S.)	Islands
200	200	American Samoa Islands	Islands
201	201	Australia	Islands
202	202	Cape Verde	Islands
203	203	Cook Island	Islands
204	204	Fiji	Islands
205	205	French Polynesia	Islands
206	206	Jersey	Islands
207	207	Kiribati	Islands
208	208	Maldives	Islands
209	209	Marshall Islands	Islands
210	210	Mayotte	Islands
211	211	Micronesia	Islands
212	212	New Zealand	Islands
213	213	Palau	Islands

214	214	Papua New Guinea	Islands
215	215	Samoa Islands	Islands
216	216	San Marino	Islands
217	217	Seychelles	Islands
218	218	Solomon Islands	Islands
219	219	Tonga	Islands
220	220	Tuvalu	Islands
221	221	Vanuatu	Islands
222	222	USA	North and Central America
996	996	None	NONE
997	997	Other	OTHER

COUNTRYDATALIST2

CountryID	SecondCountryID	CountryName	RegionName
1	1	BAHAMAS	North and Central America
2	2	CANADA	North and Central America
3	3	COSTA RICA	North and Central America
4	4	CUBA	North and Central America
5	5	DOMINICAN REPUBLIC	North and Central America
6	6	EL SALVADOR	North and Central America
7	7	GUADELOUPE	North and Central America
8	8	GUATEMALA	North and Central America
9	9	HAITI	North and Central America
10	10	HONDURAS	North and Central America
11	11	JAMAICA	North and Central America
12	12	MARTINIQUE	North and Central America
13	13	MEXICO	North and Central America
14	14	NICARAGUA	North and Central America
15	15	PANAMA	North and Central America
16	16	PUERTO RICO	North and Central America
17	17	ST LUCIA	North and Central America
18	18	ST VINCENT	North and Central America
19	19	TRINIDAD	North and Central America
20	20	UNITED STATES	North and Central America

21	21	CENTRAL AMERICA/CARIBBEAN - NO SPECIFIC COUNTRY	North and Central America
22	22	NORTH/CENTRAL AMERICA - OTHER (SPECIFY)	North and Central America
23	23	ARGENTINA	South America
24	24	BOLIVIA	South America
25	25	BRAZIL	South America
26	26	CHILE	South America
27	27	COLOMBIA	South America
28	28	ECUADOR	South America
29	29	PERU	South America
30	30	SURINAME	South America
31	31	VENEZUELA	South America
32	32	SOUTH AMERICA - NO SPECIFIC COUNTRY	South America
33	33	SOUTH AMERICA - OTHER (SPECIFY)	South America
34	34	CZECH OR SLOVAK REPUBLIC	Europe
35	35	ENGLAND	Europe
36	36	FRANCE	Europe
37	37	GERMANY	Europe
38	38	GREECE	Europe
39	39	HUNGARY	Europe
40	40	IRELAND	Europe
41	41	ITALY	Europe
42	42	NETHERLANDS	Europe
43	43	NORWAY	Europe
44	44	POLAND	Europe
45	45	PORTUGAL	Europe
46	46	RUSSIA OR FORMER SOVIET UNION	Europe
47	47	SCOTLAND	Europe
48	48	SPAIN	Europe
49	49	SWEDEN	Europe
50	50	FORMER YUGOSLAVIA (CROATIA - SLOVENIA - ETC)	Europe
51	51	EASTERN EUROPE - NO SPECIFIC COUNTRY	Europe
52	52	WESTERN EUROPE - NO SPECIFIC COUNTRY	Europe
53	53	EUROPE - OTHER (SPECIFY)	Europe
54	54	CHINA	Asia

55	55	INDIA	Asia
56	56	JAPAN	Asia
57	57	KOREA	Asia
58	58	PHILIPPINES	Asia
59	59	SINGAPORE	Asia
60	60	TAIWAN	Asia
61	61	THAILAND	Asia
62	62	ASIA - NO SPECIFIC COUNTRY	Asia
63	63	ASIA - OTHER (SPECIFY)	Asia
64	64	ALGERIA	Africa
65	65	EGYPT	Africa
66	66	KENYA	Africa
67	67	MOROCCO	Africa
68	68	NIGERIA	Africa
69	69	SOUTH AFRICA	Africa
70	70	ZAIRE	Africa
71	71	ZIMBABWE	Africa
72	72	AFRICA - NO SPECIFIC COUNTRY	Africa
73	73	AFRICA - OTHER (SPECIFY)	Africa
74	74	IRAN	Middle East
75	75	IRAQ	Middle East
76	76	ISRAEL	Middle East
77	77	LEBANON	Middle East
78	78	PAKISTAN	Middle East
79	79	SAUDI ARABIA	Middle East
80	80	TURKEY	Middle East
81	81	MIDDLE EAST - NO SPECIFIC COUNTRY	Middle East
82	82	MIDDLE EAST - OTHER (SPECIFY)	Middle East
83	83	AUSTRALIA	Australia
84	84	NEW ZEALAND	Australia
85	85	OTHER COUNTRY (SPECIFY)	Other
86	86	NONE	Other
87	87	DO NOT KNOW	Other
88	88	REFUSED	Other
89	89	USA	North and Central America

LangList1

LanguageName

Afrikaans

Albanian

Arabic

Armenian

Bengali

Bulgarian

Catalan

Chinese (Cantonese)

Chinese (Mandarin)

Czech

Danish

Dutch

English

Estonian

Finnish

French

German

Greek

Haitian

Hawaiian

Hebrew

Hindi

Hungarian

Indonesian

Italian

Japanese

Javanese

Korean

Kurdish

Latvian

Lithuanian

Macedonian

Malagasy

Malay

No Additional Language Spoken

Norwegian

Other Language Not Listed

Pidgin

Polish

Portuguese

Romanian

Russian

Samoan

Serbo-Croatian

Slovak

Slovenian

Somali

Spanish

Swahili

Swedish

Tagalog

Thai

Tibetan

Tongan

Turkish

Ukrainian

Vietnamese

MedList

MedID MedName

1	Acetophenazine
2	Adapin
3	Adderall
4	Alprazolam
5	Amantadine
6	Ambien
7	Amitriptyline
8	Amobarbital
9	Amoxapine
10	Amphetamines
11	Amytal
12	Anafranil
13	Antabuse
14	Antidepressant
15	Antipsychotic
16	Aquachloral
17	Artane
18	Asendin
19	Ativan
20	Aventyl
21	Benadryl
22	Benztropine
23	Bupropion
24	Buspar
25	Buspirone
26	Carbamazepine
27	Carbatrol
28	Catapres
29	Celexa
30	Chloral Hydrate
31	Chlordiazepoxide
32	Chlorpromazine
33	Citalopram
34	Clomipramine
35	Clonazepam

- 36 Clonidine
- 37 Clorazepate
- 38 Clorazil
- 39 Clorprothixene
- 40 Clozapine
- 41 Clozaril
- 42 Cogentin
- 43 Cylert
- 44 Dalmane
- 45 Depacon
- 46 Depakene
- 47 Depakote
- 48 Desipramine
- 49 Desoxyn
- 50 Desoxyn Gradumet
- 51 Desyrel
- 52 Dexedrine
- 53 Dextroamphetamine
- 54 Dextrostat
- 55 Dihydroergotamine Mesylate
- 56 Diazepam
- 57 Diphenhydramine
- 58 Disulfiram
- 59 Divalproex
- 60 Doral
- 61 Doriden
- 62 Doxepin
- 63 Droperidol
- 64 Duralith
- 65 Effexor
- 66 Elavil
- 67 Epitol
- 68 Equanil
- 69 Eskalith
- 70 Eskalith Cr-450
- 71 Estazolam
- 72 Ethchlorvynol
- 73 Etrafon

- 74 Fluoxetine
- 75 Fluphenazine
- 76 Flurazepam
- 77 Fluvoxamine
- 78 Gabapentin
- 79 Gen-Xene
- 80 Glutethimide
- 81 Halazepam
- 82 Halcion
- 83 Haldol
- 84 Haldol Depot
- 85 Haloperidol
- 86 Hydroxyzine
- 87 Imipramine
- 88 Inapsine
- 89 Inderal
- 90 Isocarboxazid
- 91 Janimine
- 92 Klonopin
- 93 Lamictal
- 94 Lamotrigine
- 95 Librax
- 96 Libritabs
- 97 Librium
- 98 Limbitrol
- 99 Lithium
- 100 Lithium Carbonate
- 101 Lithium Citrate Syrup
- 102 Lithobid
- 103 Lithonate
- 104 Lithotabs
- 105 Lorazepam
- 106 Loxapine
- 107 Loxitane
- 108 Ludiomil
- 109 Luminal
- 110 Luvox
- 111 Maprotiline

- 112 Marplan
- 113 Mellaril
- 114 Meprobamate
- 115 Mesoridazine
- 116 Methamphetamine
- 117 Methotriimeprazine
- 118 Methyl-Phenidate
- 119 Midazolam
- 120 Miltown
- 121 Mirtazapine
- 122 Mitran
- 123 Moban
- 124 Moclobemide
- 125 Molindone
- 126 Nardil
- 127 Navane
- 128 Nefazodone
- 129 Nembutal
- 130 Neuramate
- 131 Neurontin
- 132 Norpramine
- 133 Nortriptyline
- 134 Obetrol
- 135 Olanzapine
- 136 Orap
- 137 Oxazepam
- 138 Oxybutynin
- 139 Pamelor
- 140 Parnate
- 141 Paroxetine
- 142 Paxil
- 143 Paxipam
- 144 Pemoline
- 145 Permitil
- 146 Perphenazine
- 147 Phenelzine
- 148 Phenergan
- 149 Phenobarbital

- 150 Phenytoin
- 151 Pimozide
- 152 Placidyl
- 153 Prazepam
- 154 Prolixin
- 155 Prolixin Depot
- 156 Propranolol
- 157 Propofol
- 158 Prosom
- 159 Protriptyline
- 160 Prozac
- 161 Quazepam
- 162 Quetiapine
- 163 Remeron
- 164 Reserpine
- 165 Restoril
- 166 Risperdal
- 167 Risperidone
- 168 Ritalin
- 169 Secobarbital
- 170 Seconal
- 171 Serax
- 172 Serentil
- 173 Seroquel
- 174 Sertraline
- 175 Serzone
- 176 Sinequan
- 177 Sodium Pentobarbital
- 178 Sodium Valproate
- 179 Sonata
- 180 Stelazine
- 181 Surmontil
- 182 Symmetrel
- 183 Taractan
- 184 Tegretol
- 185 Temazepam
- 186 Thioridazine
- 187 Thiothixene

- 188 Thorazine
- 189 Tindal
- 190 Tofranil
- 191 Tranxene
- 192 Tranylcypromine
- 193 Trazodone
- 194 Triavil
- 195 Triazolam
- 196 Trifluoperazine
- 197 Triflupromazine
- 198 Trihexyphenidyl
- 199 Trilafon
- 200 Trimipramine
- 201 Valium
- 202 Valproate
- 203 Valproic Acid
- 204 Venlafaxine
- 205 Versed
- 206 Vesprin
- 207 Vistaril
- 208 Vivactil
- 209 Wellbutrin
- 210 Xanax
- 211 Zaleplon
- 212 Zoloft
- 213 Zolpidem
- 214 Zyban
- 215 Zyprexa
- 997 Other

WHO-DAS Scoring

- A. Cognition (0-100 where 0 indicates no disability and 100 indicates max. disability)
1. Treatment of missing for frequency:
IF FD10 in (DK, ref, or missing) and FD10a in (DK, ref, or missing) then
FD10a=0
else if FD10 = 5 then FD10a=0
else if FD10 = 1 and FD10a in (DK, ref, or missing) then
FD10a=mean(non-missing FD12a)
 2. Normalize frequency:
frequency= FD10a*100/30 (range is now between 0 and 100)
 3. Treatment of missing for severity:
IF FD11a/b/c/d in (DK, ref) then FD11a/b/c/d = 2 (mild)
else if FD11a/b/c/d = missing then FD11a/b/c/d = 1 (none)
severity = sum (FD11a+FD11b+FD11c+FD11d) (ranges between 4-20)
 4. Normalize severity
severity ={sum (FD11a+FD11b+FD11c+FD11d) - 4}*(100/16) (ranges between 0 and 100)
 5. Calculate and normalize Cognition score
Cognition = (frequency*severity)/100.0
- B. Mobility (0-100 where 0 indicates no disability and 100 indicates max. disability)
1. Treatment of missing for frequency:
IF FD12 in (DK, ref, or missing) and FD12a in (DK, ref, or missing) then
FD12a=0
else if FD12 = 5 then FD12a=0
else if FD12 = 1 and FD12a in (DK, ref, or missing) then
FD12a=mean(non-missing FD12a)
 2. Normalize frequency:
frequency= FD12a*100/30 (range is now between 0 and 100)
 3. Treatment of missing for severity:
IF FD13a/b/c in (DK, ref) then FD13a/b/c = 2 (mild)
else if FD13 a/b/c = missing then FD13 a/b/c = 1 (none)
severity = sum (FD13a+FD13b+FD13c) (ranges between 3-15)
 4. Normalize severity
severity ={sum (FD13a+FD13b+FD13c) - 3}*(100/12) (ranges between 0 and 100)
 5. Calculate and normalize Mobility score
Mobility = (frequency*severity)/100.0

C. Self Care (0-100 where 0 indicates no disability and 100 indicates max. disability)

1. Treatment of missing for frequency:

IF FD14 in (DK, ref, or missing) and FD14a in (DK, ref, or missing) then
FD14a=0
else if FD14 = 5 then FD14a=0
else if FD14 = 1 and FD14a in (DK, ref, or missing) then
FD14a=mean(non-missing FD14a)

2. Normalize frequency:

frequency= FD14a*100/30 (range is now between 0 and 100)

3. Treatment of missing for severity:

IF FD15a/b/c in (DK, ref) then FD15a/b/c = 2 (mild)
else if FD15 a/b/c = missing then FD15 a/b/c = 1 (none)
severity = sum (FD15a+FD15b+FD15c) (ranges between 3-15)

4. Normalize severity

severity ={sum (FD15a+FD15b+FD15c) - 3}*100/12 (ranges between 0 and 100)

5. Calculate and normalize Self Care score

Self Care = (frequency*severity)/100.0

D. Social Interaction (0-100 where 0 indicates no disability and 100 indicates max. disability)

1. Treatment of missing for frequency:

IF FD16 in (DK, ref, or missing) and FD16a in (DK, ref, or missing) then
FD16a=0
else if FD16 = 5 then FD16a=0
else if FD16 = 1 and FD16a in (DK, ref, or missing) then
FD16a=mean(non-missing FD16a)

2. Normalize frequency:

frequency= FD16a*100/30 (range is now between 0 and 100)

3. Treatment of missing for severity:

IF FD17a/b/c/d/e in (DK, ref) then FD17a/b/c/d/e = 2 (mild)
else if FD17 a/b/c/d/e = missing then FD17 a/b/c/d/e = 1 (none)
severity = sum (FD17a+FD17b+FD17c+FD17d+FD17e) (ranges between 5-25)

4. Normalize severity

severity ={sum (FD17a+FD17b+FD17c+FD17d+FD17e) - 5}*5 (ranges between 0 and 100)

5. Calculate and normalize Social Interaction score
Social Interaction = (frequency*severity)/100.0

E. Role Functioning

1. Treatment of missing values for Outrole score
IF FD4/FD7/FD8/FD9 in (DK, Ref, missing) then FD4/FD7/FD8/FD9=0
2. Calculate Days out of Role in the last 30 using appropriate weighting
Outrole=FD4(1)+FD7(0.5)+FD8(0.5)+FD9(0.25)
3. Set maximum of Outrole to 30
IF Outrole > 30 then Outrole=30 (range is now between 0 and 30)
2. Normalize Outrole scale
Outrole=Outrole*100/30 (range is now between 0 and 100)

F. Participation

1. Stigma
 - i. Treatment of missing
IF FD20 in (DK, Ref, .) then FD20 = 1 (none)
 - ii. Normalize Stigma
Stigma = (FD20-1)*25 (range is now between 0 and 100)
2. Discrimination
 - i. Treatment of missing
IF FD21 in (DK, Ref, .) then FD21 = 1 (none)
 - ii. Normalize Discrimination
Discrimination = (FD21-1)*25 (range is now between 0 and 100)
3. Family Burden
 - i. Treatment of missing
IF FD22 in (DK, Ref, .) then FD22 = 1 (none)
 - ii. Normalize Discrimination
Discrimination = (FD22-1)*25 (range is now between 0 and 100)

CPES Web Site Users Guide

- [The CPES Home Page](#)
- [Background](#)
- [Using CPES](#)
 - [Data Processing Notes](#)
- [Interactive Documentation](#)
 - [Instrument Sections](#)
 - [Variables](#)
 - [Question Differences](#)
 - [NLAAS Languages](#)
 - [Questions in Different Sections](#)
 - [View Variable in SDA](#)
 - [View All Variables in Section](#)
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 - [Universes](#)
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 - [Browse CPES by Subject](#)
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- [ICPSR "MyData" Account Options](#)

The CPES Home Page

Figure 1, which shows the National Institute for Mental Health (NIMH) Collaborative Psychiatric Epidemiology Surveys (CPES) Home Page (www.icpsr.umich.edu/CPES), identifies the key elements of the CPES Web site. They are:

1. A brief description of CPES, with links to the individual survey Web sites:
 - National Comorbidity Survey Replication (NCS-R),
 - National Survey of American Life (NSAL), and
 - National Latino and Asian American Study (NLAAS)
2. Key tabs or navigational links:
 - Background,
 - Using CPES,
 - Interactive Documentation,
 - Download Data,
 - Publications, and
 - Online Analysis,
3. Additional links for:
 - Going to related sites (Related Sites),
 - Searching the CPES Web site (Search),
 - Contacting ICPSR about the CPES Web site (Contact Us),
 - Viewing online help, which has answers to frequently asked questions (Help), and
 - Establishing and managing an ICPSR account, which is required for downloading data and for online analysis (ICPSR “MyData” Account Options)
4. Options (in addition to the *Interactive Documentation* tab) for comparing questions and variables across CPES and the individual surveys:
 - Browse CPES by Subject, that is, by selected DSM-IV or ICD-10 disorder (e.g., mood or anxiety disorder), and
 - Browse interactive documentation for an individual CPES survey (Browse the Individual Surveys)
5. Announcements of interest to users of CPES data.

1 **About CPES**
The National Institute of Mental Health Collaborative Psychiatric Epidemiology Surveys (CPES) provides data on the distributions, correlates, and risk factors of mental disorders among the general population, with special emphasis on minority groups. This project joins together three nationally representative surveys: the [National Comorbidity Survey Replication \(NCS-R\)](#), the [National Survey of American Life \(NSAL\)](#), and the [National Latino and Asian American Study \(NLAAS\)](#). CPES permits the investigation of cultural and ethnic influences on mental health.

2 **Background**
Using CPES
Interactive Documentation
Download Data
Publications
Online Analysis

3 **Related Sites**
Search
Contact Us
Help
MyData options...

4 **Compare Questions & Variables**
CPES is a harmonization of three surveys on mental health. Browse by subject to view all questions/variables in CPES, or select an individual survey.

Browse CPES by Subject
DSM-IV

- Mood
- Anxiety
- Substance
- Impulse Control

ICD-10

- Mood
- Anxiety
- Substance
- Impulse Control/Other

Browse the Individual Surveys

- NCS-R
- NLAAS
- NSAL

5 **Announcements**

- Note to Users of Previous Version of NCS-R - ICPSR 4438
- Sampling Error Computations
- Merged CPES Data and Web Site Now Available
- Replication of Results
- Next CIDI Training in July 2007
- Video on Development and Background of CIDI

Background - Using CPES - Browse Codebooks - Download Data - Publications - Online Analysis
Related Sites - Search - Contact Us - Help

Figure 1. Elements of the CPES Home Page

Background

Click on the *Background* tab for basic information on CPES, each of the cross-linked individual surveys, and the core diagnostic instrument they used for data collection (Figure 2).

CPES Front Page - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address: http://www.icpsr.umich.edu/CPES/

Collaborative Psychiatric Epidemiology Surveys

Background (highlighted with a red circle)

Using CPES

Interactive Documentation

Download Data

Publications

Online Analysis

About CPES

The National Institute of Mental Health Collaborative Psychiatric Epidemiology Surveys (CPES) provides data on the distributions, correlates, and risk factors of mental disorders among the general population, with special emphasis on minority groups. This project joins together three nationally representative surveys: the National Comorbidity Survey Replication (NCS-R), the National Survey of American Life (NSAL), and the National Latino and Asian American Study (NLAAS). CPES permits the investigation of cultural and ethnic influences on mental health.

Compare Questions & Variables

CPES is a harmonization of three surveys on mental health. Browse by subject to view all

Background

This Collaborative Psychiatric Epidemiology Surveys (CPES), with support from the National Institute of Mental Health (NIMH), were initiated in recognition of the need for contemporary, comprehensive epidemiological data regarding the distribution, correlates, and risk factors of mental disorders among the general population, with special emphasis on minority groups. The CPES will collect data on the prevalence of mental disorders, their associations with sociodemographic variables, and their treatment patterns from representative samples of majority and minority adult populations in the United States. Secondary goals were to obtain information about language use and ethnic disparities, support systems, discrimination, and assimilation, in order to examine whether and how closely various mental health disorders are linked to social and cultural issues. To this end, CPES joins together three nationally representative surveys: the NATIONAL COMORBIDITY SURVEY REPLICATION (NCS-R), the NATIONAL SURVEY OF AMERICAN LIFE (NSAL), and the NATIONAL LATINO AND ASIAN AMERICAN STUDY (NLAAS). These studies collectively provide the first national data with sufficient power to investigate cultural and ethnic influences on mental disorders. In this manner, CPES permits analysts to approach analysis of the combined dataset as though it were a single, nationally representative study. Each of the CPES studies has been documented in a comprehensive and flexible manner that promotes cross-survey linking of key data and scientific constructs. Each study represents an important exploration of the mental health status of specific populations. The following provides a brief description of each of the studies.

NOTE: Much information about CPES and its constituent surveys is available in Special Issue 2 of the International Journal of Methods in Psychiatric Research, Volume 13, Number 4, 2004 entitled "The NIMH Collaborative Psychiatric Epidemiology Surveys Initiative: Designs, Methods, and Instrumentation". See also Volume 13, Number 2, 2004 of the same journal for additional information.

National Comorbidity Survey Replication (NCS-R)

National Latino and Asian American Study (NLAAS)

The National Latino and Asian American Study (NLAAS) is a nationally representative community household survey that estimates the prevalence of mental disorders and rates of mental health service utilization by Latinos and Asian Americans in the United States. The central aims of the NLAAS were three-fold. First, to describe the lifetime and 12-month prevalence of psychiatric disorders and the rates of mental health services use for Latino and Asian American populations using nationwide representative samples of these groups; second, to assess the associations among social position, environmental context, and psychosocial factors with the prevalence of psychiatric disorders and utilization rates of mental health services; and third, to compare the lifetime and 12-month prevalence of psychiatric disorders and utilization of mental health services of Latinos and Asian Americans with national representative samples of non-Latino whites (drawn from the National Comorbidity Study-Replication (NCS-R)) and African Americans (drawn from the National Survey of American Life (NSAL)).

Although each of the three studies was managed by a separate staff, the data collection model was the same. Project managers and support staff were located at the Survey Research Center (SPC), part of the Institute for Social Research at the University of Michigan in Ann Arbor, Michigan. Teams of interviewers were located throughout the United States, supervised by team leaders and regional field managers. The staff of the three projects worked closely together and whenever possible used similar procedures and materials.

Core Questionnaire

The core CPES questionnaire was based largely on the World Health Organization's (WHO) expanded version of the Composite International Diagnostic Interview (CIDI) developed for the World Mental Health (WMH) Survey initiative, the WMH-CIDI. All three projects used a modified version of the WMH-CIDI, which had been developed over the course of more than a year by an international group of collaborators. The design of the WMH-CIDI involved modifications and additions to the existing WHO-CIDI. The CIDI was an expansion of the Diagnostic Interview Schedule (DIS), the first standardized psychiatric diagnostic interview developed for administration by lay interviewers. The CIDI was designed to produce diagnoses based on WHO International Classification of Disease (ICD) criteria, while diagnoses from the DIS could only be made based on American Psychiatric Association (APA) Diagnostic and Statistical Manual (DSM) of Mental Disorders criteria.

Cross-linking

The CPES facilitates accurate, comparative work among the three studies, moving beyond the typical components of documentation (for example, static questionnaires and codebooks with frequencies, and descriptions of datasets), to dynamic, and cross-linked documentation using Web-based displays. The cross-linking features are designed to facilitate meaningful comparisons of mental health diagnoses, raw variable results, and questionnaire text. Researchers visiting the CPES Web site are able to search for terms or variables related to a particular concept or condition (e.g., "depression"), review and compare variables discovered by the search, as well as linked related information (for example, universe or imputation code) and related variables, and select variables for online analysis. For more information on CPES design and implementation, please consult the User Guide.

Links to journals with detailed information on CPES and individual studies

Figure 2. Background on CPES and Individual Surveys

Using CPES

Click on the *Using CPES* tab (Figure 3) for comprehensive documentation on CPES. *Using CPES* has links to the following eight sections or Web pages:

- Introduction
- Sample Design,
- Questionnaire Development,
- Survey Management
- Data Collection,
- Data Processing,
- Weighting, and
- Replication of Results.

The screenshot shows the CPES website interface. At the top left is the 'Collaborative Psychiatric Epidemiology Surveys' logo. To its right is a vertical menu bar with links: 'Background', 'Using CPES' (which is highlighted with a red oval and a red arrow pointing to it from the left), 'Interactive Documentation', 'Download Data', 'Publications', and 'Online Analysis'. The main content area has a light blue header 'About CPES' containing a brief description of the project. Below this is a section titled 'Compare Questions & Variables' with a sub-note about harmonizing three surveys. The bottom navigation bar includes links for 'Background', 'Using CPES', 'Interactive Documentation', 'Download Data', 'Publications', and 'Online Analysis', along with standard site links like 'home', 'related sites', 'search', 'contact us', 'help', and 'MyData options...'. The central part of the page features a large banner with the text 'Collaborative Psychiatric Epidemiology Surveys' and the CPES logo, surrounded by several small portrait photos of diverse individuals.

Figure 3. The *Using CPES* Tab and Documentation Contents

Click on one of the section links to open the selected documentation Web page, for example, "Weighting" (Figure 4).

The screenshot shows the CPES website's main navigation bar at the top, featuring links for Background, Using CPES, Interactive Documentation, Download Data, Publications, and Online Analysis. The 'Using CPES' link is highlighted. Below the navigation is a search bar with fields for 'home - related sites - search - contact us - help - MyData options...'. The main content area is titled 'Weighting' and includes the following text:

National Institutes of Mental Health (NIMH)
Collaborative Psychiatric Epidemiology Survey Program (CPES) Data Set.
Integrated Weights and Sampling Error Codes for Design-based Analysis

Steven G. Heeringa, Patricia Berglund
Statistical Design Group, Survey Research Center, University of Michigan

June 4, 2007

I. Introduction

Under contract to the National Institutes of Mental Health (NIMH), the Survey Research Center (SRC) has developed an integrated data base for the Collaborative Psychiatric Epidemiology (CPES) surveys: National Comorbidity Survey-Replication (NCS-R), National Survey of American Life (NSAL) and National Latino and Asian American Study (NLASS). Heeringa, et al (2004) describe the sample designs and sample outcomes for the three CPES surveys. A general description of the survey methodology for the CPES surveys can be found in Pennell, et al. (2004).

This technical report outlines the method for integrating the design-based analysis weights and variance estimation codes for these three studies to permit analysts to approach analysis of the combined dataset as though it were a single, nationally-representative study.

The method of integrating the analysis of these three major survey programs was based on an adaptation of a multiple frame approach to estimation and inference for population characteristics (Hartley, 1962, 1974). There are several features and advantages to the method that are worth noting:

1. It was built on all of the study-specific weight development efforts conducted to date (Kessler et al. , 2004; Heeringa et al. 2004; Heeringa, et al. 2006).
2. It integrated overlapping representation of domains of the CPES survey population in a way that was mathematically transparent and easily understood by analysts of the combined data set. Given the large investments in study-specific weight development, this approach minimized the chance for conceptual or computational errors.

Figure 4. The "Weighting" Section in *Using CPES*

Click on a subsection link (Figure 5) to open the selected documentation Web page near the location of that subsection (e.g., the *Data processing notes* subsection on the *Data Processing* Web page).

The *Using CPES* documentation also contains links to additional documents in Adobe PDF format, such as detailed Data Processing Notes (Figure 5). Click on a documentation link to open the document in Adobe Acrobat Reader. To return to the *Using CPES* documentation from the PDF document, click on the browser Back button.

The screenshot shows the CPES website's "Using CPES" page. A red arrow points from the "Data processing notes" link in the sidebar to its corresponding entry in the main content area. Another red arrow points from the "Data processing notes" link in the sidebar to a Microsoft Internet Explorer window displaying the PDF document. A third red arrow points from the "Data processing notes" link in the sidebar to the "Back" button in the IE window. A red callout box with the text "Click the Back button to return to the 'Data Processing' section in Using CPES" is positioned above the IE window.

Collaborative Psychiatric Epidemiology Surveys

Background Using CPES Interactive Documentation Download Data Publications Online Analysis

Using CPES

- Introduction
 - National Comorbidity Survey Replication (NCS-R)
 - National Survey of American Life (NSAL)
 - National Latino and Asian American Study (NLAAS)
- Sample Design
 - National Comorbidity Study Replication (NCS-R) sample design
 - National Study of American Life (NSAL) sample design
 - National Latino and Asian American Study (NLAAS) Sample Design
- Questionnaire Development
- Survey Management
- Data Collection
- Data Processing
 - Data transmission
 - Data editing and coding
 - Data file creation
 - Data processing notes
 - Data file documentation
- Weights and Sampling
- Replication of Results

http://www.icpsr.umich.edu/CPES/files/processor-notes.pdf - Microsoft Internet Explorer

File Edit Go To Favorites Help

Address http://www.icpsr.umich.edu/CPES/files/processor-notes.pdf

CPES Processor Notes

Merging the Study Datasets

Identity Protection

Recorded Variables

Bottom-Coding of Diagnostic Variables

Harmonization of Demographics

Dropped Variables

Missing Data Codes

1 of 80 https://www.icpsr.umich.edu/CPES/files/processor-notes.pdf - 1

Data editing and coding

Many data processing activities that are typically computer administered. For example, making sure appropriate question text based on a respondent's edit checks were brought to the attention of the need for back-end editing. Although these some data for each study did require some additional question responses and assigned codes to indicate on individual question items were also created in

Data file creation

Data files were extracted to ASCII and converted to SAS format once data collection began and were updated throughout the data collection period. Early in the data collection phase, these files were used by project managers to identify any problems with administration of the questionnaire and to monitor response trends and patterns. Datasets were produced for the studies' principal investigators on a weekly basis to allow the investigators' staffs to perform preliminary analyses.

Data processing notes

Additional editing was performed on the files by research and SRO staff for several different purposes, including harmonization, disclosure, consistency, and clarity. For further information, please consult our [Data Processing Notes](#) document, which fully details the changes made to the data files.

Data file documentation

A codebook and set of companion instructions and study materials were prepared for each study. The codebook provided the information that users need to associate a variable in the data file with the corresponding question on the questionnaire and documented the characteristics of each variable in the data set, such as its format and response codes. The codebook also contained frequencies for nominal and ordinal variables and a set of basic descriptive statistics for continuous variables. For NLAAS, the HTML-compatible codebook included a facility to view each question in any of the five languages.

Figure 5. The *Data processing notes* Subsection in the *Data Processing* Section (and the *Data Processing Notes* PDF Document)

Data Processing Notes

The *Data Processing Notes* (found in the *Data Processing* section in *Using CPES*; see Figure 5 above) describe processing that took place during the creation of the CPES dataset, providing information on the following topics:

- Merging the Study Datasets,
- Identity Protection,
- Recoded Variables,
- Bottom-Coding of Diagnostic Variables,
- Harmonization of Demographics,
- Dropped Variables, and
- Missing Data Codes.

Click on the *Data Processing Notes* link in the *Data Processing* section to open a PDF document. From the *Bookmarks* tab on the left, you may select the section of the document to view, for example, “Recoded Variables” (Figure 6). To return to the *Using CPES* documentation from the PDF document, click on the browser *Back* button.

Click the *Back* button to return to the “Data Processing” section in *Using CPES*

<http://www.icpsr.umich.edu/CPES/files/processor-notes.pdf> - Microsoft Internet Explorer

File Edit Go To Favorites Help

Address: http://www.icpsr.umich.edu/CPES/files/processor-notes.pdf

Save a Copy Print Search Options Back Bookmarks Pages Attachments Comments

Bookmarks

- CPES Processor Notes
- Merging the Study Datasets
- Identity Protection
- Recoded Variables**
- Bottom-Coding of Diagnostic
- Harmonization of Demograph
- Dropped Variables
- Missing Data Codes

Recoded Variables

Certain variables were categorized and recoded so that details possibly leading to identifying an individual research subject would be less likely to do so. Other variables were recoded to harmonize data across the three CPES studies—NCS-R, NLAAS, and NSAL. Recoded variables are listed in the following table, which shows the CPES variable label and study variable names, their original codes and labels, and their recode values and labels.

Variables	Original codes	Recodes
Physical handicap		
NCS-R: SC10_7A01	1 PARALYSIS OF LEGS, R IS IN WHEELCHAIR	1 One physical handicap mentioned
SC10_BF01	2 PARALYSIS OF LEGS, R USES A WALKER	2 Two physical handicaps mentioned
SC10_BG01	3 PARALYSIS OF LEGS, R CAN WALK WITHOUT A WALKER	3 Three physical handicaps mentioned
	4 PARALYSIS OF ONE ARM	4 Four physical handicaps mentioned
	5 PARALYSIS OF ONE SIDE OF BODY	
	6 ONE MISSING FOOT	
	7 TWO MISSING FEET	
	8 ONE MISSING HAND	
	9 TWO MISSING LEGS	
	10 ONE MISSING HAND	
	11 TWO MISSING HANDS	
	12 ONE MISSING ARM	
	13 TWO MISSING ARMS	
	14 ONE DISFIGUREMENT	
	15 EXTREMELY SMALL HEIGHT	
	16 EXTREMELY LARGE HEIGHT	
	17 EXTREME OBESITY	
	18 OTHER BODY DISFIGUREMENT	
	19 STUMBLING	
	20 OTHER (SPECIFY)	
Physical illness		
NCS-R: SC10_SE201-	1 ARTHRITIS	1 ARTHRITIS
SC10_SE208	2 ASTHMA	2 ASTHMA
SC10_SE201-	3 BACK PROBLEMS	3 BACK PROBLEMS
SC10_SE201-	4 CANCER	4 CANCER
SC10_SE202	5 CHRONIC FATIGUE SYNDROME	5 CHRONIC FATIGUE SYNDROME
SC10_SF201-	6 CHRONIC LUNG DISEASE	6 CHRONIC LUNG DISEASE
SC10_SF205	7 (ANY OTHER) CHRONIC PAIN	7 (ANY OTHER) CHRONIC PAIN
SC10_SG201-	8 DIABETES/HIGH BLOOD SUGAR	8 DIABETES/HIGH BLOOD SUGAR
SC10_SG204	9 EPILEPSY/SEIZURE DISORDER	9 EPILEPSY/SEIZURE DISORDER
	10 HEADACHE	10 HEADACHE
	11 HEART ATTACK	11 HEART ATTACK
	12 HEART DISEASE	12 HEART DISEASE
	13 HIGH BLOOD PRESSURE	13 HIGH BLOOD PRESSURE
	14 HIV/INFECTION	15 MIGRAINES
	15 MIGRAINES	16 NECK PROBLEMS
	16 NECK PROBLEMS	17 RHEUMATISM

Indicates the number of physical handicaps mentioned (maximum number mentioned is four)

3

14 3 of 81 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81

Figure 6. The *Recoded Variables* Section in the *Data Processing Notes* PDF Document

Interactive Documentation

There are three ways to browse the CPES codebooks interactively to view questions and summary data (Figure 7).

1. **Interactive Documentation:** This is one of six navigational tabs available on the CPES Home Page (element 2 in Figure 1, The CPES Home Page) and at the top of all other CPES Web pages (Figure 8).
2. **Browse CPES by Subject:** Available from the CPES Home Page, this allows users to browse sections of the CPES codebooks related to specific DSM-IV and ICD-10 diagnoses.
3. **Browse the Individual Surveys:** Also available from the CPES Home Page, this allows users to browse the codebook for a selected individual CPES survey instrument.



Figure 7: Options for Browsing CPES Interactive Documentation

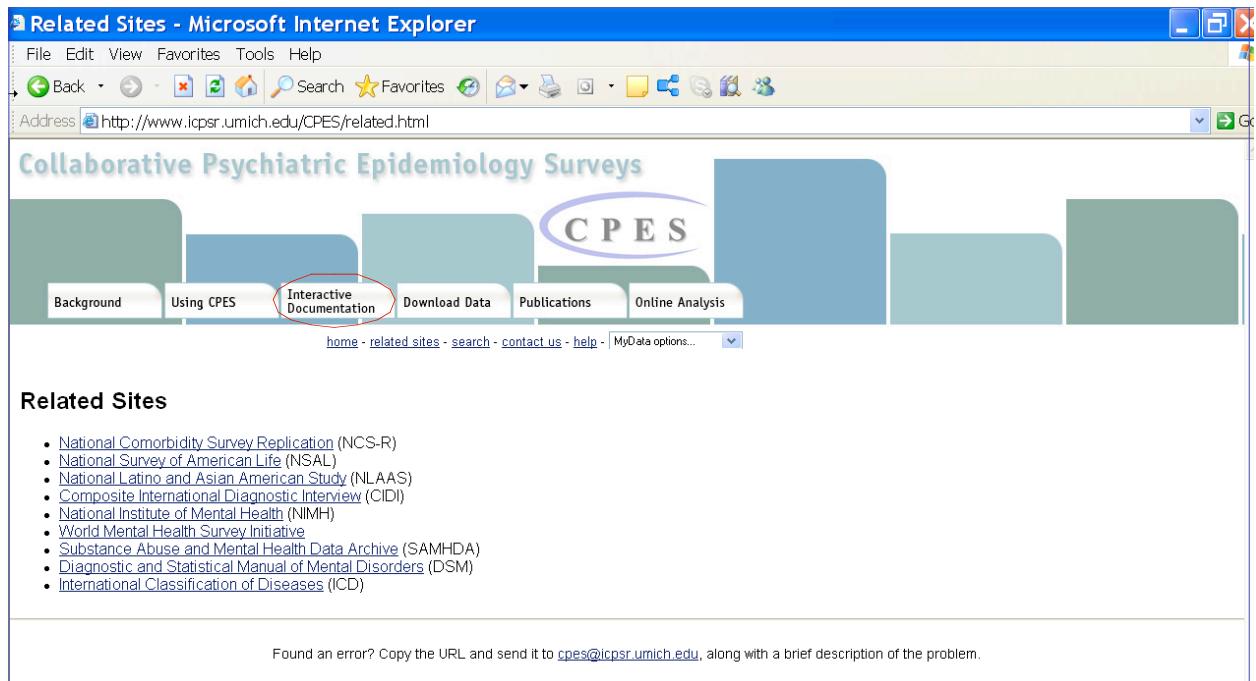


Figure 8. *Interactive Documentation* and Other Navigational Tabs at the Top of CPES Related Sites Web Page

Instrument Sections

Click on the *Interactive Documentation* tab to view a list of CPES instrument sections. By default they are sorted in alphabetical order. Click on the *view them in the order they appeared* link to view sections in the order they appeared in the survey instruments (Figure 9).

In this view, all the NCS-R sections appear first, followed by sections found only in NLAAS (e.g., "Language of Interview"), sections found only in NSAL (e.g., "Personal Data"), and finally sections added in CPES for constructed variables, including diagnostics (e.g., "DX Alcohol Abuse"). Click on the *PDF Codebook* link to view or print a codebook.

To toggle back to the alphabetically sorted view, click on the *sort them alphabetically* link.

The figure displays two side-by-side screenshots of the CPES website under the 'Interactive Documentation' tab. Both screenshots show a navigation bar at the top with tabs: Background, Using CPES, Interactive Documentation (which is highlighted in blue), Download Data, Publications, and Online Analysis. The main content area is titled 'Interactive Documentation'.

Left Screenshot (Default View): This view shows the sections in the order they appeared in the survey instruments. A red arrow points from the text 'Click the PDF Codebook link to view or print the codebook' to the 'Interactive Documentation' section title. Below the title, there is a list of sections:

- 30-Day Functioning
- 30-Day Symptoms
- Acculturative Stress
- Adult Demographics
- Agoraphobia
- Attention Deficit Hyperactivity Disorder
- Childhood
- Childhood Demographics
- Children
- Chronic Conditions
- Conduct Disorder
- Constructed Demographic Variables
- Context of Exit Questions
- Demographics
- Depression
- Discrimination
- DX Adult Separation Anxiety Disorder

Right Screenshot (Sorted Alphabetically): This view shows the sections sorted alphabetically. A red arrow points from the text 'The PDF codebook can answer many basic questions about the data; you will need a MyData account to download the codebook.' to the 'Interactive Documentation' section title. Below the title, there is a list of sections:

- Screening
- Depression
- Mania
- Irritable Depression
- Panic Disorder
- Specific Phobias
- Social Phobia
- Agoraphobia
- Generalized Anxiety Disorder
- Intermittent Explosive Disorder
- Post-Traumatic Stress Disorder
- Tobacco
- Substance Use
- Personality
- Neuromastenia
- Obsessive-Compulsive Disorder
- Eating Disorder

Figure 9. CPES Instrument Sections in Order of Appearance and Sorted Alphabetically

To view a list of CPES sections, both sections that are “core” to all studies, and those that are unique to NLAAS and NSAL, click on the CPES *Help* link [see [Help \(Frequently Asked Questions\)](#)], and then click on the question *What questionnaire sections were considered “core” to the CPES and therefore asked in all three studies?*, which appears under *Instrumentation* (Figure 10).

The screenshot shows the CPES website interface. On the left, there's a sidebar with 'Collaborative Psychiatry' at the top, followed by 'Background', 'Using CPES', and 'Interactive Documentation'. Below this is a large 'Help' section titled 'FAQs on CPES, NCSR, NLAAS'. It contains several bullet points under categories like 'General', 'CPES Sample', and 'Instrumentation'. A red arrow points from the bottom of the 'Instrumentation' list to a specific question. To the right of the sidebar, the main content area has a title 'Collaborative Psychiatric Epidemiology Surveys' and a logo. Below the title are tabs for 'Background', 'Using CPES', 'Interactive Documentation', 'Download Data', 'Publications', and 'Online Analysis'. Under 'Using CPES', there's a sub-section titled 'What questionnaire sections were considered "core" to the CPES and therefore asked in all three studies?'. This leads to a table titled 'Table 1. Questionnaire Sections and Average Time to Administer Section by Study'. The table compares NCS-R, NSAL, and NLAAS times for 17 different sections.

NCS-R	Time	NSAL	Time	NLAAS	Time
1. Household Listing	5:12	0. Household Listing	4:41	1. Household Listing	n/a
2. Screening	16:55	8. Screening	9:21	3. Screening	18:52
3. Depression	8:04	9. Depression	6:45	4. Depression	10:20
4. Mania	5:52	10. Mania	4:58	-	-
5. Irritable Depression	2:43	-	-	5. Irritable Depression	5:41
6. Panic (PD)	4:55	11. Panic (PD)	4:51	6. Panic (PD)	5:08
7. Specific Phobia	7:13	-	-	-	-
8. Social Phobia	7:45	12. Social Phobia	8:42	7. Social Phobia	9:32
9. Agoraphobia	6:46	13. Agoraphobia	7:11	8. Agoraphobia	8:02
10. Generalized Anxiety (GAD)	5:33	14. Generalized Anxiety (GAD)	4:46	9. Generalized Anxiety (GAD)	6:22
11. Intermittent Explosive (IED)	3:07	-	-	10. Intermittent Explosive (IED)	3:33
12. Suicidality	0:49	15. Suicidality	0:39	11. Suicidality	0:37
17. Substance Use	6:33	16. Substance Use	5:23	17. Substance Use	5:43
13. Services	4:58	32. Services	3:16	13. Services	4:04
14. Pharmacoepidemiology	3:03	17. Pharmacoepidemiology	2:31	14. Pharmacoepidemiology	4:59

Figure 10. Answer to “Frequently Asked Question” in *Help* that Displays CPES Instrument Sections in NCS-R, NLAAS, and NSAL

Variables

Click on a section name to view a list of CPES variables in that section (Figure 11). CPES numeric variable names begin with "V" and are listed on the left. Linked NCS-R, NLAAS, and NSAL variables are displayed on the right. Note that since some sections and variables are unique to studies, there will not always be linked variables for all three studies (see Instrument Sections).

Collaborative Psychiatric Epidemiology Surveys

Background Using CPES Interactive Documentation Download Data Publications Online Analysis

home - related sites - search - contact us - help - MyData options... ▾

Interactive Documentation

file: [CPES](#) >

You can also choose to browse by selecting [DSM IV/ICD subjects](#).

CPES NCSR NLAAS NSAL

Below is a list of all the sections in CPES. They are currently displaying in the order they appeared in the catalog. You can also choose to [sort them alphabetically](#) by section name.

The [PDF codebook](#) can answer many basic questions about the data; you will need a MyData account to download the codebook.

Collaborative Psychiatric Epidemiology Surveys

Background Using CPES Interactive Documentation Download Data Publications Online Analysis

home - related sites - search - contact us - help - MyData options... ▾

Agoraphobia

file: [CPES](#) > section: [Agoraphobia](#) > language: English

You can also choose to [view all variables in this section](#) in one long page.

* indicates there is some discrepancy in the question and/or answer text.
† For the individual studies, this variable exists in different sections from CPES.

CPES Variable →

ID	Label	NCSR	NLAAS	NSAL
V01626	Ever strongly fear being home alone	AG1	AG1A	AG1
V01627	Ever strongly fear being in crowds	AG1B	AG1B	AG1B
V01628	Ever strongly fear traveling away from home	AG1C	AG1C	AG1C
V01629	Ever strongly fear traveling alone or away from home alone	AG1D	AG1D	AG1D
V01630	Ever strongly fear using public transportation	AG1E	AG1E	AG1E

Individual Study Variables

```

graph TD
    V01626 --> AG1
    V01627 --> AG1B
    V01628 --> AG1C
    V01629 --> AG1D
    V01630 --> AG1E
  
```

Figure 11. Variables List for CPES Section Agoraphobia.

Click on any variable name to go to a page with two to four tabs, one for the CPES variable, and up to three linked study variables (Figure 12). The variable selected determines which tab is active. For example, clicking on CPES V01627 makes the CPES question tab active, and clicking on AG1B on the same line makes the NCS-R tab active.

Each tab displays question text and applicable response options, as well as frequency distributions (Figure 12) or summary statistics (Figure 13). The CPES tab has statistics for the 20,013 cases in the merged dataset, and each study tab shows comparable statistics for the selected individual study. Click on tabs to move back and forth among the CPES and study-specific variables.

Each individual study tab shows the universe of respondents who were asked the question (see Universes). The CPES documentation does not show universes, since they vary across individual instruments.

On each variable page, there also are links at the top and bottom to allow you to move to the previous and next question in the section.

CPES Variable Tab

file: CPES > section: Agoraphobia > variable: V01627 > language: English

[<-- previous variable](#)

NCS-R Variable Tab

file: NCSR > section: Agoraphobia > variable: AG1B > language: English

[<-- previous variable](#)

[next variable -->](#)

Variable Label: Ever strongly fear being in crowds

AG1b

(Did you ever strongly fear any of the following situations?)

Being in crowds?

1 YES
 5 NO
 7 N/A

Value	Label	Frequency	Valid Percent	Total Percent
1	YES	1398	66.76%	06.99%
5	NO	694	33.14%	03.47%
7	N/A	2	00.10%	00.01%
.	Missing	17919	-	89.54%

Disclaimer: Frequencies displayed above are not weighted.

- **Missing Data Codes:** . (Missing)
- **Total Cases:** 20013

You can also [view this variable in SDA](#).

You can choose to scroll through all the questions in this section.

[<-- previous variable](#)

Variable Label: Ever strongly fear being in crowds

AG1b

(Did you ever strongly fear any of the following situations?)

Being in crowds?

1 YES
 5 NO
 7 N/A

Value	Label	Frequency	Valid Percent	Total Percent
1	YES	715	68.29%	07.70%
5	NO	332	31.71%	03.58%
.	Missing	8235	-	88.72%

Disclaimer: Frequencies displayed above are not weighted.

- **Missing Data Codes:** . (Missing)
- **Total Cases:** 9282

You can choose to scroll through all the questions in this section. Be warned that this can be rather slow.

[<-- previous variable](#)

Figure 12. CPES Variable V01627 and NCS-R Variable AG18: Combined and Study-Specific Frequency Distributions

CPES V01640	NCSR AG3A	NLAAS AG3A	NSAL AG3A	
Variable Label: Age 1st fear when being alone or in public situation				
AG3a				
How old were you?				
<ul style="list-style-type: none"> • Valid N: 1255 • Refused: 1 • Don't Know: 0 • Missing (Other): 0 • Missing (System): 18757 				
Mean	Std Dev	Median	Min	Max
19.63	12.41	16.00	01.000	86.0000
<ul style="list-style-type: none"> • Valid Range: 1 - 86 • Total Cases: 20013 				
You can also view this variable in SDA ■				

CPES V01640	NCSR AG3A	NLAAS AG3A	NSAL AG3A	
Variable Label: Age 1st fear when being alone or in public situation				
Total English Spanish Vietnamese Tagalog Chinese				
AG3a				
(IF NEC: How old were you?)				
View Universe				
<ul style="list-style-type: none"> • Valid N: 233 • Refused: 0 • Don't Know: 0 • Missing (Other): 0 • Missing (System): 4416 				
Mean	Std Dev	Median	Min	Max
21.10	13.46	17.00	01.000	60.000
<ul style="list-style-type: none"> • Valid Range: 1 - 60 • Total Cases: 4649 				

**Figure 13. CPES Variable V01640 and NLAAS Variable AG3A:
Combined and Study-Specific Summary Statistics**

Question Differences

CPES has linked variables from the individual studies in which there were minor wording changes (that is, not believed to substantially change meaning). These are highlighted in variables lists with red asterisks (*). Click on such a variable (e.g., NSAL M3A*), and then click on the *compare question text* link to view the differences (Figure 14).

Age at episode where large # behavior changes stand out

Compare Questions

NCSR:

M3a

How old were you when that episode occurred?

NSAL:

M3a.

How old were you when this happened?

Collab

Background

file: CPES > section

<-- previous variable

CPES V01040

Variable Labels

M3a

How old were you when that episode occurred?

Mania

file: CPES >

A discrepancy exists between the question text in the surveys. You may wish to [compare question text](#) to determine how it effects the variable results.

You can also choose to [view all variables in this section](#) in one long page.

* indicates there is some discrepancy in the question and/or answer text.

† For the individual studies, this variable exists in different sections from CPES.

ID	Label	NCSR	NLAAS	NSAL
V01038	Behavioral changes during episode of excitement	M1		M1
V01039	One episode where large # behavior changes stand out	M3		M3
V01040	Age at episode where large # behavior changes stand out	M3A		M3A*
V01041	Length of episode where large # behavior changes stand out	M3B1		M3B*

**Figure 14. Compare Question Text Link:
Viewing Minor Wording Changes Across Linked Questions**

Note that questions are not linked if changes could possibly alter question interpretation. For example, the *Screening* variable SC35 appears as two separate CPES variables, one for the NCS-R question that did not include the words "as an adult", and one for linked NLAAS and NSAL questions that did (see Figure 15).

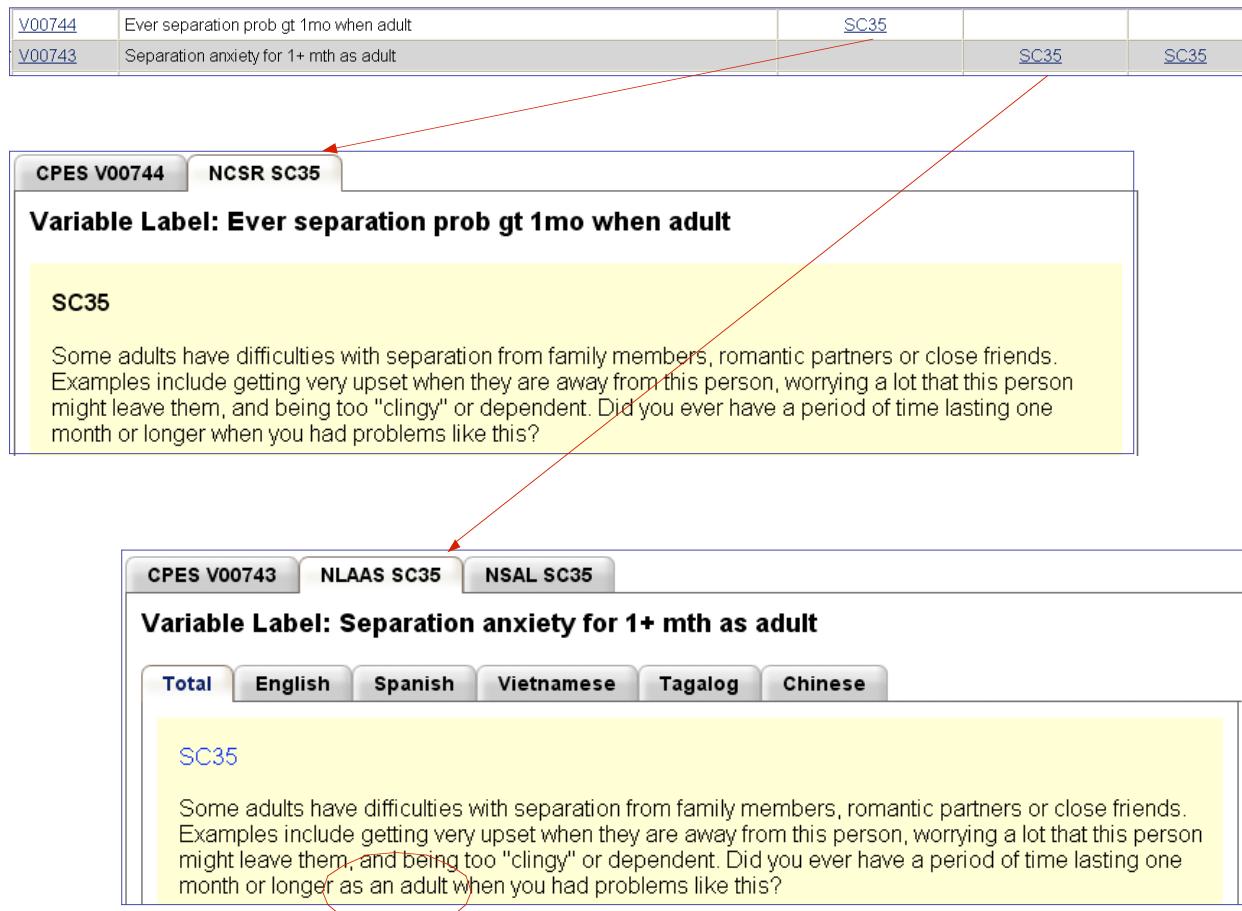


Figure 15. Question Wording Differences across Unlinked Screening Questions (SC35)

NLAAS Languages

The NLAAS survey was conducted in five languages: English, Spanish, Vietnamese, Tagalog, and Chinese. When viewing an NLAAS variable (Figure 16; see Variables), the primary tab (*Total*) will show the total frequency distribution or summary statistics for all respondents. Click on any of the five language tabs to view variable information for respondents interviewed in that language. Figure 16 shows frequencies on NLAAS variable SC35—for all interviewed in Chinese.

Variable Label: Separation anxiety for 1+ mth as adult

Some adults have difficulties with separation from family members, romantic partners or close friends. Examples include getting very upset when they are away from this person, worrying a lot that this person might leave them, and being too "clingy" or dependent. Did you ever have a period of time lasting one month or longer as an adult when you had problems like this?

1 YES [GOTO SCS1_0_IC_54](#)

5 NO [GOTO SCS1_0_IC_54](#)

Additional Documentation

- [Interviewer Instructions](#)

[View Universe](#)

Value	Label	Frequency	Valid Percent	Total Percent
1	YES	718	15.45%	15.44%
5	NO	3929	84.55%	84.51%
-8	DONT KNOW	2	-	00.04%
.	Missing	-	-	00.00%

Disclaimer: Frequencies displayed above are not weighted.

- **Missing Data Codes:** -8 (Don't know), . (Missing)
- **Total Cases:** 4649

Variable Label: Separation anxiety for 1+ mth as adult

有些成年人是很难接受与家人, 情侣, 或亲密的朋友分离的。例子包括一旦离开他们便担心失去他们, 和太过依赖他们。当你成年之后, 你是否经历过一个月以上类似的情形呢?

1 是/有

5 不是(否)没有

Additional Documentation

- [Interviewer Instructions](#)

[View Universe](#)

Value	Label	Frequency	Valid Percent	Total Percent
1	YES	28	09.43%	09.43%
5	NO	269	90.57%	90.57%
.	Missing	-	-	00.00%

Disclaimer: Frequencies displayed above are not weighted.

- **Missing Data Codes:** . (Missing)
- **Total Cases:** 297

**Figure 16. Frequencies for Variable SC35:
All Respondents (Total) and Chinese Respondents**

Questions in Different Sections

Every attempt was made to harmonize variables across study datasets, including linking variables that appeared in different sections across the three studies. A red dagger (†) appears next to such variables, indicating that they came from sections other than the current section. For example (Figure 17), when looking at the list for CPES variables in the Finance section, V05315 shows NLAAS variable FN13A and NSAL variable H47. H47 has a red dagger next to it. This indicates that it is not in the *Finances* section of the NSAL instrument. It actually appears in the *Personal Data* section. CPES always shows at the top of the screen the instrument and section for the currently selected variable; for example:

file: [CPES](#) > section: [Finances](#) > language: English, or

file: [NSAL](#) > section: [Personal Data](#) > language: English.

In these examples, you may click on the CPES or NSAL links to go to its sections list, or on the section links to go directly to the CPES Finances section or the NSAL Personal Data section.

Finances				
ID	Label	NCSR	NLAAS	NSAL
V05300	INTERVIEWER CHECKPOINT-R is able to read		FN1	
V05304	INTERVIEWER CHECKPOINT-(SC3,SC3a)		FN4	
V05313	Would have any money left over after paying debt	EN12		
V05312	After total liquidation, would have \$ left over after paying debts		FN12	
V05315	# people support your household		EN13A	H47 †
V05316	Send money to relatives in country of origin		EN13B	
V05317	How much money send to country of origin per month/year		EN13C	
V05318	Unit of time send money to country of origin		FN13CUNI	
V05319	file: NSAL > section: Personal Data > variable: H47 > language: English			
V05320	<- previous variable			next variable -->
V05321				

CPES V05315 NLAAS FN13A NSAL H47 †

† For the individual studies, this variable exists in different sections from CPES.

Variable Label: # people support your household

H47.

How many people in your household (including yourself), give money to support your household? We don't need their names, just the number.

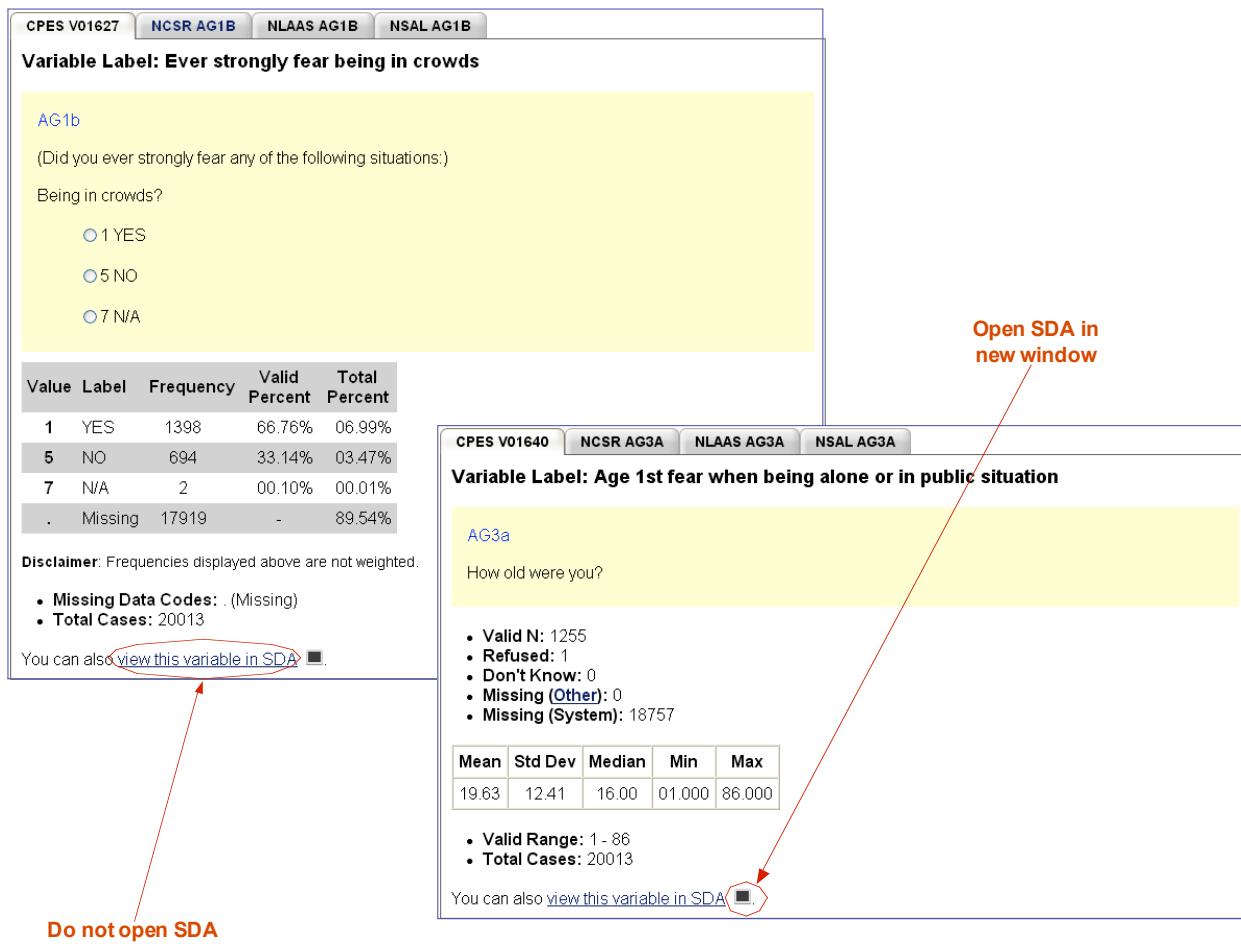
Figure 17. CPES Finance Section Variables That Appear in Two Different Source Instrument Sections

View Variable in SDA

The CPES *Interactive Documentation* allows users to view a CPES variable in SDA, the ICPSR online analysis system (developed by the University of California-Berkeley), which has additional information about the variable.

On any variable screen (Figure 18) click on *view this variable in SDA* to view the variable in SDA format. If you click on the window icon (), a separate window will open. Online Analysis using SDA also is available for all four CPES datasets (CPES, NCS-R, NLAAS, and NSAL).

The first time in a CPES Web session that a user tries to access SDA, Download Data, or do Online Analysis, user authentication is required, that is, a user must enter an email address and password for an ICPSR “MyData” Account (see ICPSR “MyData” Account Options).



Variable Label: Ever strongly fear being in crowds

AG1b

(Did you ever strongly fear any of the following situations:)

Being in crowds?

1 YES
 5 NO
 7 N/A

Value	Label	Frequency	Valid Percent	Total Percent
1	YES	1398	66.76%	06.99%
5	NO	694	33.14%	03.47%
7	N/A	2	00.10%	00.01%
.	Missing	17919	-	89.54%

Disclaimer: Frequencies displayed above are not weighted.

- Missing Data Codes: . (Missing)
- Total Cases: 20013

You can also [view this variable in SDA](#) 

Variable Label: Age 1st fear when being alone or in public situation

AG3a

How old were you?

- Valid N: 1255
- Refused: 1
- Don't Know: 0
- Missing (Other): 0
- Missing (System): 18757

Mean	Std Dev	Median	Min	Max
19.63	12.41	16.00	01.000	86.000

- Valid Range: 1 - 86
- Total Cases: 20013

You can also [view this variable in SDA](#) 

Do not open SDA in new window

Open SDA in new window

Figure 18. Options for Viewing a CPES Variable in SDA, the ICPSR Online Analysis System

Figures 19 and Figure 20 show what information SDA provides for a question with response options (V01627) and a numeric question (V01640). Unlike the CPES *Interactive Documentation*, SDA gives the frequency distribution for responses to numeric questions (Figure 19). Note also that missing data codes are 7, 8, and 9 [Missing (Other) Don't Know, Refused] in the *Interactive Documentation*, and -7, -8, -9 in SDA. See the "Missing Data Codes" section of the Data Processing Notes for further information on the "Missing (Other)" codes.

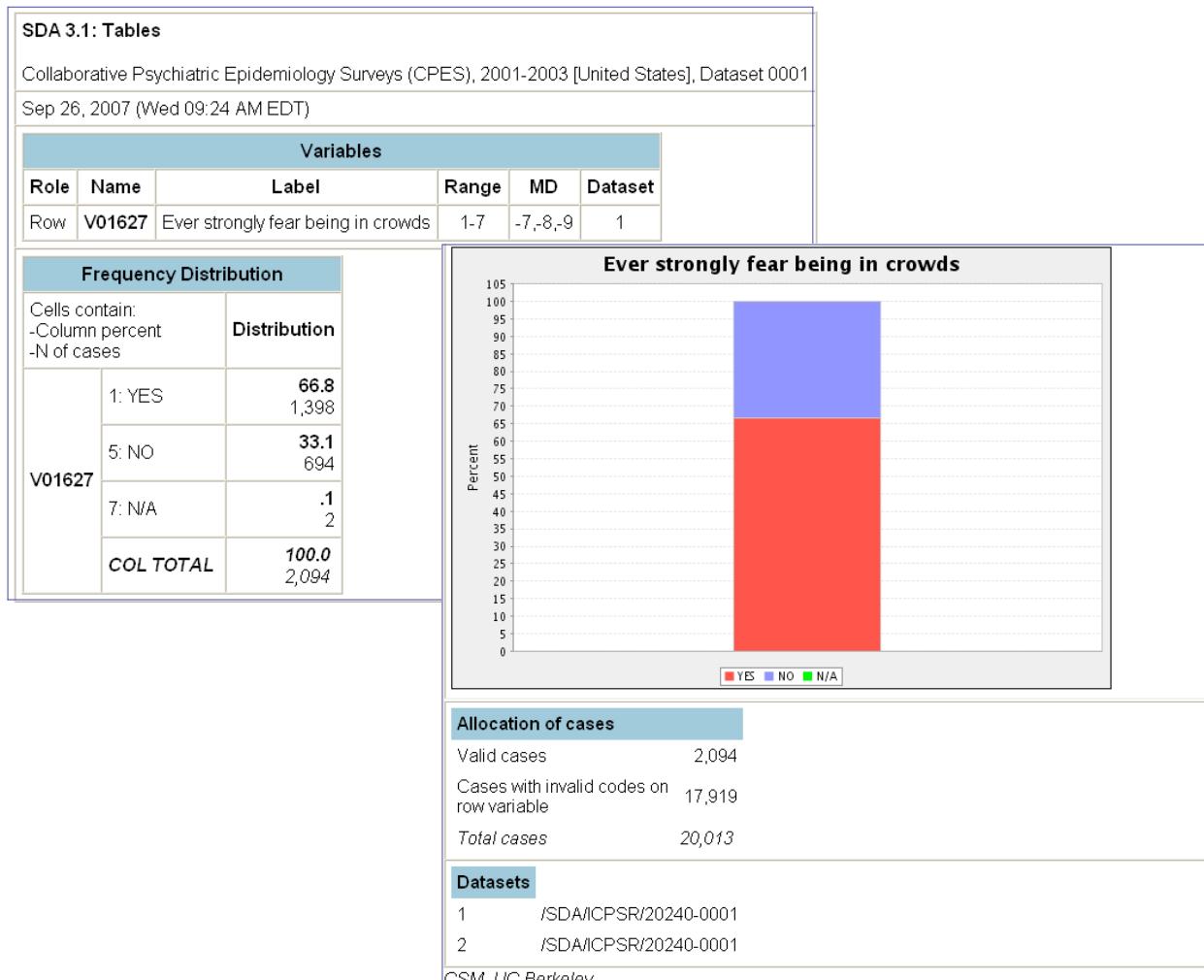


Figure 19. SDA View for CPES Variable V01627 (Enumerated Response Options)

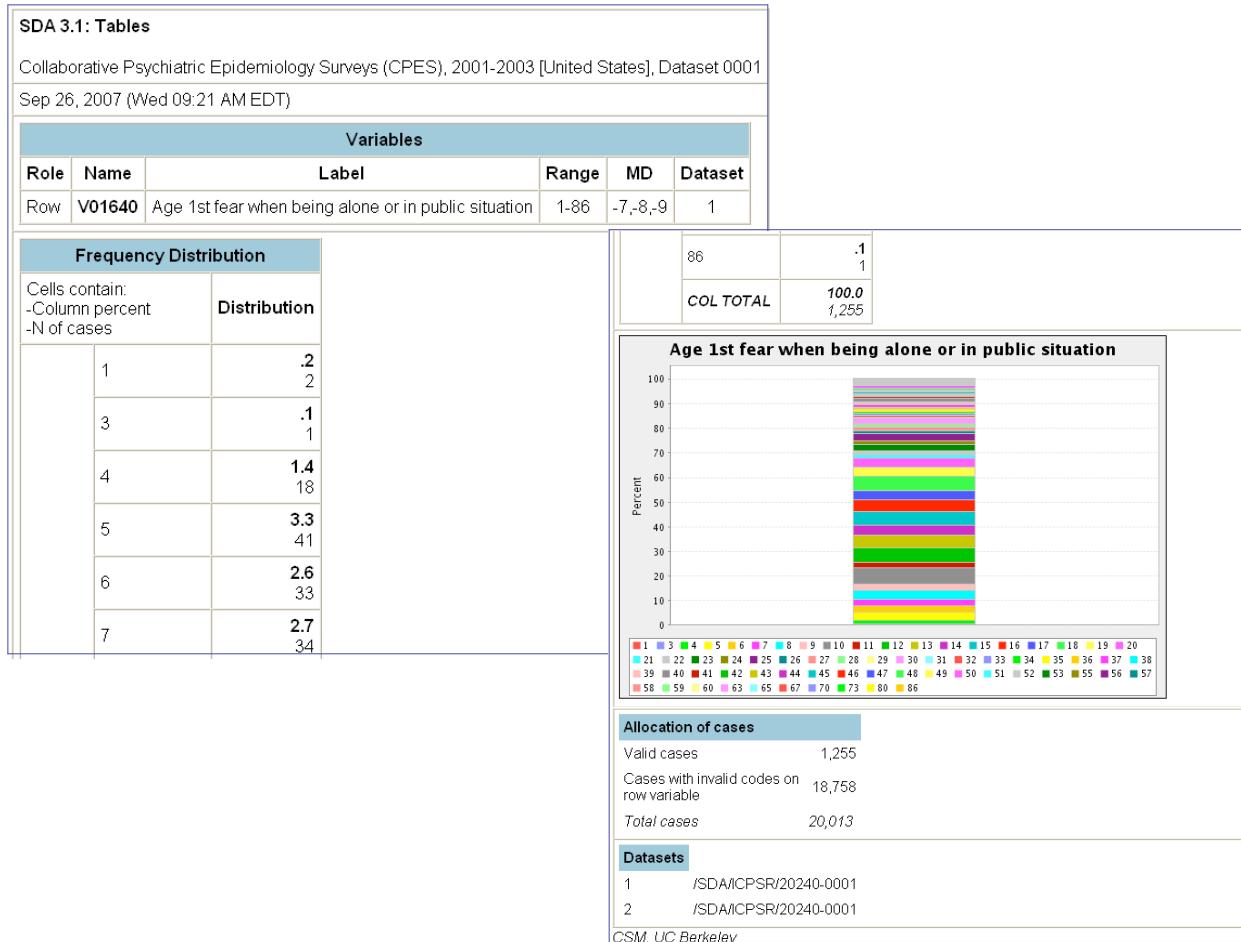


Figure 20. SDA View for CPES Variable V01640 (Numeric)

To return to the CPES variable in *Interactive Documentation*, click on the browser Back button (or the browser window close button if you opened a separate SDA window).

View All Variables in Section

CPES *Interactive Documentation* shows you information at the variable label. To scroll through a complete section, click on the *view all variables in this section* at the top or bottom of the section contents page (Figure 21), or on *scroll through all the questions in this section* at the bottom of the variable information page (Figure 22).

Collaborative Psychiatric Epidemiology Surveys

Background Using CPES Interactive Documentation Download Data Publications Online Analysis

home - related sites - search - contact us - help - MyData options... ▾

Agoraphobia

file: [CPES](#) > section: [Agoraphobia](#) > language: English

You can also choose to [view all variables in this section](#) in one long page.

* indicates there is some discrepancy in the question and/or answer text.
 † For the individual studies, this variable exists in different sections from CPES.

ID	V09195 Why not agora help from fam/friends-2nd mention	AG35	AG35	AG31B2†
V01626	V01730 Received helpful/effective treatment for fear	AG35	AG35	
V01627	V01731 Age 1st got helpful/effective treatment for fear	AG35A	AG35A	
V01628	V01732 Total profs seen for fear incl helpful treatment doc	AG35B	AG35B	
V01629	V01733 # of professionals ever talked to about fear	AG35C	AG35C	
	V01734 Received professional treatment for fear in past year	AG37	AG37	
	V01735 Ever hospitalized overnight for fear?	AG38	AG38	AG30
	V01736 # of close relatives w/ fear of home alone/crowds/away	AG38_1	AG38_1	
	V01737 Age 1st time hospitalized overnight for fear	AG38A	AG38A	AG30A*
	V01738 INTERVIEWER CHECKPOINT			AG39

You can also choose to [view all variables in this section](#) in one long page.

View all variables links at top and bottom of section contents page

Figure 21. Links for Viewing All Variables in Section (Contents Page)

To view all questions from a single question (Figure 22), click on the *scroll through all the questions in this section* link at the bottom of the page. To view all questions in a separate window, click on the window icon ().

file: [CPES](#) > section: [Agoraphobia](#) > variable: [V01627](#) > language: English

[<- previous variable](#) [next variable -->](#)

CPES V01627 NCSR AG1B NLAAS AG1B NSAL AG1B

Variable Label: Ever strongly fear being in crowds

AG1b
(Did you ever strongly fear any of the following situations:)

Being in crowds?

1 YES
 5 NO
 7 N/A

Value	Label	Frequency	Valid Percent	Total Percent
1	YES	1398	66.76%	06.99%
5	NO	694	33.14%	03.47%
7	N/A	2	00.10%	00.01%
.	Missing	17919	-	89.54%

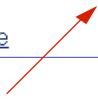
 **Disclaimer:** Frequencies displayed above are not weighted.

- **Missing Data Codes:** . (Missing)
- **Total Cases:** 20013

You can also [view this variable in SDA](#) .

You can choose to [scroll through all the questions in this section](#)  Be warned that this can be rather slow.

[<- previous variable](#) [next variable -->](#)

Scroll through all questions in section 

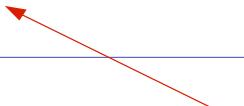
Scroll through questions in separate window 

Figure 22. Links for Scrolling Through All Variables in A Section (Single Question Page)

To return to the section contents or the single question page scrolling section page, click the browser *Back* button (or the browser window close button if you opened the scrolling page in a separate window).

Note that if you click on a variable tab when scrolling through a section, *Interactive Documentation* will take you to a page with that one variable (Figure 23). Click on the browser Back button to return to the scrolling view.

AG1d

(Did you ever strongly fear any of the following situations:)

Traveling alone or being alone away from home?

1 YES
 5 NO
 7 N/A

Value	Label	Frequency	Valid Percent	Total Percent
1	YES	1270	60.68%	06.35%
5	NO	809	38.65%	04.04%
7	N/A	14	00.67%	00.07%
-8	DONT KNOW	1	-	00.00%
.	Missing	17919	-	89.54%

Disclaimer: Frequencies displayed above are not weighted.

- **Missing Data Codes:** -8 (Don't know), . (Missing)
- **Total Cases:** 20013

You can also [view this variable in SDA](#).

Single question page

next variable -->

CPES V01630 NCSR AG1E NLAAS AG1E NSAL AG1E

Variable Label: Ever strongly fear using public transportation

AG1e

(Did you ever strongly fear any of the following situations:)

Using public transportation?

1 YES
 5 NO
 7 N/A

Universe

Applicable for all respondents.

Value	Label	Frequency	Valid Percent	Total Percent
1	YES	342	32.73%	03.68%
5	NO	688	65.84%	07.41%
7	N/A	15	01.44%	00.16%
-8	DONT KNOW	2	-	00.02%
.	Missing	8235	-	88.72%

Disclaimer: Frequencies displayed above are not weighted.

- **Missing Data Codes:** -8 (Don't know), . (Missing)
- **Total Cases:** 9282

You can choose to [scroll through all the questions in this section](#). Be warned that this can be rather slow.

Figure 23. Scrolling Section and Single Question Views

25

Additional Question Information

When scrolling through all variables in a section of an NCS-R, NLAAS, or NSAL instrument via the Browse the Individual Surveys link on the CPES Home Page, there is additional information available for some questions. In addition to question text and response options, there may also be links to *respondent booklet* information provided to respondents to assist in choosing response options, and interviewer instructions (generally question-level objectives or definitions).

If available these follow the question text and response options under the header *Additional Documentation* (see Figures 24 and 25). Clicking on a link for additional information opens a new window. Click on the browser *Back* button to return to the question window.

CPES V01626 NCSR AG1 NLAAS AG1A NSAL AG1

Variable Label: Ever strongly fear being home alone

AG1

☞ (RB.PG 15)

AFTER EACH 'YES' RESPONSE, ASK R TO CHECK CORRESPONDING SITUATION IN BOOKLET

Earlier you mentioned having a strong fear of things like crowds, public places, and traveling away from home. The next questions are about which of these things you feared. · Looking at page 16 in your booklet, did you ever strongly fear any of the following situations?

Being home alone?

1 YES
 5 NO
 7 N/A

Additional Documentation

- [Respondent Booklet](#)

Click the **Back** button to return to the scrolling section

NCSR RESPONSE BOOKLET - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address http://cpsr.umich.edu/CPES/instrument/NCSR_RB.htm#RB_15

DID YOU EVER STRONGLY FEAR...

- Meeting new people
- Talking to people in authority
- Speaking up in a meeting or class
- Going to parties or other social gatherings
- Acting, performing, or giving a talk in front of an audience
- Taking an important exam or interviewing for a job
- Working while someone watches
- Entering a room when others are already present
- Talking with people you don't know very well
- Expressing disagreement to people you don't know very well
- Writing or eating or drinking while someone watches
- Urinating in a public bathroom or using a bathroom away from home
- Being in a dating situation
- Any other social or performance situation where you could be the center of attention or where something embarrassing might happen

Figure 24. Additional Question Documentation: Respondent Booklet

Variable Label: Which fear experienced: having panic attack

AG4d
(Which of the following fears did you experience?)
Fear that you might have a panic attack?

1 YES
 5 NO

Additional Documentation

- [Interviewer Instructions](#)

[View Universe](#)

Value	Label	Frequency	Valid Percent	Total Percent
1	YES	374	43.90%	04.03%
5	NO	478	56.10%	05.15%
-8	DONT KNOW	3	-	00.03%
.	Missing	8427	-	90.79%

Disclaimer: Frequencies displayed above are not weighted.

- Missing Data Codes: -8 (Don't know), . (Missing)
- Total Cases: 9282

Click the **Back** button to return to the scrolling section

http://icpsr.umich.edu/CPES/instrument/qxq.html - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address: http://icpsr.umich.edu/CPES/instrument/qxq.html#AG4d

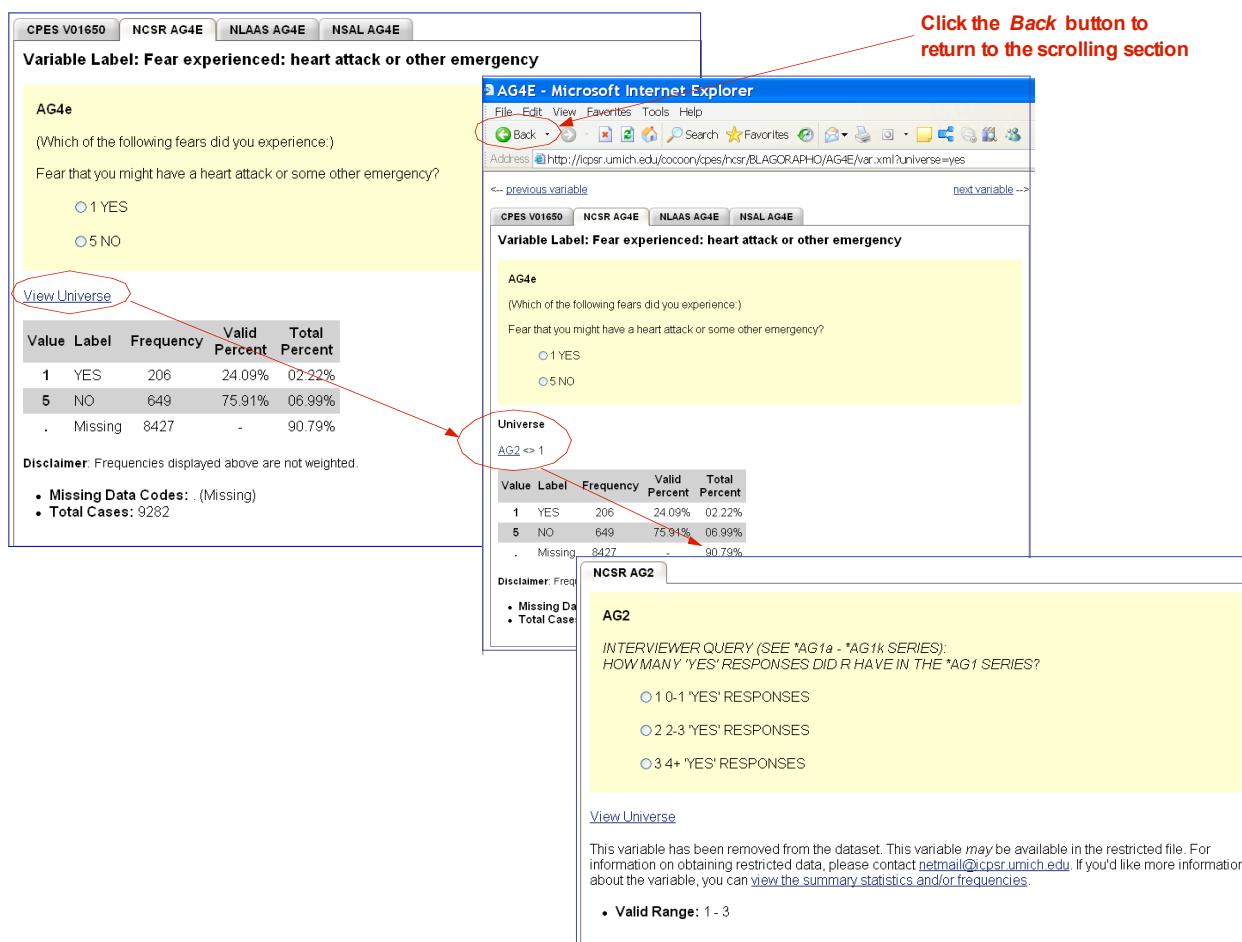
AG4d.
A panic attack is a sudden attack of extreme fear or anxiety.

Figure 25. Additional Question Documentation: Interviewer Instructions

Universes

When scrolling through all variables in a section of the NCS-R, NLAAS, or NSAL instrument, the survey population to which a question applies, that is, the universe, is noted for each question. If all respondents were asked the question, the notation will be "Applies to all respondents." If not, there will be a *View Universe* link. Clicking on the link will expand the universe, indicating the prior responses that controlled whether the respondent was asked the displayed question. The example in Figure 26 shows that the universe for NCS-R variable AG4e (CPES variable V01650) is all respondents for which the value of AG2 is 1.

Clicking on the AG2 link in the expanded universe shows that AG2 is an interviewer query about how many "Yes" responses the respondent gave in the AG1 question series, and that if a respondent gave less than two "Yes" responses in this series, question AG4e applied to that respondent. Interviewers did not ask AG4e of other respondents. AG1 is not in the CPES dataset.



**Figure 26. The Universe for NCS-R Question AG4e:
Respondents Who Gave Less Than Two "Yes" Responses to AG1a through AG1k**

Note that universes are derived from the computer assisted survey instrument flow logic and represent one or more conditions under which the question would be asked of a respondent. If there are two or more conditions, each is listed on a separate line, with an implicit logical AND operator between conditions. For example, for the NLAAS variable FD7B (CPES variable V04461):

FD6 = 2
(FD7_1 = 3) OR (FD7 = DONTKNOW)

Thus, the correct interpretation of these conditions is:

FD6 = 2 AND
((FD7_1 = 3) OR (FD7 = DONTKNOW))

This means:

Respondents who answered NLAAS question FD7B first answered (1) "2" to SR1701, and (2) either "3" to FD7_1 or "Don't Know" to FD7.

Dropped Variables

Processors dropped many variables in the NCS-R, NLAAS, and NSAL source datasets, for the following reasons:

1. To protect the identity of research subjects, including dropping source variables for constructed demographics created to mask identity;
2. If they were source variables for constructed variables created for other purposes (e.g., NSAL's variable E14a-e15a, which has combined data from three questions that resulted from routing respondents through three different question wordings to gather the same data); or
3. If they were the following types of computer-assisted instrument variables:
 - Open-ended question with text response;
 - Open-ended "other specify" question with text response;
 - Instrument screen with introductory text ("ENTER 1 TO CONTINUE");
 - Interviewer checkpoint or instruction screen; or
 - Interviewing software routing check.

Figure 27 shows a variable dropped from the NCS-R Post-Traumatic Stress Disorder section. Click on [view the summary statistics and/or frequencies](#) link to view the frequencies for this question to see how many respondents answered "Yes." See the "Dropped Variables" section of the [Data Processing Notes](#) for a list of variables that fall into categories 1 and 2 above and that were removed from the individual survey datasets.

The figure consists of two side-by-side screenshots. On the left is a screenshot of a survey page titled 'PT2'. It asks if the respondent ever served as a peacekeeper or relief worker in a war zone. Below the question are two radio buttons: '1 YES' and '5 NO'. At the bottom of the page, there is a link to 'Additional Documentation' which includes 'Interviewer Instructions' and a link to 'View Universe'. A red arrow points from the 'View Universe' link to the right-hand browser window. The right-hand window is titled 'PT2 - Microsoft Internet Explorer' and displays a frequency distribution table. The table has columns for Value, Label, Frequency, Valid Percent, and Total Percent. The data is as follows:

Value	Label	Frequency	Valid Percent	Total Percent
1	YES	45	00.83%	00.48%
5	NO	5396	99.17%	58.13%
-8	Dont know	1	00.00%	00.01%
.	Missing	3840	-	41.37%

Disclaimer: Frequencies displayed above are not weighted.

Figure 27. An NCS-R Variable Dropped from the Post-Traumatic Stress Disorder Section

Diagnostic Variables

The CPES dataset has 27 sections with constructed diagnostic variables. Each begins with the letters "DX" (Figure 28), and contains constructed 30-day, 12-month, and lifetime diagnoses, as well as onset and recency, and in some cases subthreshold measures.

The screenshot shows the CPES website's "Interactive Documentation" section. At the top, there is a navigation bar with tabs: "Background", "Using CPES", "Interactive Documentation" (which is the active tab), "Download Data", "Publications", and "Online Analysis". Below the navigation bar is a menu bar with links: "home - related sites - search - contact us - help - MyData options...". The main content area is titled "Interactive Documentation". It displays a list of 27 diagnostic sections, each preceded by a "DX" prefix. The sections are:

- [30-Day Functioning](#)
- [30-Day Symptoms](#)
-
-
-
- [DX Adult Separation Anxiety Disorder](#)
- [DX Agoraphobia](#)
- [DX Alcohol Abuse](#)
- [DX Alcohol Dependence](#)
- [DX Anorexia Nervosa](#)
- [DX Attention Deficit Disorder](#)
- [DX Binge Eating Disorder](#)
- [DX Bipolar](#)
- [DX Bulimia Nervosa](#)
- [DX Conduct Disorder](#)
- [DX Drug Abuse](#)
- [DX Drug Dependence](#)
- [DX Dysthymia](#)
- [DX General Anxiety Disorder](#)
- [DX Hypomanic Episode](#)
- [DX Intermittent Explosive Disorder](#)
- [DX Major Depressive Disorder](#)
- [DX Major Depressive Episode](#)
- [DX Mania Episode](#)
- [DX Nicotine Dependence](#)
- [DX Oppositional-Defiant Disorder](#)
- [DX Panic Attack](#)
- [DX Panic Disorder](#)
- [DX Posttraumatic Stress Disorder](#)
- [DX Separation Anxiety Disorder](#)
- [DX Social Phobia](#)
- [DX Specific Phobia](#)

Figure 28. CPES Sections for 27 Diagnoses

Figure 29 shows a variable in the DX Bipolar section. Note that the linked variables for individual studies appear in a different section ("Supplemental") in their interactive documentation.

Users may also view CPES DX Bipolar variables via the [CPES Home Page](#), by clicking on the *Mood* link under [Browse CPES by Subject](#)

The screenshot displays three interconnected pages from the CPES website:

- Top Left Panel:** A table titled "DX Bipolar" showing various diagnostic variables. The row for **V07555** (DSM-IV Bi-polar I (12Mo)) is highlighted. The "NCSR" column contains [D_BIPOLARI30 †](#). The "NSAL" column contains [D_BIPOLARI12 †](#). A red circle highlights the "D_BIPOLARI12" entry.
- Top Right Panel:** A detailed view of variable **V07555**. It includes the variable label "DSM-IV Bi-polar I (12Mo)", a description of the universe ("Applicable for all respondents"), and a frequency table. The table has columns for "Value Label", "Frequency", "Valid Percent", and "Total Percent". The data shows:

Value Label	Frequency	Valid Percent	Total Percent
1 ENDORSED	39	00.66%	00.64%
5 NOT ENDORSED	5850	99.34%	96.19%
.	193	-	03.17%

 A red arrow points from the "D_BIPOLARI12" entry in the top-left table to this panel.
- Bottom Panel:** A detailed view of variable **D_BIPOLARI12**. It includes the variable label "DSM-IV Bi-polar I (12Mo)", a description of the universe ("Applicable for all respondents"), and a frequency table. The table has columns for "Value Label", "Frequency", "Valid Percent", and "Total Percent". The data shows:

Value Label	Frequency	Valid Percent	Total Percent
1 ENDORSED	39	00.66%	00.64%
5 NOT ENDORSED	5850	99.34%	96.19%
.	193	-	03.17%

 A red arrow points from the "D_BIPOLARI12" entry in the top-right panel to this panel.

Figure 29. CPES Diagnostic Variable V07555 and Linked NSAL Variable D_BIPOLAR12

Diagnostic Documentation

Documentation for constructed diagnostic variables is available for each diagnostic variable section, for example *DX Bipolar* (Figure 30). Click on the *DSM-IV Bipolar* link to open a PDF document with information on the construction of the bipolar diagnostic variables. Click on the browser back button to return to the *DX Bipolar* list of variables. See also [Browse CPES by Subject](#).

The screenshot shows the CPES website interface. On the left, there is a table titled "DX Bipolar" listing various diagnostic variables. One row, "DSM-IV Bipolar", is highlighted with a red oval. A red arrow points from this oval to the "Back" button in the Microsoft Internet Explorer toolbar. Another red arrow points from the "Back" button to the text "Click the Back button to return to the DX Bipolar section". The right side of the screen displays a Microsoft Internet Explorer window with the URL "http://www.icpsr.umich.edu/CPES/diagnostics/DSM-IV_Bipolar.pdf". The PDF document is titled "Revised Algorithm for Bipolar Spectrum" and contains detailed information about the construction of bipolar diagnostic variables, including sections on Part 1 AND Part 2, symptoms, and notes. The bottom right corner of the PDF window shows the page number "1 of 6".

Figure 30. Documentation for The Diagnostic Variables in The DX Bipolar Section

Browse CPES by Subject

From the [CPES Home Page](#), users may view Diagnostic Variables, by a disorder category, for example, *Mood*, under either *DSM-IV* (Diagnostic and Statistical Manual of Mental Disorders, 4th Edition) or *ICD-10* (International Classification of Diseases, 10th Revision). They may also click on either *DSM-IV* or *ICD-10* to see a list of disorders under either classification.

For example (Figure 31), clicking on *Mood* under *DSM-IV*, and then clicking on *Bipolar*, brings up a list of constructed variables for DSM-IV Bipolar Mood Disorder, documentation on how they were constructed (see [Diagnostic Documentation](#)), and variables in the relevant sections (*Depression* and *Mania*).

Note that there are not always parallel ICD-10 constructed diagnostics for all DSM-IV diagnostics. For example, there are no ICD-10 Bipolar, Major Depressive Disorder, or Major Depressive Episode diagnostic variables.

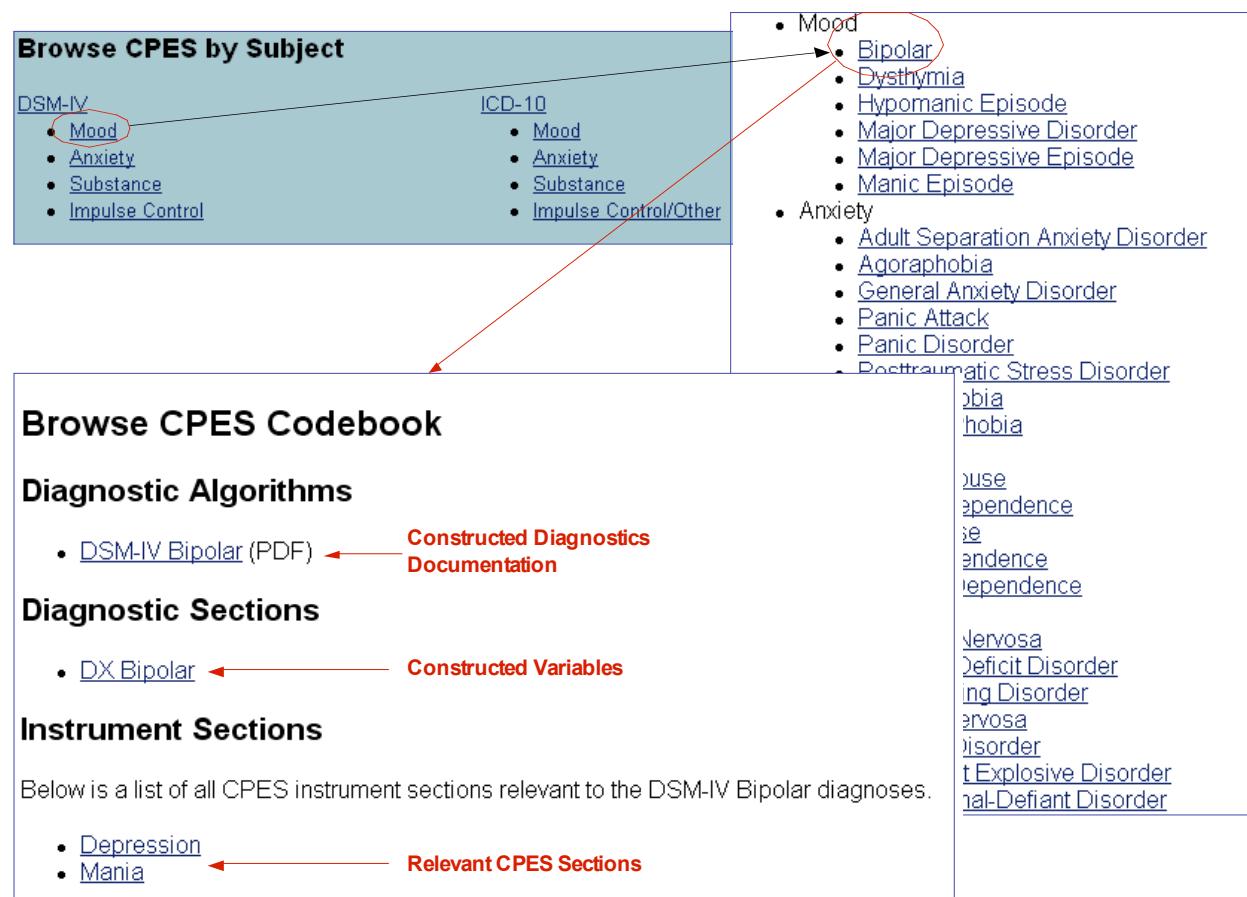


Figure 31. Browsing by Subject: DSM-IV Bipolar Mood Disorder

Browse the Individual Surveys

Users may go directly to the interactive documentation for an individual survey (NCS-R, NLAAS, or NSAL) from the [CPES Home Page](#), by clicking on the survey name. Functionality is the same as with [Interactive Documentation](#), except that the focus is initially on the survey tab (e.g., NLAAS, as shown in Figure 32) rather than the CPES tab. Links to Web sites for the individual studies are also available on the CPES Home Page, in the upper left corner under *Using CPES* (see also [Related Links](#)).

The figure consists of two screenshots. The top screenshot shows a sidebar titled 'Browse the Individual Surveys' with three options: 'NCS-R', '[NLAAS](#)' (which is circled in red), and 'NSAL'. A red arrow points from this sidebar to the 'Interactive Documentation' section of the main CPES page. The main screenshot shows the 'Collaborative Psychiatric Epidemiology Surveys' homepage with a navigation bar including 'Background', 'Using CPES', 'Interactive Documentation' (which is highlighted in blue), 'Download Data', 'Publications', and 'Online Analysis'. Below the navigation bar is a menu with links: 'home - related sites - search - contact us - help - MyData options...'. The 'Interactive Documentation' section contains the heading 'Interactive Documentation', the text 'file: [NLAAS](#) >', and the instruction 'You can also choose to browse by selecting [DSM-IV/ICD subjects](#)'. At the bottom of this section is a horizontal menu with tabs: 'CPES', 'NCSR', '[NLAAS](#)' (which is highlighted in red), and 'NSAL'. The bottom part of the main screenshot shows a list of survey sections: '30-Day Functioning', 'Acculturative Stress', 'Adult Demographics', 'Agoraphobia', 'Childhood Demographics', 'Children', 'Chronic Conditions', 'Conduct Disorder', 'Context of Exit Questions', 'Demographics', 'Depression', 'Discrimination', 'Eating Disorders', 'Employment', and 'Family Cohesion'.

Figure 32: Browsing Interactive Documentation for NLAAS

Download Data

Click on the *Download Data* tab to download data for one of the four CPES datasets (Figure 33). There are five steps to downloading data:

1. Select available data formats,
2. Select datasets,
3. Add data to cart,
4. Review cart, which is optional, and
5. Download cart contents.

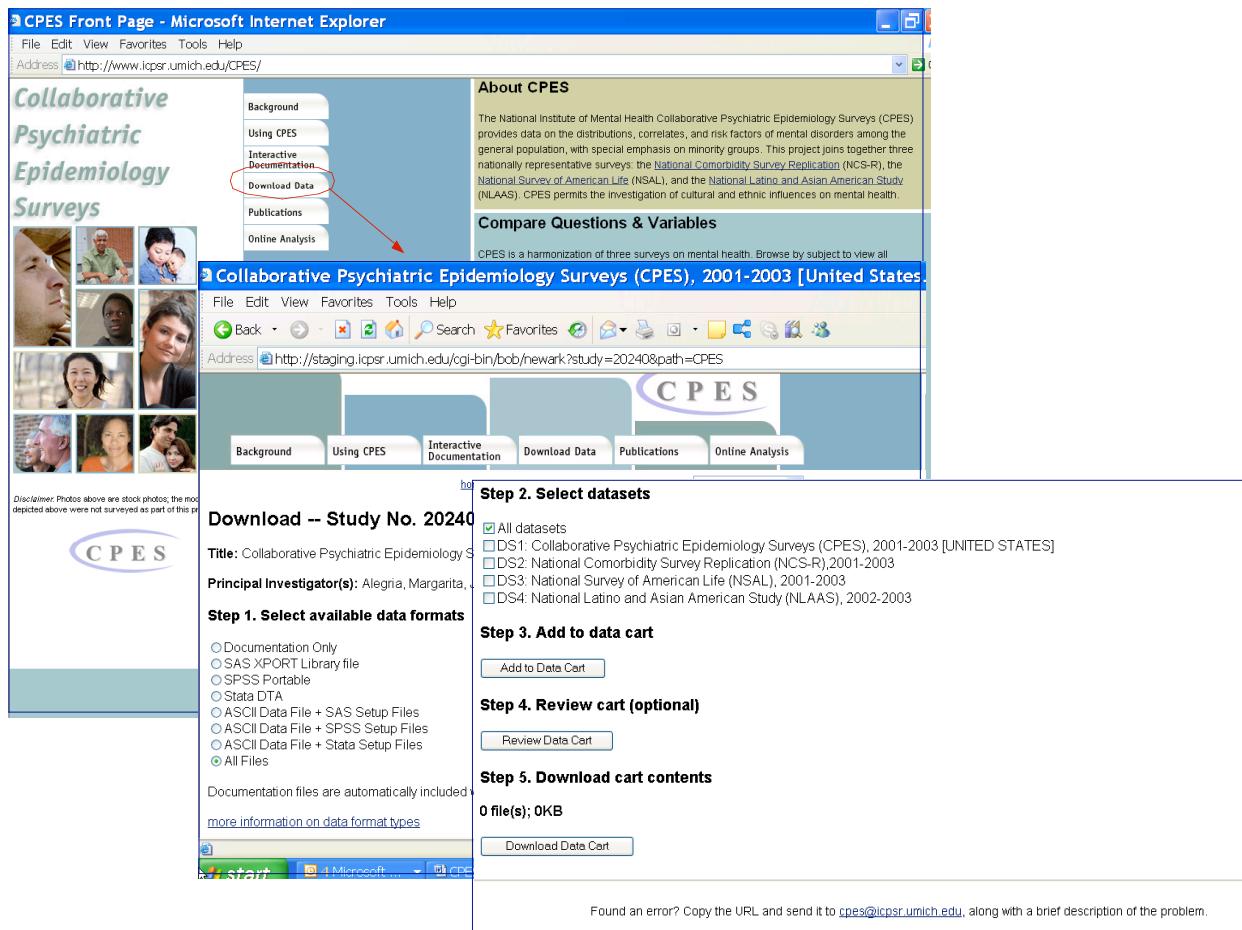


Figure 33. Download Data Steps

Figure 34 shows the contents of the Data Cart if the user selects ASCII Data File + SAS Setup Files at Step 1 and Dataset 1 (DS1) at Step 2, clicks on *Add to Data Cart*, at Step 3, and clicks on *Review Data Cart* at Step 4.

The screenshot shows the CPES website interface. At the top, there is a navigation bar with links for Background, Using CPES, Interactive Documentation, Download Data, Publications, and Online Analysis. The main content area is titled "Data Cart". It contains instructions for reviewing files and a "Download Data Cart" button, which is circled in red. Below this are buttons for "Delete Selected Files", "Select All", and "Deselect All". A list of selected files is shown, including "ICPSR 20240 Collaborative Psychiatric Epidemiology Surveys (CPES), 2001-2003 [United States]" and "DS1: Collaborative Psychiatric Epidemiology Surveys (CPES), 2001-2003 [UNITED STATES]".

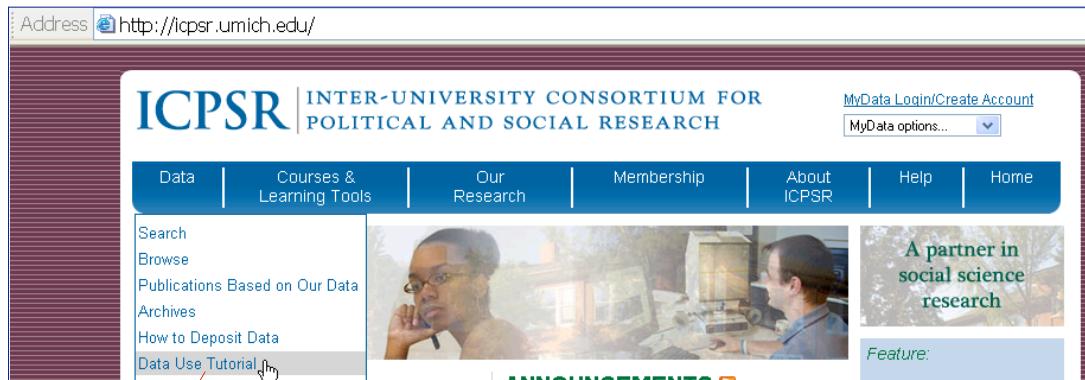
File Type	Description	Size
Study-level files	Documentation - PDF (752K) User guide - PDF (1128K)	
DS1	Codebook - PDF (44624K) Data - ASCII (300088K) Setup - SAS (880K)	

Figure 34. Contents of Data Cart for ASCII Dataset for CPES (DS1) with SAS Setups

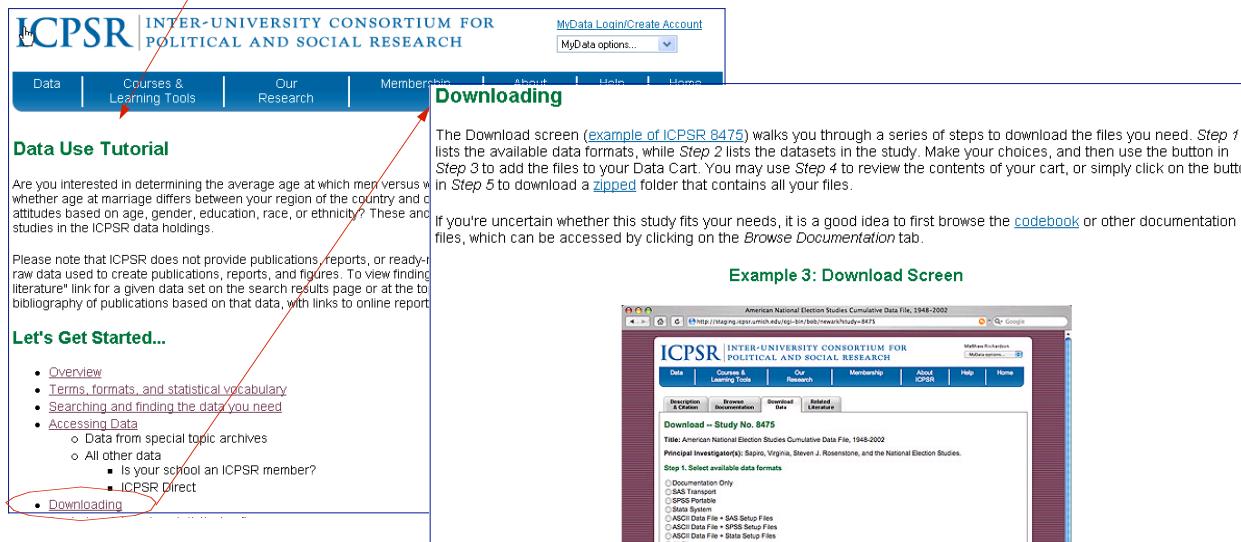
Clicking *Download Data Cart* from either the *Download Data* page or the *Data Cart* page initiates the data download, and the user is prompted to start the download and indicate where to store the ZIP file with the dataset(s) and documentation.

The first time in a CPES Web session that a user tries to access SDA ([View Variable in SDA](#)), [Download Data](#), or do [Online Analysis](#), user authentication is required, that is, a user must enter an email address and password for an ICPSR “MyData” Account or create a new user account (see Figure 44 in [ICPSR “MyData” Account Options](#)). The user must also agree to *Terms of Use* for accessing data (see Figure 45 in [ICPSR “MyData” Account Options](#)) when downloading data and doing online analysis.

Instructions for downloading and analyzing data are available from the ICPSR Web site (www.icpsr.umich.edu). From the Data menu (Figure 35), select Data Use Tutorial. In the tutorial, there is a link for information on Downloading, and in that section there is information for using setup files for the key statistical packages, SAS, SPSS, and Stata ("How to Use Setup Files to Import ASCII Data").



The screenshot shows the ICPSR homepage. A red arrow points to the "Data Use Tutorial" link in the sidebar under the "Data" category.



The screenshot shows the "Data Use Tutorial" page. A red arrow points to the "Downloading" section. The text in this section describes the download process and provides links to documentation and codebooks.

Figure 35. ICPSR Data Use Tutorial

Each of the setup files has information on how to edit the setups for your specific purposes. For example, if you downloaded the SAS setup for use with an ASCII text version of the data, comments at the beginning of the file would provide the following guidance:

```

/* -----
|
|           SAS SETUP FILE FOR ICPSR 20240
|           COLLABORATIVE PSYCHIATRIC EPIDEMIOLOGY SURVEYS (CPES) ,
|           2001-2003 [UNITED STATES]
|
|
|           SAS setup sections are provided for the ASCII version of this data
|           collection. These sections are listed below:
|
|           PROC FORMAT: creates user-defined formats for the variables. Formats

```

```
| replace original value codes with value code descriptions. Only
| variables with user-defined formats are included in this section.

| DATA: begins a SAS data step and names an output SAS data set.

| INFILE: identifies the input file to be read with the input statement.
| Users must replace the "data-filename" with a filename specifying the
| directory on the user's computer system in which the downloaded and
| unzipped data file is physically located (e.g.,
| "c:\temp\20240-0001-data.txt").

| ATTRIB: initializes variable names and assigns descriptive labels.

| INPUT: assigns the name, type, decimal specification (if any), and
| specifies the beginning and ending column locations for each variable
| in the data file.

| FORMAT: associates the formats created by the PROC FORMAT step with
| the variables stored in the SAS data set. Users can refer to their
| SAS manual for information on how to permanently store formats in a
| SAS catalog.

| MISSING VALUE RECODES: sets user-defined numeric missing values to
| missing as interpreted by the SAS system. Only variables with
| user-defined missing values are included in this section.

| If any variables have more than one missing value, they are assigned
| to the standard missing value of a single period (.) in the statement
| below. To maintain the original meaning of missing codes, users may want
| to take advantage of the SAS missing values (the letters A-Z or an
| underscore preceded by a period).

| An example of a standard missing value recode:

| IF (RELATION = -8 OR RELATION = -9) THEN RELATION = .;

| The same example using special missing value recodes:

| IF RELATION = -8 THEN RELATION = .D;
| IF RELATION = -9 THEN RELATION = .R;

| To maintain the original meaning of missing codes, users may want
| to take advantage of the SAS missing values (the letters A-Z or an
| underscore preceded by a period).

| NOTE: Users should modify this setup file to suit their specific needs.
| Sections for PROC FORMAT, FORMAT, and MISSING VALUE RECODES have been
| commented out (i.e., '/*'). To include these sections in the final SAS
| setup, users should remove the SAS comment indicators from the desired
| section(s).

-----*/
```

Continuing with this example, if you wish to create a permanent SAS dataset with a formats catalog and special missing value recodes [.D, .R, and .N, for “Don’t know,” “Refused,” and “Missing (Other), respectively], you could edit the SAS setup as follows:

1. Create a library, e.g., "library":

```
libname library 'C:\CPES';
```

2. Remove SAS comment indicators and modify PROC FORMAT, e.g.,

```
PROC FORMAT lib=library;
```

3. Modify the DATA and INFILE statements, e.g.,

```
DATA library.CPES0001;  
  
INFILE "C:\CPES\da20240-0001.txt" LRECL=15299;
```

4. Remove SAS comment indicators around the following SAS missing data recodes statements (do not remove comment indicators from the other SAS missing data recodes statements—ones that set -7, -8, -9 to system missing):

```
array numeric_vars{*} _NUMERIC_ ;  
do i = 1 to dim(numeric_vars) ;  
    if (numeric_vars[i] EQ -7) then numeric_vars[i] = .N ;  
    if (numeric_vars[i] EQ -8) then numeric_vars[i] = .D ;  
    if (numeric_vars[i] EQ -9) then numeric_vars[i] = .R ;  
end ;  
drop i ;
```

Publications

Click on the *Publications* tab (Figure 36) for links to related published literature and links to publication Web pages for each of the individual studies, NCS-R, NLAAS, and NSAL. This link is also at the top of each page of the CPES Web site.

The screenshot shows the CPES Front Page in Microsoft Internet Explorer. On the left, there's a sidebar with links: Background, Using CPES, Interactive Documentation, Download Data, Publications (which is highlighted with a red oval), and Online Analysis. Below these are links for Related Sites, Search, Contact Us, Help, and MyData options. A large image of diverse people is displayed below the sidebar. The main content area has a header "About CPES" and "Collaborative Psychiatric Epidemiology Surveys". It features a navigation bar with tabs: Background, Using CPES, Interactive Documentation, Download Data, Publications (highlighted with a red arrow pointing from the sidebar), and Online Analysis. Below the navigation bar is a breadcrumb trail: home - related sites - search - contact us - help - MyData options... A "Related literature for:" section lists "Collaborative Psychiatric Epidemiology Surveys (CPES), 2001-2003 [United States] (ICPSR 20240)" with 130 Results, categorized into Journal Articles (124), Book Sections (5), and Books (1). A note says "You can also browse citations collected by the individual projects:" followed by a list: NCS-R, NLAAS, and NSAL. At the bottom, there are two side-by-side boxes for National Comorbidity Survey, Center for Multicultural Mental Health Research, and National Latino American Study, each listing publications and research projects.

**Figure 36. The CPES *Publications* Web Page:
Related Literature and Links to Study Publication Web Pages**

Online Analysis

After clicking on *Online Analysis* tab, a user will select a dataset (Figure 37; CPES, NCS-R, NLAAS, or NSAL). This will open the SDA Web Application (Figure 38). SDA online help is available for *Getting Started*, *Variable Selection*, and the *SDA Frequencies/Crosstabulation Program*. Selecting *General* help or help for *Recoding Variables* opens a Web page with documentation on all SDA Analysis Programs (Figure 39).

The screenshot shows the CPES Front Page in Microsoft Internet Explorer. The URL in the address bar is <http://www.icpsr.umich.edu/CPES/>. On the left, there is a sidebar with links: Background, Using CPES, Interactive Documentation, Download Data, Publications, and Online Analysis (which is circled in red). Below the sidebar are several small stock photos of diverse individuals. The main content area has a green header "About CPES" with a detailed description of the project. Below it is a section titled "Compare Questions & Variables" and "Browse CPES by Subject". At the bottom of the main content area, there are two sets of categories: "DSM-IV" (Related Sites, Search, Contact Us, Help) and "ICD-10" (Mood). The bottom navigation bar includes links for home, related sites, search, contact us, help, and MyData options. A red arrow points from the "Online Analysis" link in the sidebar to the "Online Analysis" section in the main content area.

Collaborative Psychiatric Epidemiology Surveys

About CPES

The National Institute of Mental Health Collaborative Psychiatric Epidemiology Surveys (CPES) provides data on the distributions, correlates, and risk factors of mental disorders among the general population, with special emphasis on minority groups. This project joins together three nationally representative surveys: the National Comorbidity Survey Replication (NCS-R), the National Survey of American Life (NSAL), and the National Latino and Asian American Study (NLAAS). CPES permits the investigation of cultural and ethnic influences on mental health.

Compare Questions & Variables

CPES is a harmonization of three surveys on mental health. Browse by subject to view all questions/variables in CPES, or select an individual survey.

Browse CPES by Subject

DSM-IV • Mood ICD-10 • Mood

Background **Using CPES** **Interactive Documentation** **Download Data** **Publications** **Online Analysis**

home - related sites - search - contact us - help - MyData options... ▾

Online Analysis

Users can perform online data exploration and analysis on the CPES data without downloading files by using the Survey Documentation and Analysis (SDA) system developed and maintained by the Computer-Assisted Survey Methods Program at the University of California, Berkeley.

SDA allows users to:

- Review frequencies or summary statistics of key variables to determine what further analyses are appropriate
- Review frequencies or summary statistics for missing data
- Produce simple summary statistics for reports
- Create statistical tables from raw data
- Create a subset of cases or variables
- Browse an electronic codebook

Use SDA to explore CPES data:

- Collaborative Psychiatric Epidemiology Surveys (CPES)
- National Comorbidity Survey Replication (NCS-R)
- National Survey of American Life (NSAL)
- National Latino and Asian American Study (NLAAS)

You can find [more information on SDA](#) on the ICPSR Web site.

Select dataset

Figure 37. Online Analysis: Select Dataset

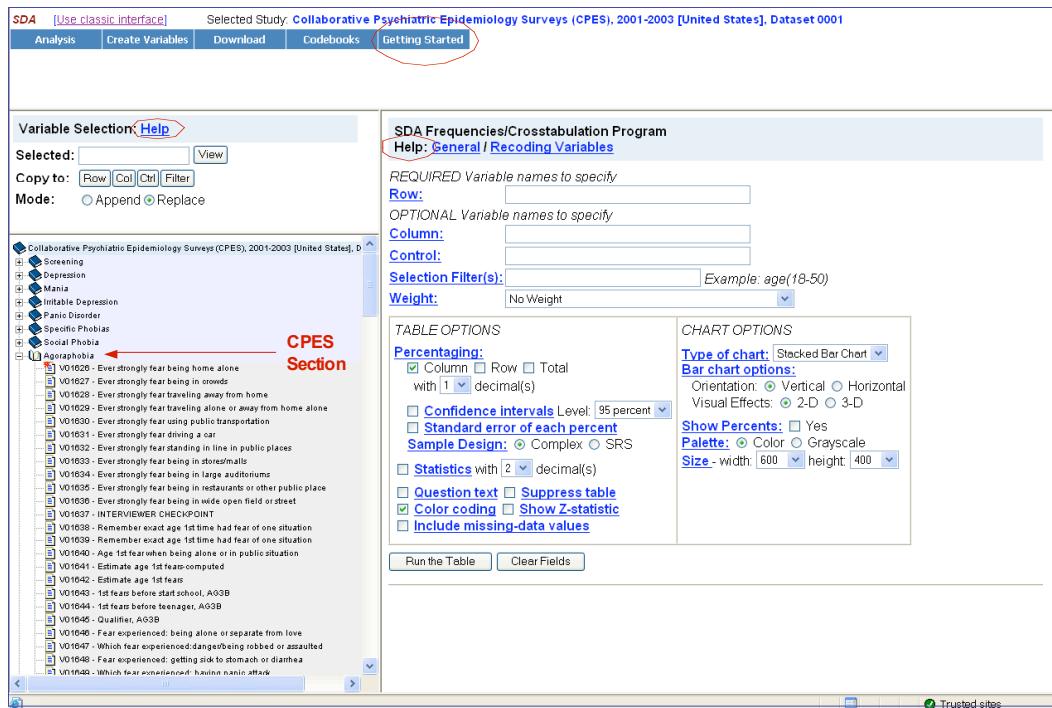


Figure 38. SDA Web Application: CPES Section and Online Help Links

The screenshot shows the 'Help for All Analysis Programs' page. It features a 'CONTENTS' sidebar with links to 'Help for Specific Analysis Programs' (Frequencies and Crosstabulation, Descriptives, Comparison of Means, Correlation Matrix) and 'General' help topics (General Help, Frequencies and Crosstabulations, Descriptives, Comparison of Means, Correlation Matrix). The main content area displays the 'Online Help for Analysis Programs - SDA 3.1' page, which provides general information about the help system and links to specific analysis programs. A red arrow labeled 'Move to top' points from the bottom of the 'General' help section back up to the 'General' help link in the sidebar.

Figure 39. SDA Online Help:
From “General” Help, Move to Top for Other Analysis Program Help

Related Sites

Click on the *Related Sites* link on the [CPES Home Page](#) (Figure 40) for additional links to related Web sites, such as the individual sites for NCS-R, NLAAS, and NSAL, the *Composite International Interview (CIDI)*, the *Diagnostic and Statistical Manual of Mental Disorders (DMS)*, and online documentation for the *International Classification of Diseases (ICD)*. The *Related Sites* link is also at the top of each page of the CPES Web site.

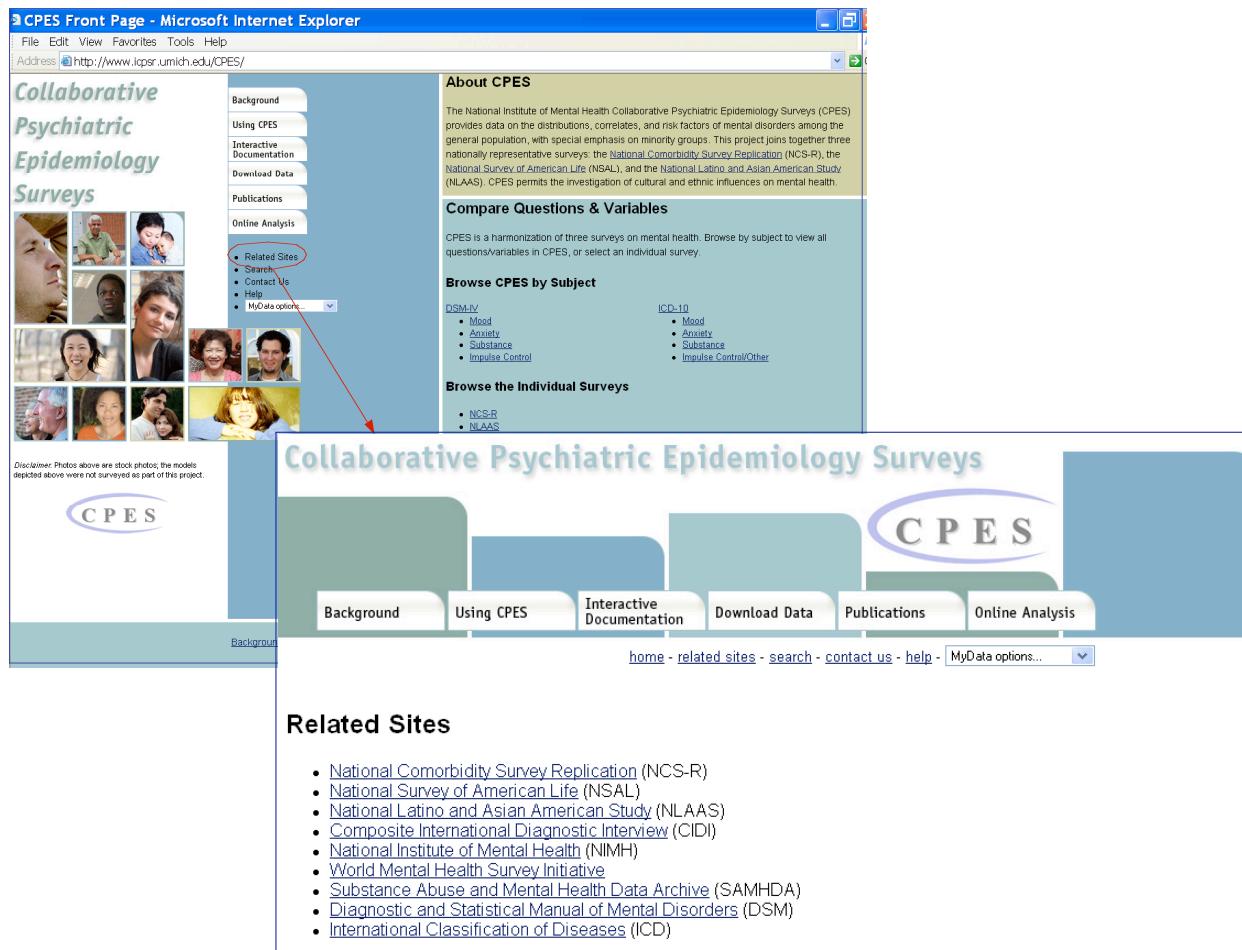


Figure 40. CPES Related Sites

Search

Click on the **Search** link on the **CPES Home Page** (Figure 41) to search for questions with specific words or phrases, in the CPES interactive codebook, or the interactive codebook for NCS-R, NLAAS, or NSAL. This link is also at the top of each page of the CPES Web site. The example in Figure 41 shows the results for a search of the CPES codebook for the phrase "physical disorder:"

The screenshot shows the CPES Front Page in Microsoft Internet Explorer. A red arrow points from the 'Search' link in the left sidebar to the search bar on the main search results page. Another red arrow points from the 'go' button on the search results page back to the search bar.

CPES Front Page - Microsoft Internet Explorer

File Edit View Favorites Tools Help
Address: http://www.lcpr.umich.edu/CPES/

About CPES
The National Collaborative Psychiatric Epidemiology Surveys (NCPES) provides general population, national, and international (NLAAS) information on mental health and psychiatric disorders.

Collaborative Psychiatric Epidemiology Surveys

Background Using CPES Interactive Documentation Download Data Publications Online Analysis

Related-Sites Search Contact Us Help MyData options...

Background Using CPES Interactive Documentation Download Data Publications Online Analysis

DSM-IV
• Major Depressive Disorder
• Substance Abuse
• Impaired Functioning

Browsing
• NCES
• NLAAS
• NSAL

Announcements
• Not Available
• Sat
• Me
• Rep

Search

physical disorder phrase words

CPES NCSR go
 NLAAS NSAL

Please note that this search will return a maximum of 500 search results.

Collaborative Psychiatric Epidemiology Surveys

Background Using CPES Interactive Documentation Download Data Publications Online Analysis

Search Results

Results for: "physical disorder" Document count: "physical disorder" (2)

2 results found, sorted by relevance score using date hide summaries group by location 1-2

Disability due to physical/emotional disorder or combination
EM10 is the disability due to a physical disorder, an emotional disorder, or a combination of physical and emotional?

CPES V05185

Illness due to physical/emotional disorder/combination
DM4 is the illness/disability due to a physical disorder, an emotional disorder, or a combination of physical and emotional?

CPES V03136

score using date hide summaries group by location 1-2

Figure 41. Results of Search for Phrase "physical disorder" in CPES Codebook

The results page for the search for “physical disorder” (Figure 42) lists two variables with hyperlink labels: “Disability due to physical/emotional disorder or combination” (CPES V05185) and “Illness due to physical/emotional disorder/comb” (CPES V03138). Click on the label link for one of the variables to display that variable tab in the CPES interactive codebook.

The screenshot shows the CPES website interface. At the top, there's a navigation bar with links: Background, Using CPES, Interactive Documentation, Download Data, Publications, and Online Analysis. Below the navigation bar is a search results section titled "Search Results". The search query is "physical disorder". The results count is "Document count: 'physical disorder' (2)". There are two entries:

- Disability due to physical/emotional disorder or combination** (CPES V05185): Description: EM10 Is the disability due to a physical disorder, an emotional disorder, or a combination of physical and emotional? Link: CPES V05185
- Illness due to physical/emotional disorder/comb** (CPES V03138): Description: DM4 Is the (illness/disability) due to a physical disorder, an emotional disorder, or a combination of physical and emotional? Link: CPES V03138

Two red arrows point from the variable labels in the search results to their respective detailed descriptions below. The first arrow points to the "Disability due to physical/emotional disorder or combination" entry, and the second arrow points to the "Illness due to physical/emotional disorder/comb" entry.

CPES V05185 NCSR EM10

Variable Label: Disability due to physical/emotional disorder or combination

EM10

Is the disability due to a physical disorder, an emotional disorder, or a combination of physical and emotional?

CPES V03138 NCSR DM4

Variable Label: Illness due to physical/emotional disorder/comb

DM4

Is the (illness/disability) due to a physical disorder, an emotional disorder, or a combination of physical and emotional?

**Figure 42. Two Results for “physical disorder” Search:
CPES V05185 (NCS-R EM10) and CPES V3138 (NCS-R DM4)**

Contact Us

Click on the *Contact Us* link on the CPES Home Page (Figure 43) to locate the CPES email address. This link is also at the top of each page of the CPES Web site. Send a message to CPES (cpes@icpsr.umich.edu) with questions or requests, or to report a problem. If reporting a problem or error, copy the URL (Web site address) of the page on which you experienced the problem and paste it into the text of the message you send to ICPSR. The *Contact Us* link is also at the top of each page of the CPES Web site.

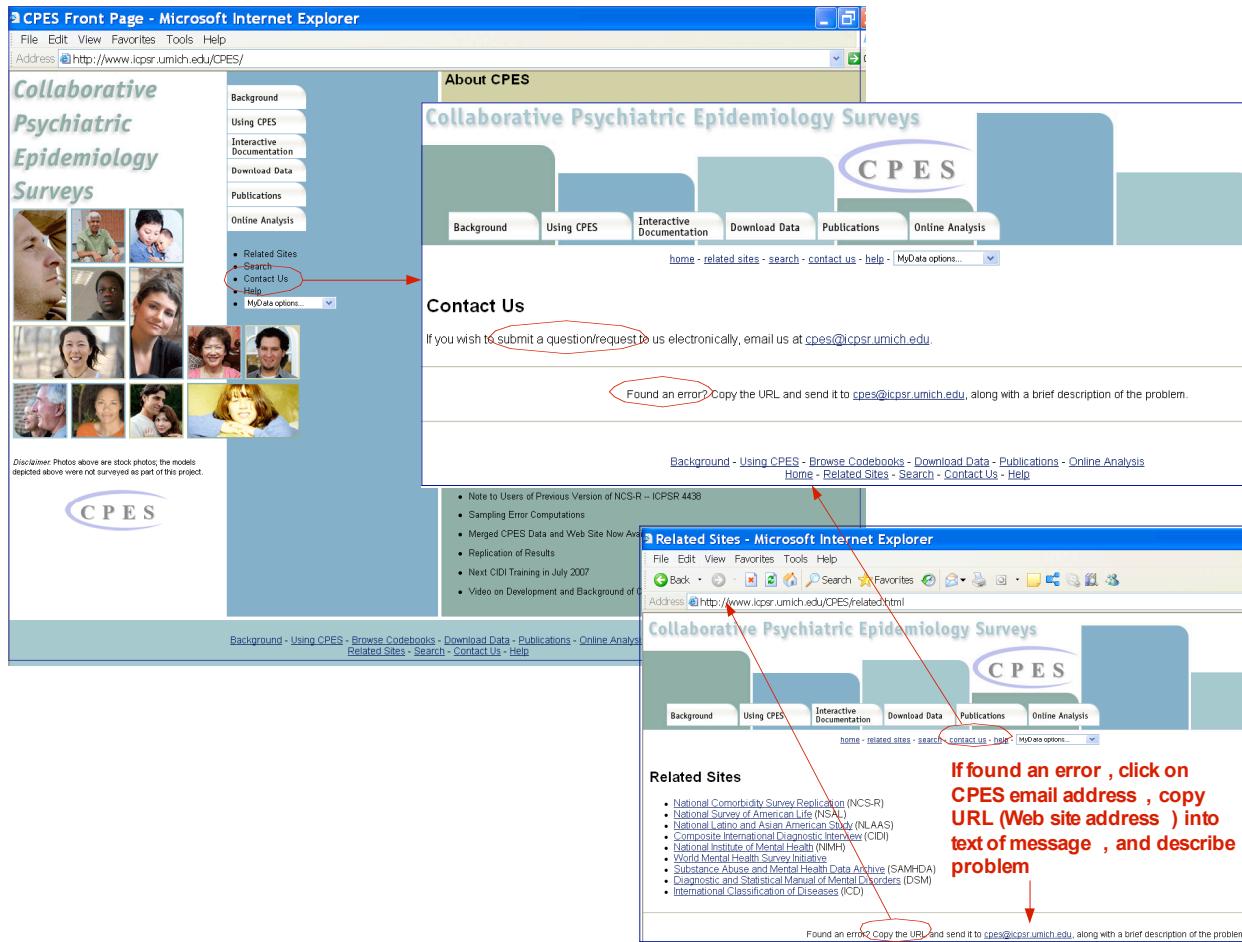


Figure 43. Contact CPES: Click on Email Address (cpes@icpsr.umich.edu) to Submit Question/Request or to Report Problem

Help (Frequently Asked Questions)

Click on the *Help* link on the CPES Home Page (Figure 44) to see responses to questions frequently asked about CPES. This link is also at the top of each page of the CPES Web site.

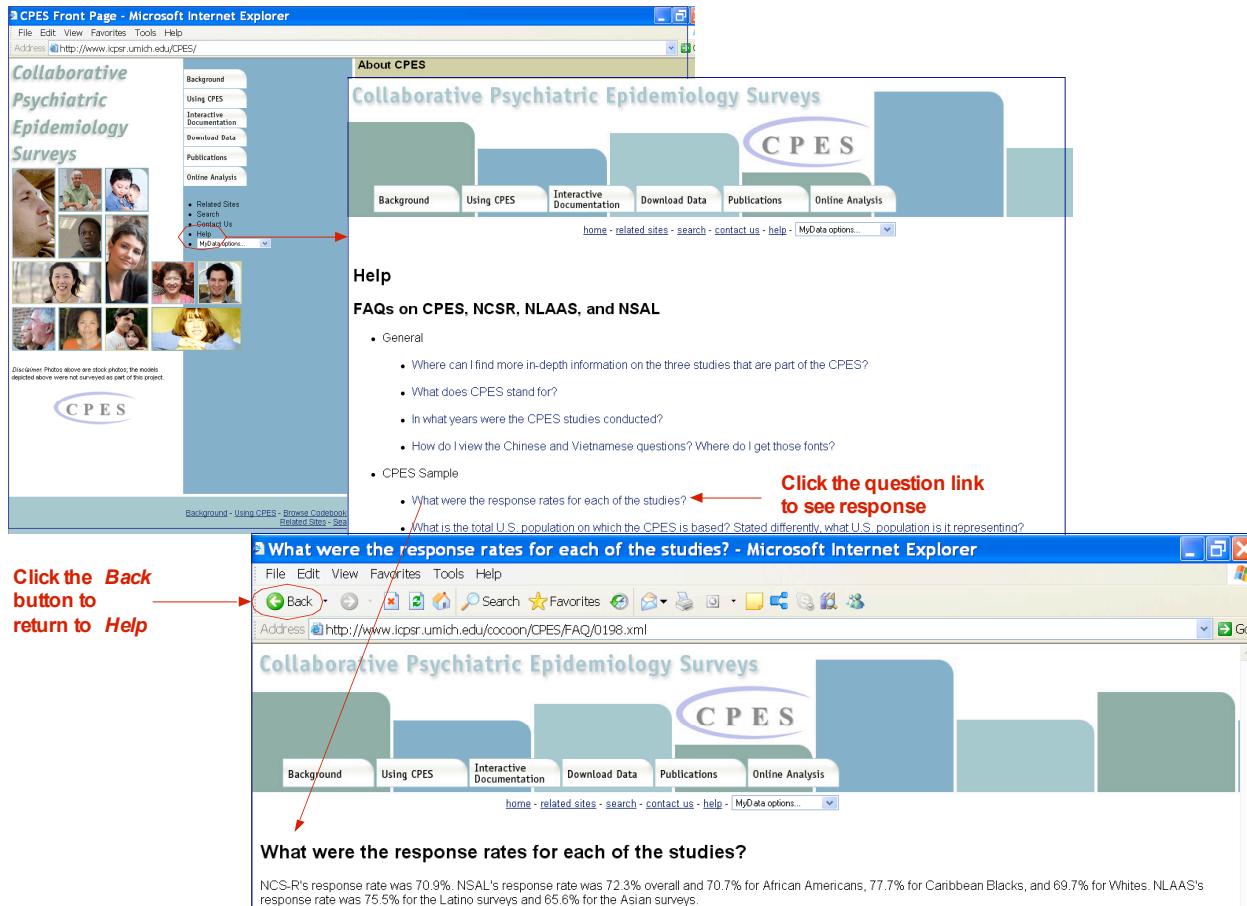


Figure 44. CPES Help (Frequently Asked Questions)

ICPSR “MyData” Account Options

The first time in a CPES Web session that a user tries to access SDA ([View Variable in SDA](#)), [Download Data](#), or do [Online Analysis](#), user authentication is required, that is, a user must enter an email address and password for an ICPSR “MyData” Account or create a new user account (Figure 45). The user must also agree to *Terms of Use* for accessing data (Figure 46) when downloading data and doing online analysis.

The screenshot shows the ICPSR website homepage with a blue header bar. On the left is the ICPSR logo and the text "INTER-UNIVERSITY CONSORTIUM FOR POLITICAL AND SOCIAL RESEARCH". On the right is a dropdown menu labeled "MyData options...". Below the header is a navigation bar with links: Data, Courses & Learning Tools, Our Research, Membership, About ICPSR, Help, and Home. The main content area has a green header "MyData Login". A message below it says: "Access to this data is made possible by University of Michigan's membership in the Inter-university Consortium for Political and Social Research." The left side features a "Returning User" section with fields for Email and Password, and a "Log In" button. The right side features a "New User" section with a "Create Account" button. Below these sections is a link "Forgot your password?". At the bottom of the page is a footer with links to Careers, Contact Us, Privacy Policy, Official Representative Site, and Accessibility. It also includes a copyright notice: "© 2007 Regents of the University of Michigan. ICPSR is part of the Institute for Social Research at the University of Michigan." A "top of page" link is located near the bottom right of the page content.

Figure 45. *MyData Login:*
Required for Viewing Variables in SDA, Downloading Data, and for Online Analysis

The screenshot shows the CPES website homepage with a blue header bar containing the CPES logo and navigation links for Background, Using CPES, Interactive Documentation, Download Data, Publications, and Online Analysis. Below the header is a menu bar with links for home, related sites, search, contact us, help, and MyData options. The main content area is titled "Terms of Use". It contains a large block of text describing data handling guidelines, followed by a list of six bullet points. At the bottom are two buttons: "I Agree" (circled in red) and "I Do Not Agree".

Collaborative Psychiatric Epidemiology Surveys

CPES

Background Using CPES Interactive Documentation Download Data Publications Online Analysis

home · related sites · search · contact us · help · MyData options...

Terms of Use

Please read the terms of use below. If you agree to them, click on the "I Agree" button to proceed to download your data cart. If you do not agree, you can click on the "I Do Not Agree" button to return to the home page.

In preparing data for public release, ICPSR asks that users ensure that the identity of individual respondents is protected. Direct identifiers are omitted or recoded or masked if they can be identified. Any intentional identification of individuals violates the assurances of confidentiality of information. Therefore, users of its special topic archives must:

- * To use these datasets solely for aggregated information, and not for individual organizations, except when it is necessary.
- * To make no use of the identifiers inadvertently, and to advise others of the potential for identification.
- * To produce no links among datasets that could identify individuals.
- * To not redistribute or sell the datasets to other organizations without the written permission of ICPSR, except: a) you serve as a member of the ICPSR member institution and are collaborating with others in analyzing ICPSR data for research purposes; b) you obtained the datasets from ICPSR in these files with the data, including the codebook and documentation.

ICPSR further asks that any books, articles, conference papers, theses, dissertations, reports, or other publications that employ data or other resources provided by ICPSR reference the bibliographic citation provided in the abstract and codebook for each ICPSR data collection. These citations acknowledge the principal investigators, the data producers, and ICPSR as the data distributor, in accord with recommended citation procedures for computer files in the social sciences. Also, authors of publications based on ICPSR data should send citations of their published works to ICPSR for inclusion in a database of related publications.

In addition, the user acknowledges that the original collector of the data, ICPSR, and the relevant funding agency bear no responsibility for use of the data or for interpretations or inferences based upon such uses.

By continuing past this point to the data retrieval process, you signify your agreement to comply with the above-stated requirements and give your assurance that the use of statistical data obtained from ICPSR and/or its Special Topic Archives will conform to widely-accepted standards of practice and legal restrictions that are intended to protect the confidentiality of research subjects.

**Figure 46. Terms of Use Agreement:
Required for Downloading Data and Online Analysis**

Clicking on the *MyData options* dropdown box from the CPES Home Page brings up a list of ICPSR “MyData” account options for managing an ICPSR user account (Figure 47):

- Login/Create Account,
- What is MyData,
- Edit Account Settings,
- Change Password,
- Download Cart,
- Notification Services,
- Validate Account,
- Delete Account, and
- Log Out.

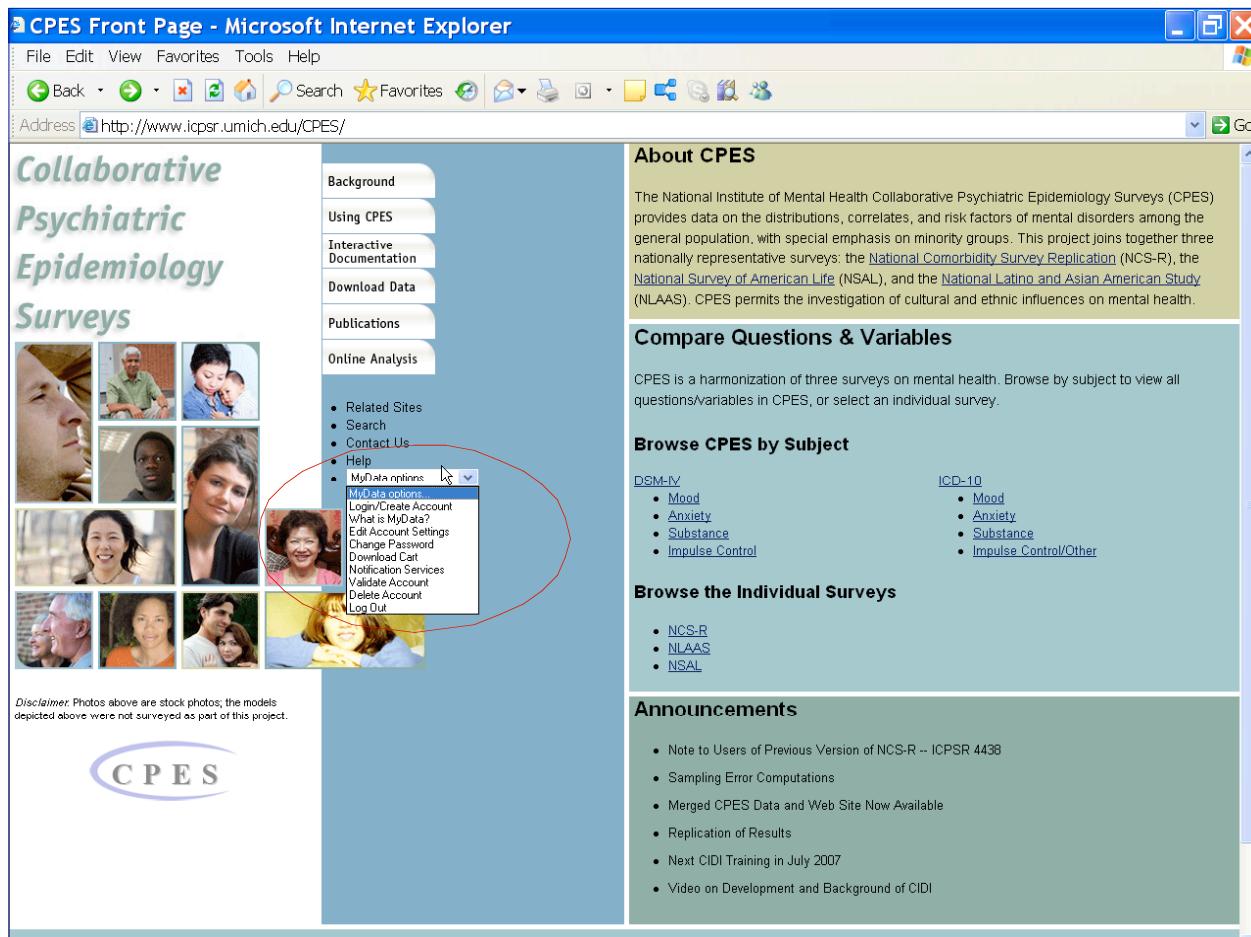


Figure 47. ICPSR “MyData” Account Options

ISCO-88 CODE LIST

LEGISLATORS, SENIOR OFFICIALS AND MANAGERS

1. Legislators and senior officials (*all members of state, regional or local legislatures*)

(Code all members of national, state, regional, or local legislatures, or national, state, regional, or local government policy advisors, implementers, or representatives, or senior officials of special-interest organizations, here. Senior government officials who manage a government-controlled industrial, public utility, transport or other such business enterprise or organization, should be classified as corporate managers or managers, as appropriate)

Examples include:

- Charity organization senior officials
- Employers' organization senior officials
- Environmental protection organization senior officials
- Humanitarian organization senior officials
- Political party leaders
- Special-interest organization senior officials
- Sports association senior officials
- Trade and industry association leaders
- Trade union leaders
- Wild life protection organization senior officials

2. Corporate managers (*organizations having 3+ managers or 11+ employees*)

(Code corporate managers who manage enterprises and organizations having three or more managers, or eleven or more employees, or departments or sections of enterprises and organizations having three or more managers, or eleven or more employees, here.)

Examples include:

- Chief executive officers
- Deans
- Managing directors of companies
- Marketing department managers
- Operations department managers
- Personnel department managers
- Presidents of companies
- Production department managers
- Sales department managers
- Section managers

3. General managers (*organizations having 1-2 managers or less than 11 employees*)

(Code general managers and managers of small enterprises and organizations having only one or two managers, or ten or fewer employees, here.)

Examples include:

- Managers in businesses in which there are not more than one other manager
- Managers in businesses in which there are not more than ten employees
- Small business managers

PROFESSIONALS

4. Physical, mathematical and engineering science professionals (university degree required)

(Code physical, mathematical and engineering science professionals holding positions requiring a college or university degree in the physical, mathematical or engineering sciences, here.)

Examples include:

- Architects
- Chemists
- Computer applications engineers
- Computer programmers
- Computer systems analysts
- Engineering technologists
- Engineers
- General public service administrators
- Mathematicians
- Physicists
- Statisticians

5. Life science and health professionals (university degree required)

(Code life science and health professionals holding positions requiring a college or university degree in the life or medical sciences, here.)

Examples include:

- Agronomists
- Biologists
- Botanists
- Chiropractors
- Dentists
- Medical doctors
- Professional midwives
- Pathologists
- Pharmacists
- Registered nurses
- Veterinarians

6. Teaching professionals (*university degree required*)

(Code teaching professionals holding positions requiring a college or university degree in teaching or one or more other disciplines, here.)

Examples include:

- College and university lecturers
- College and university professors
- College and university readers
- Curricula developers
- Pre-primary education teachers
- Primary education teachers
- Professional remedial teachers
- Secondary education teachers
- School inspectors
- Special education teachers

7. Other professionals (*university degree required*)

(Code other professionals holding positions requiring a college or university degree in their field, here.)

Examples include:

- Accountants
- Artists (actors, ballet dancers, opera singers, commercial artists, etc.)
- Journalists
- Lawyers
- Librarians
- Ministers of religion (with an associates degree or higher)
- Professional social workers (with an associate degree or higher)
- Psychologists
- Public service administrative professionals
- Vocational guidance counselors

TECHNICIANS AND ASSOCIATE PROFESSIONALS

8. Physical and engineering science associate professionals (some formal training required)

(Code physical and engineering science associate professionals who do not have a college or university degree in their field, but have completed a course of formal training, here.)

Examples include:

- Aircraft pilots
- Air traffic controllers
- Building inspectors
- Computer assistants
- Computer equipment operators
- Engineering technicians
- Medical equipment operators
- Photographers
- Physical science technicians
- Quality inspectors

9. Life science and health associate professionals (some formal training required)

(Code life science and health associate professionals who do not have a college or university degree in their field but have completed a course of formal training, here.)

Examples include:

- Associate midwives
- Dieticians
- Faith healers
- Farming advisers
- Herbal healers
- Life science technicians
- Massage Therapists
- Medical assistants
- Optometrists
- Practical nurses
- Sanitary inspectors

10. Teaching associate professionals (some formal training required)

(Code teaching associate professionals who do not have a college or university degree in their field but have completed a course of formal training, here.)

Examples include:

- Driving instructors
- Flying instructors
- Pre-primary education teaching assistants
- Primary education teaching assistants
- Professional nursery teaching assistants
- Professional remedial teaching assistants
- Professional special education teaching assistants
- Teachers of the visually impaired
- Teachers of the mentally handicapped
- Teachers of the hearing impaired

11. Other associate professionals (some formal training required)

(Code other associate professionals who do not have a college or university degree in their field but have completed a course of formal training.)

Examples include:

- Administrative secretaries
- Bookkeepers (bookkeeping clerks are 12)
- Employment agents
- Entertainers (who perform on the streets, in night-clubs, at circuses, in bands, etc.)
- Insurance agents
- Police detectives
- Real estate agents
- Religious workers
- Social workers (with less than an associate degree)
- Stock brokers

CLERKS

12. Office clerks (no direct contact with clients)

(Code office clerks who do not have direct contact with clients here.)

Examples include:

- Bookkeeping clerks (bookkeepers are 11)
- Filing clerks
- Mail carriers
- Mail clerks
- Materials clerks
- Personnel clerks
- Secretaries
- Stock clerks
- Tax clerks
- Typists

13. Customer service clerks (direct contact with clients)

(Code customer service clerks who have direct contact with clients, including contact with clients over the telephone, here.)

Examples include:

- Bank tellers
- Bookmakers
- Cashiers
- Counter clerks
- Debt collectors
- Pawnbrokers
- Post office counter clerks
- Receptionists
- Telephone switchboard-operators
- Ticket clerks

SERVICE WORKERS / SHOP & MARKET SALES WORKERS

14. Personal and protective service workers (*provide personal services*)

(Code personal service workers who provide various personal services in connection with travelling, housekeeping, child-care, and other services, here. Also code protective service workers who protect individuals and property, and maintain law and order, here.)

Examples include:

- Child-care workers
- Cooks
- Fire-fighters
- Flight attendants
- Hairdressers
- Housekeepers
- Nursing aids
- Police officers
- Security guards
- Train conductors

15. Models, salespersons, and demonstrators (*pose, display, demonstrate or sell goods*)

(Code models, salespersons, and demonstrators who pose, display, demonstrate, or sell goods in the retail, wholesale, advertising, or fashion industries, here.)

Examples include:

- Advertising models
- Artist's models
- Demonstrators
- Fashion models
- Market salespersons
- Retail salespersons
- Fruit stand salespersons
- Vegetable-stand salespersons
- Wholesale salespersons

SKILLED AGRICULTURAL AND FISHERY WORKERS

16. Market-oriented skilled agricultural and fishery workers (*perform complex, non-routine tasks*)

(Code market-oriented skilled agricultural and fishery workers, who are not mainly managers or machinery operators, but do perform complex, and non-routine tasks, here.)

Examples include:

- Beekeepers
- Dog breeders
- Farmers
- Fishery workers
- Hunters
- Loggers
- Skilled farm workers
- Skilled forestry workers
- Trappers

17. Subsistence agricultural and fishery workers (*for personal, not commercial use*)

(Code subsistence agricultural and fishery workers, who are not managers, machinery operators, or market oriented, but do provide food, shelter and a minimum of cash income for themselves and their households, here. it should be noted that the necessary skills an understanding of the natural environment and the crops and animals worked with, as well as manual strength and dexterity are usually acquired by working from childhood with other members of the household to produce the necessities for subsisting.)

Examples include:

- Subsistence farmers
- Subsistence farm workers
- Subsistence fishers
- Subsistence fishery workers
- Subsistence hunters
- Subsistence hunting workers
- Subsistence wild plant gatherers
- Subsistence herders
- Subsistence aquatic life gatherers
- Subsistence trappers

CRAFT AND RELATED TRADES WORKERS – occupations which are craft oriented consist of skilled jobs directly involved in the production of goods where the tasks and duties require an understanding of and experience with natural resources and raw materials used and how to achieve the desired techniques and practices, but they may also use more technologically advanced tools and machines.

18. Extraction and building trades workers (*mining, quarrying, and construction industries*)

(Code extraction and building trades workers, in the mining, quarrying, and construction industries, here.)

Examples include:

- Bricklayers
- Building exterior cleaners
- Carpenters
- Cement finishers
- Electricians
- Miners
- Painters
- Plumbers
- Roofers
- Stone cutters

19. Metal, machinery and related trades workers (*manufacturing, repair, communications, public utilities*)

(Code metal, machinery, and related trades workers, in the manufacturing, repair, communications, and public utilities industries, here.)

Examples include:

- Blacksmiths
- Electrical fitters
- Electric power line workers
- Mechanics
- Metal-smiths
- Sheet-metal workers
- Structural metalworkers
- Telephone installers
- Toolmakers
- Welders

20. Precision, handicraft, printing and related trades workers (*skilled handicraft, printing*)

(Code precision handicraft, printing, and related trades workers, in the manufacturing, and repair industries, here.)

Examples include:

- Film developers
- Glass blowers
- Handicraft workers
- Jewelers
- Musical instrument makers
- Potters
- Printers
- Silk-screen printers
- Sign-writers
- Typesetters

21. Other craft and related trades workers (*skilled craftsman*)

(Code other craft and related trades workers in manufacturing, retail, and personal services, here.)

Examples include:

- Bakers
- Basket makers
- Butchers
- Cabinet-makers
- Cigarette makers
- Dressmakers
- Food graders
- Shoe-makers
- Tobacco graders
- Wood treaters

PLANT AND MACHINE OPERATORS AND ASSEMBLERS

22. Stationary plant and related operators (make materials from which parts are made)

(Code stationary plant and related operators in manufacturing, mining, public utilities, and sanitary services, here. Stationary plant and related operators operate and monitor industrial plants, automated assembly lines, and industrial robots.)

Examples include:

- Chemical machine operators (mixing, heat-treating, filtering, distilling, etc.)
- Furnace operators
- Glass-blowing machine operators
- Kiln-operators
- Mining machine operators
- Plant operators
- Power plant operators
- Water purification plant operators
- Well-drilling equipment operators
- Wood-processing plant operators

23. Machine operators and assemblers (make finished products)

(Code machine operators and assemblers, who primarily operate and monitor industrial machinery, or assemble products to strict specifications and procedures, here.)

Examples include:

- Assemblers (machinery, equipment, supplies, and other products)
- Chemical production machine operators (coating, finishing, plating, developing, etc.)
- Food canning machine operators
- Machine tool operators
- Plastic products machine operators
- Printing-press operators
- Sewing-machine operators
- Textile machine operators
- Woodworking machine operators

24. Drivers and mobile plant operators (mobile implies operating a machine in a plant)

(Code drivers and mobile plant operators who tend or drive trains, motor vehicles, industrial and agricultural machinery and equipment, and ships and other water-craft, here.)

Examples include:

- Bulldozer operators
- Bus drivers
- Crane operators
- Fork-lift operators
- Locomotive engineers
- Motorized farm equipment operators
- Railroad brakers
- Sailors
- Taxi drivers
- Truck drivers

ELEMENTARY OCCUPATIONS – jobs that only require low or elementary skills and little or no judgment.

25. Sales and services elementary occupations (*perform routine, unskilled services*)

(Code elementary sales and services workers, who sell goods or services door-to-door, on the street, or over the telephone, or clean private households, business establishments, transportation equipment, or laundry by hand, or perform other routine, unskilled services, here.)

Examples include:

- Domestic cleaners
- Door-to-door salespersons
- Garbage collectors
- Hand dishwashers
- Janitors
- Newspaper deliverers
- Odd-jobs persons
- Shoe-shiners
- Telephone salespersons
- Window washers

26. Agricultural, fishery and related laborers (*perform routine tasks using hand-held tools*)

(Code agricultural, fishery and related laborers, who perform simple routine tasks using hand-held tools, such as digging, shoveling, raking, fertilizing, etc., here.)

Examples include:

- Aquatic laborers
- Brush cutters
- Choppers
- Farm laborers
- Fish hatchery worker
- Fruit pickers
- Greenhouse laborers
- Hatchery laborers
- Migratory workers
- Tree tapping laborers

27. Laborers in mining, construction, manufacturing and transport (perform routine tasks)

(Code laborers in the mining, construction, manufacturing, and transportation industries, who perform simple, routine tasks, using simple, hand-held tools, such as lifting, moving, carrying, clearing, etc., here.)

Examples include:

- Animal-drawn vehicle drivers
- Bottle sorters
- Construction laborers
- Factory laborers
- Freight handlers
- Hand packers
- Mining laborers
- Order pullers
- Rickshaw drivers
- Simple-assembly workers (nuts and bolts, supermarket warehouse, etc.)

ARMED FORCES

28. Armed forces

(Code all active members of the army, navy, air force, marines, coast guard, and national guard, commissioned, non-commissioned, and warrant officers, and all enlisted personnel, here. Do not code civilian employees working for the military or members of the national guard not on active duty, here.)

OTHER

29. Other (specify)



Collaborative Psychiatric Epidemiology Surveys

NCS-R



Collaborative Psychiatric Epidemiology Surveys

NCS-R Part I and II Samples

July 20, 2010

Why NCS-R had Part I and Part II?

NCS-R had two parts (Part I and Part II), resulting in NCS-R respondents being asked different sets of demographic questions. Part I of the NCS-R includes the first 14 sections: (1) Household Listing, (2) Screening, (3) Depression, (4) Mania, (5) Irritable Depression, (6) Panic Disorder, (7) Specific Phobia, (8) Social Phobia, (9) Agoraphobia, (10) Generalized Anxiety Disorder, (11) Intermittent Explosive Disorder, (12) Suicidality, (13) Services, and (14) Pharmacoepidemiology. At the end of the Pharmacoepidemiology section, a series of assignments to Part II of the survey were made. Part II was further subdivided into long, intermediate, and short forms of the questionnaire.

Intermediate- and long-form respondents were asked the same key demographic questions as they appeared in other Part II sections. Short-form respondents were asked key demographic questions in the Demographics section. Please see Table 1 and Figure 1 about NCS-R adult long, intermediate, and short logic and sections. All 9,282 respondents were asked the Part I questions, while a subsample of 5,692 respondents completed Part II.

How NCS-R selected Part II subsample?

Part II was administered to Part I respondents with a lifetime disorder, as well as to a probability subsample of other respondents. All sections after Pharmacoepidemiology are considered Part II sections. Part II was further subdivided into long, intermediate, and short forms of the questionnaire and Figure 1 shows the logic of the selection different respondent groups and forms of the questionnaire.

Long Group:

- Met screening criteria in the Pharmacoepidemiology interviewer checkpoints PH100 (see the Pharmacoepidemiology instrument section at <http://www.hcp.med.harvard.edu/ncs/replication.php>)
- Did not meet selection criteria in PH100, but were randomly selected for Part II by interviewer checkpoints PH101-113. The probability of a respondent's selection increased with an increase in the number of adults in the respondent's household.

Intermediate Group:

- Those respondents who were not in the long group but were part of the couples sample were in the intermediate group.

Short Group:

- Those respondents who were not in the long or intermediate group, were in the short group.

Table 1: NCS-R Adult Long, Intermediate, and Short Logic and Sections

Note: @=everyone was asked; #=proportional skip; &=screened into section.

Sections		Core	Short	Intermediate	Long
HHL	Household Listing	@	@	@	@
SC	Screening	@	@	@	@
D	Depression	&	&	&	&
M	Mania	&	&	&	&
IR	Irritable Depression	&	&	&	&
PD	Panic Disorder	&	&	&	&
SP	Specific Phobia	&	&	&	&
SO	Social Phobia	&	&	&	&
AG	Agoraphobia	&	&	&	&
GAD	Generalized Anxiety Disorder	&	&	&	&
IED	Intermittent Explosive Disorder	&	&	&	&
SD	Suicidality	@	@	@	@
SR	Services	@	@	@	@
PH	Pharmacoepidemiology	@	@	@	@
DM	Demographics		@		
WU	Worries and Unhappiness		#	#	#
FB	Family Burden		#	#	#
PP	Perceptions of the Past		#	#	#
PEA	Personality			@	@
SU	Substance Use				@
PT	Post Traumatic Stress Disorder				@
CC	Chronic Conditions				@
N	Neurasthenia				@
FD	30 Day Functioning				@
NSD	30 Day Symptoms			@	@
TB	Tobacco				@
EA	Eating Disorders				#
PMS	Premenstrual Syndrome				@
OCD	Obsessive Compulsive Disorder				#
PS	Psychosis				#
GM	Gambling				#
EM	Employment			@	@
FN	Finances			@	@
MR	Marriage			@	@
CN	Children			@	@
SN	Social Networks			@	@
DA	Adult Demographics			@	@
DE	Childhood Demographics			@	@
CH	Childhood			@	@
AD	Attention Deficit Hyperactivity Disorder				&
OD	Oppositional Deficit Disorder				&
CD	Conduct Disorder				@
SA	Separation Anxiety				&

NCS-R Part I and Part II Samples

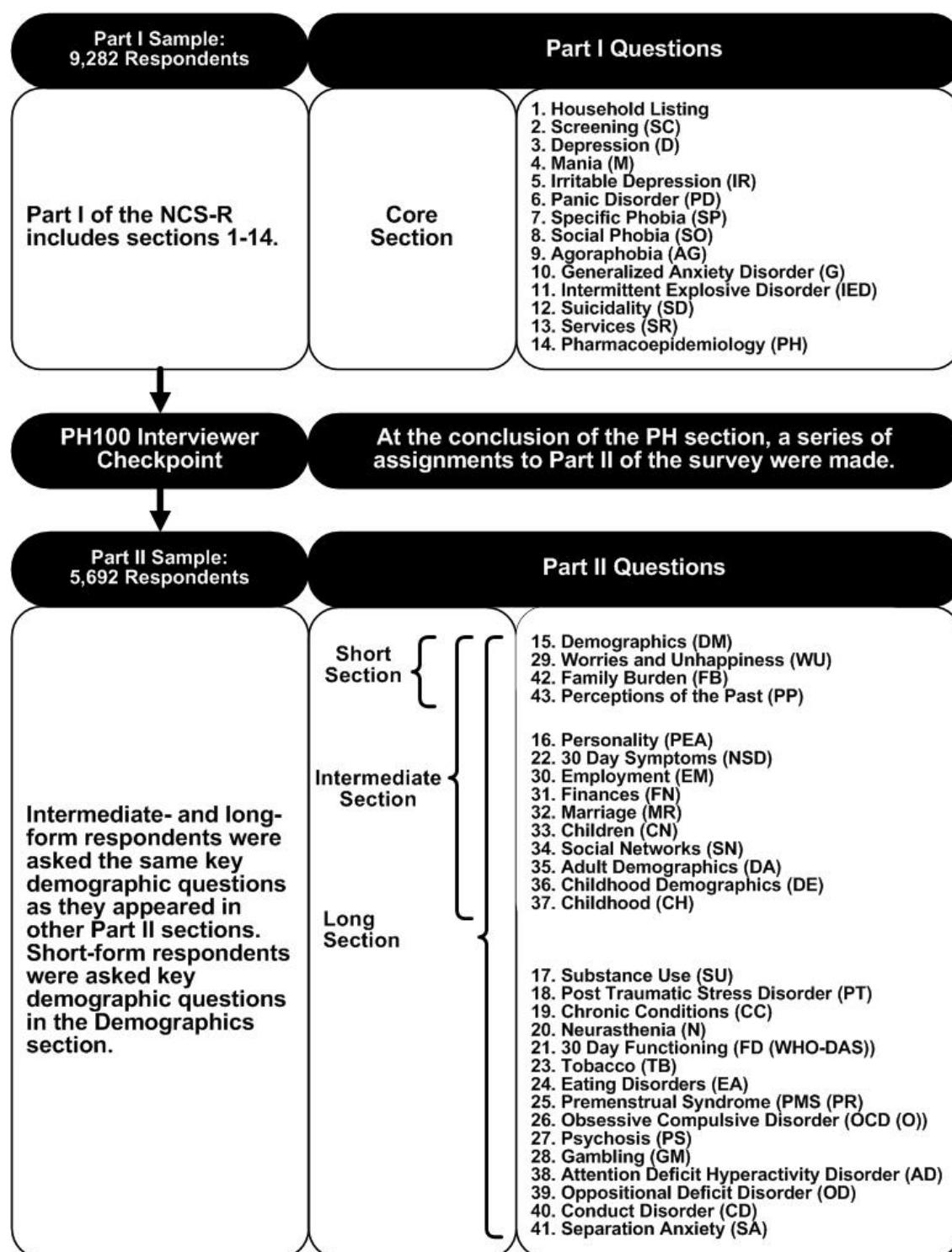


Figure 1: NCS-R Adult Long, Intermediate, and Short Logic and Sections

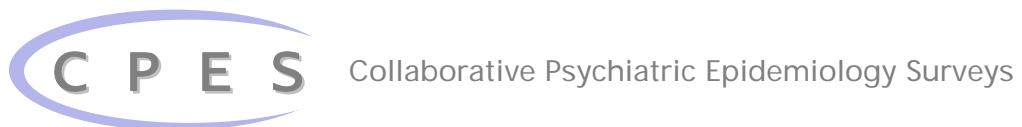
NCS-R Part II Long, Intermediate and Short Logic and Sections



Figure 2: NCS-R interviewer checkpoint and long, intermediate, and short Logic and sections

How NCS-R weighted Part I and Part II samples?

In order to get the correct total for each of these demographic variables, data for long-, intermediate-, and short-form variables were combined into one constructed variable that could then be linked to the same demographic variables in NLAAS and NSAL. Note that the NCS-R Part II weight (NCSRWTLG) should be applied when looking at NCS-R combined-variable demographics separate from data from the other studies. The original source variables have been retained in the dataset as well, should an analyst want to use those versions of the variables. To refer to lists the NCS-R source and combined demographic variables and the NLAAS and NSAL variables to which they have been linked in the CPES dataset, please see [Harmonization of Demographics Section of Data Processing Note](#).



NCS-R Occupation ISCO-88 Code List

July 13, 2010

A. Legislators, senior officials and managers

1. Legislators and senior officials (all members of state, regional or local legislatures)

(Code all members of national, state, regional, or local legislatures, or national, state, regional, or local government policy advisors, implementers, or representatives, or senior officials of special-interest organizations, here. Senior government officials who manage a government-controlled industrial, public utility, transport or other such business enterprise or organization, should be classified as corporate managers or managers, as appropriate)

Examples include:

- 1.1 Charity organization senior officials
- 1.2 Employers' organization senior officials
- 1.3 Environmental protection organization senior officials
- 1.4 Humanitarian organization senior officials
- 1.5 Political party leaders
- 1.6 Special-interest organization senior officials
- 1.7 Sports association senior officials
- 1.8 Trade and industry association leaders
- 1.9 Trade union leaders
- 1.10 Wild life protection organization senior officials

2. Corporate managers (organizations having 3+ managers or 11+ employees)

(Code corporate managers who manage enterprises and organizations having three or more managers, or eleven or more employees, or departments or sections of enterprises and organizations having three or more managers, or eleven or more employees, here.)

Examples include:

- 2.1 Chief executive officers
- 2.2 Deans
- 2.3 Managing directors of companies
- 2.4 Marketing department managers
- 2.5 Operations department managers
- 2.6 Personnel department managers
- 2.7 Presidents of companies
- 2.8 Production department managers
- 2.9 Sales department managers
- 2.10 Section managers

3. General managers (organizations having 1-2 managers or less than 11 employees)

(Code general managers and managers of small enterprises and organizations having only one or two managers, or ten or fewer employees, here.)

Examples include:

- 3.1 Managers in businesses in which there are not more than one other manager
- 3.2 Managers in businesses in which there are not more than ten employees
- 3.3 Small business managers

B. Professionals

4. Physical, mathematical and engineering science professionals (university degree required)

(Code physical, mathematical and engineering science professionals holding positions requiring a college or university degree in the physical, mathematical or engineering sciences, here.)

Examples include:

- 4.1 Architects
- 4.2 Chemists
- 4.3 Computer applications engineers
- 4.4 Computer programmers
- 4.5 Computer systems analysts
- 4.6 Engineering technologists
- 4.7 Engineers
- 4.8 General public service administrators
- 4.9 Mathematicians
- 4.10 Physicists
- 4.11 Statisticians

5. Life science and health professionals (university degree required)

(Code life science and health professionals holding positions requiring a college or university degree in the life or medical sciences, here.)

Examples include:

- 5.1 Agronomists
- 5.2 Biologists
- 5.3 Botanists
- 5.4 Chiropractors
- 5.5 Dentists
- 5.6 Medical doctors
- 5.7 Professional midwives
- 5.8 Pathologists
- 5.9 Pharmacists
- 5.10 Registered nurses
- 5.11 Veterinarians

6. Teaching professionals (university degree required)

(Code teaching professionals holding positions requiring a college or university degree in teaching or one or more other disciplines, here.)

Examples include:

- 6.1 College and university lecturers
- 6.2 College and university professors
- 6.3 College and university readers
- 6.4 Curricula developers
- 6.5 Pre-primary education teachers
- 6.6 Primary education teachers
- 6.7 Professional remedial teachers
- 6.8 Secondary education teachers
- 6.9 School inspectors
- 6.10 Special education teachers

7. Other professionals (university degree required)

(Code other professionals holding positions requiring a college or university degree in their field, here.)

Examples include:

- 7.1 Accountants
- 7.2 Artists (actors, ballet dancers, opera singers, commercial artists, etc.)
- 7.3 Journalists
- 7.4 Lawyers
- 7.5 Librarians
- 7.6 Ministers of religion (with an associates degree or higher)
- 7.7 Professional social workers (with an associate degree or higher)
- 7.8 Psychologists
- 7.9 Public service administrative professionals
- 7.10 Vocational guidance counselors

C. Technicians and associate professionals

8. Physical and engineering science associate professionals (some formal training required)

(Code physical and engineering science associate professionals who do not have a college or university degree in their field, but have completed a course of formal training, here.)

Examples include:

- 8.1 Aircraft pilots
- 8.2 Air traffic controllers
- 8.3 Building inspectors
- 8.4 Computer assistants
- 8.5 Computer equipment operators
- 8.6 Engineering technicians
- 8.7 Medical equipment operators
- 8.8 Photographers
- 8.9 Physical science technicians
- 8.10 Quality inspectors

9. Life science and health associate professionals (some formal training required)

(Code life science and health associate professionals who do not have a college or university degree in their field but have completed a course of formal training, here.)

Examples include:

- 9.1 Associate midwives
- 9.2 Dieticians
- 9.3 Faith healers
- 9.4 Farming advisers
- 9.5 Herbal healers
- 9.6 Life science technicians
- 9.7 Massage Therapists
- 9.8 Medical assistants
- 9.9 Optometrists
- 9.10 Practical nurses
- 9.11 Sanitary inspectors

10. Teaching associate professionals (some formal training required)

(Code teaching associate professionals who do not have a college or university degree in their field but have completed a course of formal training, here.)

Examples include:

- 10.1 Driving instructors
- 10.2 Flying instructors
- 10.3 Pre-primary education teaching assistants
- 10.4 Primary education teaching assistants
- 10.5 Professional nursery teaching assistants
- 10.6 Professional remedial teaching assistants
- 10.7 Professional special education teaching assistants
- 10.8 Teachers of the visually impaired
- 10.9 Teachers of the mentally handicapped
- 10.10 Teachers of the hearing impaired

11. Other associate professionals (some formal training required)

(Code other associate professionals who do not have a college or university degree in their field but have completed a course of formal training.)

Examples include:

- 11.1 Administrative secretaries
- 11.2 Bookkeepers (bookkeeping clerks are 12)
- 11.3 Employment agents
- 11.4 Entertainers (who perform on the streets, in night-clubs, at circuses, in bands,
etc.)
- 11.5 Insurance agents
- 11.6 Police detectives
- 11.7 Real estate agents
- 11.8 Religious workers
- 11.9 Social workers (with less than an associate degree)
- 11.10 Stock brokers

D. Clerks

12. Office clerks (no direct contact with clients)

(Code office clerks who do not have direct contact with clients here.)

Examples include:

- 12.1 Bookkeeping clerks (bookkeepers are 11)
- 12.2 Filing clerks
- 12.3 Mail carriers
- 12.4 Mail clerks
- 12.5 Materials clerks
- 12.6 Personnel clerks
- 12.7 Secretaries
- 12.8 Stock clerks
- 12.9 Tax clerks
- 12.10 Typists

13. Customer service clerks (direct contact with clients)

(Code customer service clerks who have direct contact with clients, including contact with clients over the telephone, here.)

Examples include:

- 13.1 Bank tellers
- 13.2 Bookmakers
- 13.3 Cashiers
- 13.4 Counter clerks
- 13.5 Debt collectors
- 13.6 Pawnbrokers
- 13.7 Post office counter clerks
- 13.8 Receptionists
- 13.9 Telephone switchboard-operators
- 13.10 Ticket clerks

E. Service workers / shop & market sales workers

14. Personal and protective service workers (*provide personal services*)

(Code personal service workers who provide various personal services in connection with travelling, housekeeping, child-care, and other services, here. Also code protective service workers who protect individuals and property, and maintain law and order, here.)

Examples include:

- 14.1 Child-care workers
- 14.2 Cooks
- 14.3 Fire-fighters
- 14.4 Flight attendants
- 14.5 Hairdressers
- 14.6 Housekeepers
- 14.7 Nursing aids
- 14.8 Police officers
- 14.9 Security guards
- 14.10 Train conductors

15. Models, salespersons, and demonstrators (*pose, display, demonstrate or sell goods*)

(Code models, salespersons, and demonstrators who pose, display, demonstrate, or sell goods in the retail, wholesale, advertising, or fashion industries, here.)

Examples include:

- 15.1 Advertising models
- 15.2 Artist's models
- 15.3 Demonstrators
- 15.4 Fashion models
- 15.5 Market salespersons
- 15.6 Retail salespersons
- 15.7 Fruit stand salespersons
- 15.8 Vegetable-stand salespersons
- 15.9 Wholesale salespersons

F. Skilled agricultural and fishery workers

16. Market-oriented skilled agricultural and fishery workers (*perform complex, non-routine tasks*)

(Code market-oriented skilled agricultural and fishery workers, who are not mainly managers or machinery operators, but do perform complex, and non-routine tasks, here.)

Examples include:

- 16.1 Beekeepers
- 16.2 Dog breeders
- 16.3 Farmers
- 16.4 Fishery workers
- 16.5 Hunters
- 16.6 Loggers
- 16.7 Skilled farm workers
- 16.8 Skilled forestry workers
- 16.9 Trappers

17. Subsistence agricultural and fishery workers (*for personal, not commercial use*)

(Code subsistence agricultural and fishery workers, who are not managers, machinery operators, or market oriented, but do provide food, shelter and a minimum of cash income for themselves and their households, here. it should be noted that the necessary skills an understanding of the natural environment and the crops and animals worked with, as well as manual strength and dexterity are usually acquired by working from childhood with other members of the household to produce the necessities for subsisting.)

Examples include:

- 17.1 Subsistence farmers
- 17.2 Subsistence farm workers
- 17.3 Subsistence fishers
- 17.4 Subsistence fishery workers
- 17.5 Subsistence hunters
- 17.5 Subsistence hunting workers
- 17.7 Subsistence wild plant gatherers
- 17.8 Subsistence herders
- 17.9 Subsistence aquatic life gatherers
- 17.10 Subsistence trappers

G. Craft and related trades workers – occupations which are craft oriented consist of skilled jobs directly involved in the production of goods where the tasks and duties require an understanding of and experience with natural resources and raw materials used and how to achieve the desired techniques and practices, but they may also use more technologically advanced tools and machines.

18. Extraction and building trades workers (*mining, quarrying, and construction industries*)

(Code extraction and building trades workers, in the mining, quarrying, and construction industries, here.)

Examples include:

- 18.1 Bricklayers
- 18.2 Building exterior cleaners
- 18.3 Carpenters
- 18.4 Cement finishers
- 18.5 Electricians
- 18.6 Miners
- 18.7 Painters
- 18.8 Plumbers
- 18.9 Roofers
- 18.10 Stone cutters

19. Metal, machinery and related trades workers (*manufacturing, repair, communications, public utilities*)

(Code metal, machinery, and related trades workers, in the manufacturing, repair, communications, and public utilities industries, here.)

Examples include:

- 19.1 Blacksmiths
- 19.2 Electrical fitters
- 19.3 Electric power line workers
- 19.4 Mechanics
- 19.5 Metal-smiths
- 19.6 Sheet-metal workers
- 19.7 Structural metalworkers
- 19.8 Telephone installers
- 19.9 Toolmakers
- 19.10 Welders

20. Precision, handicraft, printing and related trades workers (skilled handicraft, printing)

(Code precision handicraft, printing, and related trades workers, in the manufacturing, and repair industries, here.)

Examples include:

- 20.1 Film developers
- 20.2 Glass blowers
- 20.3 Handicraft workers
- 20.4 Jewelers
- 20.5 Musical instrument makers
- 20.6 Potters
- 20.7 Printers
- 20.8 Silk-screen printers
- 20.9 Sign-writers
- 20.10 Typesetters

21. Other craft and related trades workers (skilled craftsman)

(Code other craft and related trades workers in manufacturing, retail, and personal services, here.)

Examples include:

- 21.1 Bakers
- 21.2 Basket makers
- 21.3 Butchers
- 21.4 Cabinet-makers
- 21.5 Cigarette makers
- 21.6 Dressmakers
- 21.7 Food graders
- 21.8 Shoe-makers
- 21.9 Tobacco graders
- 21.10 Wood treaters

H. Plant and machine operators and assemblers

22. Stationary plant and related operators (*make materials from which parts are made*)

(Code stationary plant and related operators in manufacturing, mining, public utilities, and sanitary services, here. Stationary plant and related operators operate and monitor industrial plants, automated assembly lines, and industrial robots.)

Examples include:

- 22.1 Chemical machine operators (mixing, heat-treating, filtering, distilling, etc.)
- 22.2 Furnace operators
- 22.3 Glass-blowing machine operators
- 22.4 Kiln-operators
- 22.5 Mining machine operators
- 22.6 Plant operators
- 22.7 Power plant operators
- 22.8 Water purification plant operators
- 22.9 Well-drilling equipment operators
- 22.10 Wood-processing plant operators

23. Machine operators and assemblers (*make finished products*)

(Code machine operators and assemblers, who primarily operate and monitor industrial machinery, or assemble products to strict specifications and procedures, here.)

Examples include:

- 23.1 Assemblers (machinery, equipment, supplies, and other products)
- 23.2 Chemical production machine operators (coating, finishing, plating, developing,
etc.)
- 23.3 Food canning machine operators
- 23.4 Machine tool operators
- 23.5 Plastic products machine operators
- 23.6 Printing-press operators
- 23.7 Sewing-machine operators
- 23.8 Textile machine operators
- 23.9 Woodworking machine operators

24. Drivers and mobile plant operators (*mobile implies operating a machine in a plant*)

(Code drivers and mobile plant operators who tend or drive trains, motor vehicles, industrial and agricultural machinery and equipment, and ships and other water-craft, here.)

Examples include:

- 24.1 Bulldozer operators
- 24.2 Bus drivers
- 24.3 Crane operators
- 24.4 Fork-lift operators
- 24.5 Locomotive engineers
- 24.6 Motorized farm equipment operators
- 24.7 Railroad brakers
- 24.8 Sailors
- 24.9 Taxi drivers
- 24.10 Truck drivers

I. Elementary occupations – jobs that only require low or elementary skills and little or no judgment.

25. Sales and services elementary occupations (perform routine, unskilled services)

(Code elementary sales and services workers, who sell goods or services door-to-door, on the street, or over the telephone, or clean private households, business establishments, transportation equipment, or laundry by hand, or perform other routine, unskilled services, here.)

Examples include:

- 25.1 Domestic cleaners
- 25.2 Door-to-door salespersons
- 25.3 Garbage collectors
- 25.4 Hand dishwashers
- 24.5 Janitors
- 24.6 Newspaper deliverers
- 24.7 Odd-jobs persons
- 24.8 Shoe-shiners
- 24.9 Telephone salespersons
- 24.10 Window washers

26. Agricultural, fishery and related laborers (perform routine tasks using hand-held tools)

(Code agricultural, fishery and related laborers, who perform simple routine tasks using hand-held tools, such as digging, shoveling, raking, fertilizing, etc., here.)

Examples include:

- 26.1 Aquatic laborers
- 26.2 Brush cutters
- 26.3 Choppers
- 26.4 Farm laborers
- 26.5 Fish hatchery worker
- 26.6 Fruit pickers
- 26.7 Greenhouse laborers
- 26.8 Hatchery laborers
- 26.9 Migratory workers
- 26.10 Tree tapping laborers

27. Laborers in mining, construction, manufacturing and transport (perform routine tasks)

(Code laborers in the mining, construction, manufacturing, and transportation industries, who perform simple, routine tasks, using simple, hand-held tools, such as lifting, moving, carrying, clearing, etc., here.)

Examples include:

- 27.1 Animal-drawn vehicle drivers
- 27.2 Bottle sorters
- 27.3 Construction laborers
- 27.4 Factory laborers
- 27.5 Freight handlers
- 26.6 Hand packers
- 27.7 Mining laborers
- 27.8 Order pullers
- 29.9 Rickshaw drivers
- 29.10 Simple-assembly workers (nuts and bolts, supermarket warehouse, etc.)

J. Armed forces

28. Armed forces

(Code all active members of the army, navy, air force, marines, coast guard, and national guard, commissioned, non-commissioned, and warrant officers, and all enlisted personnel, here. Do not code civilian employees working for the military or members of the national guard not on active duty, here.)

K. OTHER

29. Other (specify)

97. Never worked



Collaborative Psychiatric Epidemiology Surveys

NCS-R Income Imputation Memo

Minnie Ames

January 23, 2004

A. Overview

- Long form respondents are asked their household's income in 6 categories. Missing responses in each category are:

Table 1: Mean of non-missing and imputed household's income by income category

Income Category	Missing responses	Mean non-missing	Mean after imputation
Own earned income(FN2INTR1, FN2INTR2)	431	\$24,638	\$25,049
Spouse's earned income (FN5)	418	\$15,624	\$16,938
Earned income of others in the household (FN7)	696	\$10,644	\$10,490
Social Security income (DM14_3, FN9)	467	\$4,576	\$4,772
Government assistance(DM14_4, FN10)	380	\$837	\$840
Other income (investments, alimony, etc.) (DM14_5, FN11)	538	\$6,625	\$6,671
Total missing at least one	1,129		
Total missing all	141		
Mean household income (pre-trim)		\$62,944	\$64,761
Mean household income (post-trim)			\$61,934

- After imputation mean household income is higher in NCS-R than the 2001 Census. In comparison to the Census it looks similar to income in NCS:

Table 2: Comparison of NCS imputed household's income and Census data

	Mean	Median
NCS-R	\$61,934	\$47,000
2001 Census	\$58,208	\$42,228
NCS-R/Census	1.064	1.113
NCS-R income/poverty threshold	4.55	3.51
NCS-R % in poverty	12.8%	
2001 Census % in poverty	11.7%	
NCS	\$40,541	\$42,500
1991 Census, \$1991	\$37,922	\$30,126
1991 Census, \$2001	\$48,064	\$38,183
NCS/ Census, \$1991	1.069	1.411
NCS income/poverty threshold	3.578	3.181
NCS % in poverty	12.3%	
1989 Census % in poverty	13.1%	

B. Imputation Process

STEP 1: IMPUTE MISSING DATA FROM SPOUSE'S REPORT WHERE AVAILABLE (AND MAKE SURE BOTH SPOUSES AGREE ON ALL INCOME CATEGORIES)

- In 394 (of 5,692 in part 2) cases both respondent and spouse/partner are interviewed. (788 interviewees have a spouse who was also interviewed)
- In the case of respondent and spouse earnings (fnintr1, fnintr2, fn3, fn5, fn6)
 - In 260 cases the income the respondent reports for himself/herself agrees with what their spouse reports for them → keep self-reported income and corresponding tax treatment
 - In 99 cases one of the two income figures is missing → take available entry and corresponding tax treatment
 - In 310 cases the two figures disagree → keep self-reported income and tax treatment (unless self-reported income is 0 and spouse's is >0 then take spouse's report (16 cases))
 - In 19 cases both income figures are missing → leave as missing
- In the case of other household members' earnings (fn7, fn8)
 - In 231 cases respondent and spouse agree → no change
 - In 2 cases the amounts agree, but taxation treatment disagrees → assume before taxes
 - In 108 cases either respondent or spouse do not give amount (either missing or zero) and the other does → take amount given with tax treatment
 - In 39 cases respondent and spouse give amounts but they disagree
 - If tax treatment agrees → take average and tax treatment
 - If tax treatment disagrees → take amount from whomever gave before tax amount
 - In 16 cases neither respondent nor spouse give amount → leave as missing
- In the cases of other income categories: SSI (fn9), government assistance (fn10), other (fn11)
 - If both agree → no change
 - If one is missing or zero and other is >0 → take existing entry
 - If both exist but disagree → take average
 - If both missing → keep as missing

STEP 2: FILL IN MISSING RESPONSES WITH 0 WHERE APPROPRIATE

- In 257 cases social security income (fn9) is missing and there is no one in the household 62 (minimum age to receive benefits) or older → change missing to 0
- In 332 cases other household members' earnings (fn7) is missing, but there is no one other than the respondent and spouse in the household → change missing to 0
- There are no cases where spouse income is missing and there is no spouse in the household

STEP 3: CONVERT RESPONSES THAT ARE GIVEN AFTER TAX TO BEFORE TAX

- Tax rates are applied marginally: any after-tax portion under the first bracket (after adding it to all before-tax income) is inflated by the lowest tax rate, any after-tax income between the 2nd and 3rd brackets is inflated by the 2nd tax rate, etc.
- Bracket cut-offs are determined by your filing status. (See Table 3 below). If you are the only household member, I assume you file singly (20%). If both you and your spouse are employed, I assume you file jointly (32%). Otherwise, I assume that the respondent files as head of household (48%).
- For example, if you are married and filing jointly and you report pre-tax income of \$30,000 and post-tax income of \$25,000 then \$15,200 ($=\$45,200 - 30,000$) of post-tax income is inflated at the 15% marginal tax rate and \$9,800 ($\$25,000 - 15,200$) is inflated at the 27.5% marginal rate.

Table 4: 2001 Marginal Tax Rates

Status	Taxable Income (\$)	Effective Rate (%)
Married Filing Jointly	0 to 45,200	15
	45,201 to 109,250	27.5
	109,251 to 166,450	30.5
	166,451 to 297,300	35.5
	More than 297,300	39.1
Head of Household	0 to 36,250	15
	36,251 to 93,600	27.5
	93,601 to 151,600	30.5
	151,601 to 297,300	35.5
	More than 297,300	39.1
Single	0 to 27,050	15
	27,051 to 65,550	27.5
	65,551 to 136,750	30.5
	136,751 to 297,300	35.5
	More than 297,300	39.1
Married Filing Separately	0 to 22,600	15
	22,601 to 54,625	27.5
	54,626 to 83,225	30.5
	83,226 to 148,650	35.5
	More than 148,650	39.1

STEP 4: IMPUTE REMAINING MISSING RESPONSES BY CATEGORY

- If a respondent is missing in an income category, I replace income for that category with the median for the respondent's cell group, where cell groups are defined differently depending on the income category.
- For each income category I ran a regression using a set of demographic variables to predict income (age, sex, marital status, employment status, race, urbanicity and household size). For spouse's income, spouse education and employment was also included. For social security, number of people over 61 in the household was used.
- Significant predictors in these regressions are then used to define the demographic cell for that income category. So a respondent who is missing on an income category gets the median of his cell:

Table 4: Definitions of income categories

Income Category	Cells defined by
Own earned income	Sex, emp status, marital status, race, education, urbanicity,
Spouse's earned income	Spouse emp status, spouse education, emp status, race, education, urbanicity
Earned income of others in the household	Age, sex, marital status, urbanicity, household size
Social Security income	Age, emp status, marital status, number of people over 61 in the hh
Government assistance	Age, sex, emp status, race, education
Other income (investments, alimony, etc.)	Age, sex, emp status, marital status, race, education

- There are a few cases where there are only missing observations within a respondent's cell. In these cases I ran another round of imputations with fewer demographic variables defining the cells, dropping the variables with lower predictive power.

STEP 5: TRIM UPPER END

- Households above the 99th percentile get recoded to the 99th percentile (\$375,000).

STEP 6: DETERMINE POVERTY STATUS

- The variable poor equals 1 if you are below the poverty line as defined by Table 5.
- The variable povpct expresses your income as a multiple of your household-size specific poverty line.

Table 5: Poverty Thresholds for 2001 by Size of Family and Number of Related Children

Size of family unit	Related children under 18 years								
	None	One	Two	three	Four	Five	Six	Seven	Eight or more
One person									
Under 65 years	9,214								
65 years and over	8,494								
Two persons									
Householder <65 years	11,859	12,207							
Householder 65+ years	10,705	12,161							
Three persons	13,853	14,255	14,269						
Four persons	18,267	18,566	17,960	18,022					
Five persons	22,029	22,349	21,665	21,135	20,812				
Six persons	25,337	25,438	24,914	24,411	23,664	23,221			
Seven persons	29,154	29,336	28,708	28,271	27,456	26,505	25,462		
Eight persons	32,606	32,894	32,302	31,783	31,047	30,112	29,140	28,893	
Nine persons or more	39,223	39,413	38,889	38,449	27,726	36,732	35,833	35,610	34,238

Source: U.S. Census Bureau.

Income is pre-tax.



Collaborative Psychiatric Epidemiology Surveys

NCS-R Specific Documentation

NOTE: The CPES Web site documents a new version of the National Comorbidity Survey—Replication (NCS-R). Previously NCS-R was released as a separate data collection by ICPSR. The CPES Users Guide and Processor Notes on the Web site provide information relevant to the current NCS-R dataset as it relates to the CPES dataset, harmonized across NCS-R, NLAAS, and NSAL. The following is NCS-R specific documentation provided for users of the previous dataset.

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Introduction

The National Comorbidity Survey Replication (NCS-R) is a probability sample of the US carried out a decade after the original NCS (Kessler et al., 1994). The NCS-R repeats many of the questions from the NCS and also expands the questioning to include assessments based on the more recent DSM-IV diagnostics system (American Psychiatric Association, 1994). The methods and procedures used in the NCS-R are described in a separate paper (Kessler, Berglund, Chiu, Demler, Heeringa, Hiripi, Jin, Pennell, Walter, Zaslavsky and Zheng, 2004). The two major aims of the NCS-R were: (1) to investigate time trends and their correlates over the decade of the 1990s; and (2) to expand the assessment of the prevalence and correlates of mental disorders beyond the assessment in the baseline NCS in order to address a number of important substantive and methodological issues that were raised by the NCS.

Sample

The NCS-R is a nationally representative survey of English-speaking household residents aged 18 years and older in the coterminous United States. Face-to-face interviews were carried out by professional interviewers from the Institute for Social Research at the University of Michigan, Ann Arbor, between February 2001 and April 2003. The response rate was 70.9%. The survey was administered in two parts. Part I included a core diagnostic assessment of all respondents (n=9282) that took an average of about 1 hour to administer. Part II included questions about risk factors, consequences, other correlates, and additional disorders. In an effort to reduce respondent burden and control study costs, part II was administered only to 5692 of the 9282 part I respondents, including all part I respondents with a lifetime disorder plus a probability subsample of other respondents. Interviewers explained the study and obtained verbal informed consent prior to beginning each interview. Recruitment and consent were approved by the Human Subjects Committees of Harvard Medical School, Boston, Mass, and the University of Michigan.

Survey Mode

The NCS-R is an in-person survey that was carried out in the homes of a nationally representative sample of respondents between February 2001 and April 2003. The survey was administered using laptop computer-assisted personal interview (CAPI) methods by professional survey interviewers employed by the Survey Research Center (SRC) of the Institute for Social Research at the University of Michigan. The decision to use face-to-face administration rather than telephone, mail, or Internet administration was based on four main factors, the first three of which come from the literature on survey methodology (Groves, Fowler, Couper, Lepkowski, Singer and Tourangeau, 2004) and the fourth of which is based on considerations unique to the NCS-R. First, the coverage properties of an area probability sample are superior to other samples such as those used in telephone, mail, or Internet surveys. Second, the accuracy of screening and household enumeration procedures, which are required to create a probability sample, is greater in face-to-face surveys than in surveys based on these other modes of data collection. Third, response rates are generally much higher in face-to-face surveys than in those based on other modes of data collection. Fourth, the NCS-R interview schedule was quite long and highly complex, making it impossible to use these other modes effectively.

Fieldwork, Interviewers and interviewer training

The NCS-R fieldwork was carried out by the professional SRC national field interview staff. Over 300 interviewers participated in data collection. The SRC field staff was supervised by a team of 18 experienced regional supervisors. Supervisors in larger regions also had team leaders who worked with them. A study manager located at the central SRC facility in Michigan oversaw the work of the supervisors and their staff.

Each professional SRC interviewer must complete a two-day general interviewer training(GIT) course before working on any SRC survey. Moreover, experienced interviewers have to complete GIT refresher courses on a periodic basis. Each interviewer who worked on NCS-R also received 7 days of study specific training. Each interviewer had to complete an NCS-R certification test that involved administering a series of practice interviews with scripted responses before beginning production work.

Diagnostic Assessment

The NCS-R diagnoses are based on the World Mental Health Survey Initiative Version of the World Health Organization Composite International Diagnostic Interview (WMH-CIDI), a fully structured lay-administered diagnostic interview that generates both International Classification of Diseases, 10th Revision, and DSM-IV diagnoses. Diagnoses included in this public release: anxiety disorders (agoraphobia, generalized anxiety disorder, separation anxiety, panic attack, panic disorder, specific phobia, social phobia, posttraumatic stress disorder), mood disorders (major depressive disorder, major depressive episode, dysthymia, bipolar I and II disorders), a series of four disorders that share a common feature of difficulty with impulse control(intermittent explosive disorder, oppositional-defiant disorder, conduct disorder, attention-deficit/hyperactivity disorder), and substance use disorders (alcohol abuse, drug abuse, alcohol dependence, drug dependence, and tobacco dependence).

Analysis Procedures and Weighting

Weighting and clustering introduce imprecision into descriptive statistics. Conventional methods of estimating significance, which assume a simple random sample, do not take this imprecision into consideration. As a result, special design-based methods of estimating SEs and significance tests are being used in the analysis of the NCS-R data. The Taylor series linearization method is the main approach used here (Wolter, 1985), although we also use the more computationally intensive method of jackknife repeated replications (JRR) for some applications (Kish and Frankel, 1974).JRR is used for applications where a convenient software application using the Taylor series method is not readily available and for highly non-linear estimation problems in which the linearization of the Taylor series method might be problematic.

Sudaan v9.0 and SAS v9.1.3 are routinely used by NCS-R analysts to correctly estimate standard errors while taking the design structure and weighting into account. Sudaan and SAS utilize the Taylor series linearization method by default. However, for some statistical techniques, Sudaan software or SAS macros written by Harvard and Michigan analysts using the JRR method are used.

The NCS-R data are weighted to adjust for differential probabilities of selection of respondents within households and differential nonresponse as well as to adjust for residual differences between the sample and the United States population on the cross-classification of sociodemographic variables. An additional weight was used in the part II sample to adjust for differences in probability of selection into that sample. These procedures are described in more detail by Kessler, Berglund, Chiu, Demler, Heeringa, Hiripi, Jin, Pennell, Walter, Zaslavsky and Zheng, 2004.

Part I of the NCS-R includes sections 1-14 or Household Listing, Screening, Depression, Mania, Irritable Depression, Panic Disorder, Specific Phobia, Social Phobia, Agoraphobia,

Generalized Anxiety Disorder, Intermittent Explosive Disorder, Suicidality, Services, and Pharmacoepidemiology. At the conclusion of the Pharmacoepidemiology section a series of assignments into the Part II of the survey are made. All 9282 respondents are asked the Part I questions while a subsample of 5692 respondents completed Part II. All sections after Pharmacoepidemiology are considered Part II sections.

Selection of Weights

As a practical matter for analysts, the following decision rules should be applied when selecting the weight to use. When using only variables from Part I the "finalp1w" weight variable should be used. For analyses with only Part II or a combination of Part I and Part II variables, the Part II weight or "finalp2w" should be used.

Sample Analysis Programs

Sample SAS and SAS-callable Sudaan programs are included here. These programs cover common analysis tasks such as descriptive analyses, linear and logistic regression, and survival analyses while taking the clustering and weighting into account. STATA software can also correctly analyze data from complex sample surveys via the svy set of procedures. STATA code examples are not included in the sample programs section as NCS-R staff does not use STATA for production work.

Illustrative SAS code for use with SAS procs: surveymeans, surveyfreq, surveyreg, and surveylogistic are presented. These programs serve simply as samples of how to properly use the weights and design variables of the NCS-R data. Also included is SAS macro coding to perform Jackknife Repeated Replication (JRR) with logistic regression. The JRR concept can be extended to other statistics such as means, proportions, linear regression.

Sample Sudaan code is also presented to illustrate performing the same analyses previously shown via the survey procedures of SAS v9.1.3. SAS-callable 32 bit Sudaanv9.0 is used in these examples.

SAS and Sudaan code

NOTE: As part of the harmonization of variables across CPES surveys, some variables have been renamed in the current NCS-R dataset available on the CPES Website. The following names used in these examples differ from those in the dataset found on the CPES Web site.

Original NCS-R Release	CPES NCS-R Release
SAMPLEID	CPESCASE
FINALP1WT	NCSRWTSH
FINALP2WT	NCSRWTLG
STR	SESTRAT
SECU	SECLUSTER

```
*****;
*sample SAS and Sudaan programs
*programs written by Pat Berglund: pberg@umich.edu** ;
*Descriptives
*Regression including logistic and linear
*Survival Curve using proc lifetest
*Discrete Time Survival analysis using SAS and Sudaan
*SAS Jackknife Repeated Replication for logistic regression macro
*comparison of SAS JRR with SAS proc logistic and proc surveylogistic
*programs include both SAS and Sudaan code
*Sudaan is SAS-callable 32 bit, compatible with SAS v8.2 32 bit on UNIX

*****;
*Sample 1*****;
*demonstration of how to *use proc descript and proc crosstab in Sudaan*****;
*demonstration of using proc surveymeans and proc surveyfreq in SAS***** ;
*****;
options ls=100 ps=64 ;

*data and formats libname* ;
libname d '/u/pberg/ncsr/data' ;
libname library '/u/pberg//ncsr/data' ;

data demo ;
merge d.ncsrdia d.ncsrdem ;
by sampleid ;

*change 5 and other values to 0* ;
if dsm_mddh ne 1 then dsm_mddhrecoded=0 ; else dsm_mddhrecoded=1 ;
if dsm_gadh ne 1 then dsm_gadhrecoded=0 ; else dsm_gadhrecoded=1 ;

**SRS descriptives* ;
proc means mean n sumwgt min max stderr ;
title "SRS mean and std error" ;
var dsm_mddhrecoded ;
weight finalplwt ;
run ;

proc univariate ;
var dsm_mddhrecoded ;
weight finalplwt ;
run ;

proc freq ;
tables sex*dsm_mddhrecoded ;
```

```

tables sex*dsm_mddhrecode*agecat / list ;
weight finalplwt ;
run ;

*sort by design vars prior to running Sudaan* ;
proc sort ;
by str secu ;
run ;

***run means and standard errors in Sudaan v9.0 on SAS v8.2 (32 bit packages)* ;
proc descript filetype=sas design=wr ;
nest str secu ;
weight finalplwt ;
var dsm_mddhrecode dsm_gadhrecode ;
title "Means and corrected standard errors from Sudaan" ;
setenv decwidth=4 ;
run ;

*using a diffvar option for differences across sex * ;
proc descript filetype=sas design=wr ;
nest str secu ;
weight finalplwt ;
class sex dsm_mddhrecode /nofreq ;
var dsm_mddhrecode ;
diffvar sex=(0 1) / name="Males versus Females" ;
pairwise sex / name="Paired Males versus Females" ;
setenv decwidth=4 ;
run ;

***run crosstabs using proc crosstab in Sudaan v9.0 on SAS v8.2 * ;
proc crosstab filetype=sas design=wr ;
nest str secu ;
weight finalplwt ;
class sex dsm_mddhrecode ;
tables sex*dsm_mddhrecode ;
setenv decwidth=4 ;
run ;

**same analysis in SAS surveymeans* ;
proc surveymeans ;
strata str ;
cluster secu ;
weight finalplwt ;
var dsm_mddhrecode dsm_gadhrecode ;
run ;

*****;
*use SAS v9.1 or later for proc surveyfreq *****;
*****;

**use SAS v9.1*** ;

libname d 'f:\ncsr\data' ;
libname library 'f:\ncsr\data' ;
options nofmterr ;
data demo ;
merge d.ncsrdia d.ncsrdem ;
by sampleid ;
*change 5 and other values to 0* ;
if dsm_mddh ne 1 then dsm_mddhrecode=0 ; else dsm_mddhrecode=1 ;
if dsm_gadh ne 1 then dsm_gadhrecode=0 ; else dsm_gadhrecode=1 ;
proc format ;

```

```
value sexfor 0='Female' 1='Male' ;
proc surveyfreq ;
  strata str ;
  cluster secu ;
  weight finalplwt ;
  tables sex*dsm_mddhrecoded / row ;
  format sex sexfor. ;
run ;
```

```

*Sample 2*****;
*demonstration of how to use Sudaan proc rlogist and SAS proc surveylogistic ****;
*demonstration of how to use Sudaan proc regress and SAS proc surveyreg ****;
*****;

*Sudaan proc rlogist and proc regress* ;
*Sudaan expects data to be sorted by nest variables* ;
>Note that these are SAS-callable Sudaan procedures

proc sort ;
    by str secu ;
run ;

proc rlogist ;
    nest str secu ;
    weight finalplwt ;
    class agecat ;
    model dsm_mddhrecoded=sexf agecat ;
    test waldchi ;
    setenv decwidth=4 ;
run ;

proc freq ;
    tables hhinc ;
    weight finalplwt ;
run ;

proc sort ;
    by str secu ;
run ;

*linear outcome using proc regress of Sudaan* ;
proc regress data=demo ;
    nest str secu ;
    weight finalp2wt ;
    class agecat ;
    model hhinc=agecat sexf ;
    test waldf ;
run ;

*linear outcome of household income using proc surveyreg of SAS* ;

proc surveyreg data=demo ;
    strata str ;
    cluster secu ;
    weight finalp2wt ;
    class agecat ;
    model hhinc=agecat sexf / solution ;
run ;

```

```

*Sample 3*****;
*demonstration of how to use SAS proc lifetest to do survival curves *****;
*****;
data survcurve ;
    set demo ;

*recode dsm_mde* ;
    if dsm_mde ne 1 then dsm_mde=0 ;

*create age at onset or age at censor* ;
    if dsm_mde=1 then ageevent=mde_ond ; else ageevent=age ;

*multiply weight by 100 for proc lifetest* ;
    plwt100=finalplwt*100 ;

**check usual proc freq first* ;
proc freq ;
    tables mde_ond*dsm_mde ageevent ;
    weight finalplwt ;
    run ;

proc lifetest method=lt intervals=(1 to 96 by 1) outs=fail
(keep=ageevent dsm_mde survival )
plots=(s,h) graphics ;
time ageevent * dsm_mde (0) ;
freq plwt100 ;
run ;

*create dataset with failure rate or 1-survival* ;

data graph ;
    set fail ;
    failure = 1- survival ;
    label failure ="Cumulative %" ageevent="Time Until Age of Onset or Censor" ;
    symbol c=red i=steprj w=3 ;
    title "Survival Curve for Age of Onset of Major Depressive Episode" ;

proc gplot ;
    plot failure *ageevent / legend ;
    format failure percent10. ;
run ;

```

```

*Sample 4*****;
*demonstration of how to create a person year file using SAS do loop with output
statement and creation of time-varying variables
*demonstrate use of proc rlogist of SAS-callable Sudaan
*****;

proc freq data=demo ;
   tables dsm_mde ;
   weight finalplwt ;
run ;

data personyrs ;
   set demo ;
   do int=1 to age ;
      output ;
   end ;
run ;

data personyrs ;
   set personyrs ;
/*create time-varying mde variable set to yes in year of mde onset* ;
   if int=mde_ond then mdetv=1 ; else mdetv=0 ;
/*create a variable that has an age for each person in file: age of onset of mde or age at
interview ;
   if dsm_mde=1 then ageevent=mde_ond ; else ageevent=age ;

proc freq ;
   tables mdetv ageevent ;
   weight finalplwt ;
run ;

proc print ;
   where age=7 ;
   var sampleid int age dsm_mde mde_ond mdetv ;
run ;

proc means ;
   var ints ;
run ;

proc sort ;
   by str secu ;
run ;

proc rlogist filetype=sas design=wr ;
   nest str secu ;
   weight finalplwt ;
   subpopn int <= ageevent ;
   class agecat ;
   model mdetv=int sexf agecat ;
   test waldchi ;
run ;

```

```
*****
*sample 5 - use of SAS macro coding for Jackknife Repeated Replication,
alternative approach to Taylor Series linearization
*this program demonstrates using JRR with logistic regression
*program also includes using SAS proc logistic and SAS proc surveylogistic
***** ;

***** ;
*Logistic Regression Jackknife for Analysis of Complex Survey Data***** ;
*Pat Berglund: April 2006 for NCS-R public release examples***** ;
***** ;

libname d 'd:\sumclass' ;
*example of merging the NCS-R demographic and diagnostic datasets prior to running
macro* ;
data ncsrdemdia ;
    merge d.ncsrdem d.ncsrdia ;
    by sampleid ;
run ;

options compress=yes nofmterr symbolgen ;
options macrogen mprint;

*create outer jackknife macro with parameters ;
*Parameters to fill in:
*ncluster=number of clusters, in the NCS I dataset this is 42 ;
*weight=case weight ;
*depend=dependent variable for the logistic model ;
*preds=predictor variables entered with a space between each one ;
*indata=input dataset* ;

%macro jacklogods(ncluster,weight,depend,preds,indata);

***** ;
*section 1: jackknife using strata and secu variables to do 42 jackknife selections* ;
*each iteration of do loop selects one strata*secu combination and doubles the
contribution of strata=x and secu=1 while setting strata=x and secu=2 to zero ;
*all other combinations stay the same* ;
***** ;

let nclust=%eval(&ncluster);

data one;
    set &indata;

%macro wgtcal ;
    %do i=1 %to &nclust ;
        pwt&i=&weight;
        if str=&i and secu=1 then pwt&i=pwt&i*2 ;
        if str=&i and secu=2 then pwt&i=0 ;
        %end;
        %mend;
%wgtcal ;
```

```

***** ;  

*section 2: run base model/statistic of interest for entire sample using full weight* ;  

***** ;  

%macro base ;  

    ods output parameterestimates=parms (keep=variable estimate ) ;  

    ods listing close ;  

    proc logistic des data=ONE ;  

    model &depend=&preds ;  

        weight &weight ;  

    run ;  

    ods listing ;  

    proc print data=parms ;  

        run ;  

    proc sort ;  

        by variable ;  

    run ;  

%mend base ;  

%base ;  

***** ;  

*Section 3: Run Replicate Models* ;  

*run replicate models, one for each strata using weight developed in section 1 ;  

*save statistic of interest for use with variance estimation* ;  

***** ;  

%macro reps ;  

    %do j=1 %to &nclust ;  

        ods output parameterestimates=parms&j  

            (keep=estimate variable rename=(estimate=estimate&j )) ;  

        ods listing close ;  

        proc logistic des data=ONE ;  

        model &depend=&preds ;  

            weight pwt&j ;  

        run ;  

        proc sort ;  

            by variable ;  

    %end ;  

%mend reps;  

%reps ;

```

```

***** ;  

*Section 4: Merge Base and Replicate files together for calculation of statistics  

of interest* ;  

***** ;  

data rep ;  

merge parms  

  %do k=1 %to &nclust;  

    parms&k  

  %end;;  

  by variable ;  

  proc print ;  

  run ;  

***** ;  

*Section 5-Calculate complex design corrected variance and standard errors  

*variance = sum of the squared differences between the base statistic and the replicate  

statistics ;  

*standard error= square root of the sum of the squared differences (variance) ;  

*Odds Ratio=exponent of the coefficient ;  

*Confidence Intervals=OR+-1.96*corrected standard error* ;  

***** ;  

ods listing ;  

data calculate ;  

  set rep ;  

%macro it ;  

  %do j=1 %to &nclust ;  

    sqdiff&j=(estimate-estimate&j)**2;  

  %end;  

  sumdiff=sum(of sqdiff1-sqdiff&nclust);  

  stderr=sqrt(sumdiff) ;  

  or=exp(estimate) ;  

  lowor=exp (estimate-(1.96*stderr)) ;  

  upor=exp (estimate+(1.96*stderr)) ;  

%mend it ;  

%it;  

  run ;  

proc print ;  

  var variable estimate stderr or lowor upor ;  

  run ;  

%mend jacklogods ;  

%jacklogods(42,finalplwt,dsm_mde,sexf, ncsrdemdia ) ;  

***** ;  

*comparison with SRS logistic regression* ;  

***** ;  

proc logistic des data=ncsrdemdia ;  

weight finalplwt ;  

model dsm_mde ;  

run ;  

***** ;  

*comparison with SAS surveylogistic regression* ;  

***** ;  

proc surveylogistic data=ncsrdemdia ;

```

```
strata str ;
cluster secu ;
weight finalp1wt ;
model dsm_mde (event='1') =sexf ;
run ;
```

Related Publications

American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorders, (DSM-IV). 4th ed. Washington, DC: American Psychiatric Association;1994.

Kessler RC, Merikangas KR. The National Comorbidity Survey Replication (NCSR): background and aims. *Int J Methods Psychiatric Res.* 2004;13:60-68.

Kessler RC, Ustun TB. The World Mental Health (WMH) survey initiative version of the World Health Organization (WHO) Composite International Diagnostic Interview (CIDI). *Int J Methods Psychiatric Res.* 2004;13:93-121.

Kessler RC, Berglund P, Chiu W-T, Demler O, Heeringa S, Hiripi E, Jin R, Pennell BE, Walters EE, Zaslavsky A, Zheng H. The US National Comorbidity Survey Replication (NCS-R): design and field procedures. *Int J Methods Psychiatry Res.* 2004;13:69-92.

Kessler RC, Chiu WT, Demler O, Walters EE. Prevalence, severity, and comorbidity of 12-month DSM-IV disorders in the National Comorbidity Survey Replication. *Arch Gen Psychiatry.* 2005;62:617-627.

Kessler RC, Berglund P, Demler O, Jin R, Walters EE. Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the National Comorbidity Survey Replication. *Arch Gen Psychiatry.* 2005;62:593-602.

Kish L, Frankel MR. Inferences from complex samples. *J R Stat Soc [Ser A].* 1974;36:1-37.

Wang PS, Lane M, Olfson M, Pincus HA, Wells KB, Kessler RC. Twelve-month use of mental health services in the United States: results from the National Comorbidity Survey Replication. *Arch Gen Psychiatry.* 2005;62:629-640.

World Health Organization. International Classification of Diseases (ICD-10). Geneva, Switzerland: World Health Organization; 1991.

Weighting Information

The NCS-R data are weighted to adjust for differential probabilities of selection of respondents within households and differential non-response as well as to adjust for residual differences between the sample and the United States population on the cross-classification of socio-demographic variables. An additional weight was used in the part II sample to adjust for differences in probability of selection into that sample.

As a practical matter for analysts, the following decision rules should be applied when selecting the weight to use. When using only variables from Part I the "finalp1wt" weight variable should be used. For analyses with only Part II or a combination of Part I and Part II variables, the Part II weight or "finalp2wt" should be used.

NOTE: NCS-R weight variables were renamed in the NCS-R dataset available from the CPES Website.

Original NCS-R Release	CPES NCS-R Release
FINALP1WT	NCSRWTSH
FINALP2WT	NCSRWTLG

Part I:	
Sections	Diagnostic Disorders
SCREENING	Agoraphobia
DEPRESSION	Bipolar I
MANIA	Bipolar II
IRRITABLE DEPRESSION	Bipolar Subthreshold
PANIC DISORDER	Dysthymia
SPECIFIC PHOBIA	Generalized Anxiety Disorder
SOCIAL PHOBIA	Hypomania
AGORAPHOBIA	Intermittent Explosive Disorder
GENERALIZED ANXIETY DISORDER	Mania
INTERMITTENT EXPLOSIVE DISORDER	Major Depressive Disorder
SUICIDALITY	Major Depressive Episode
SERVICES	Panic Attack
PHARMACOEPIDEMIOLOGY	Panic Disorder
INTERVIEWER'S OBSERVATION	Social Phobia
	Specific Phobia

Part II:	
Sections	Diagnostic Disorders
DEMOGRAPHICS	Attention Deficit Disorder
PERSONALITY	Alcohol Abuse
SUBSTANCE USE	Alcohol Dependence
POST-TRAUMATIC STRESS DISORDER	Adult Separation Anxiety Disorder
CHRONIC CONDITIONS	Conduct Disorder
NEURASTHENIA	Drug Abuse
30-DAY FUNCTIONING	Drug Dependence
30-DAY SYMPTOMS	Oppositional Defiant Disorder

TOBACCO	Post-traumatic Stress Disorder
EATING DISORDERS	Separation Anxiety Disorder
PREMENSTRUAL SYNDROME	Nicotine Dependence
OBSESSIVE-COMPULSIVE DISORDER	
PSYCHOSIS	
GAMBLING	
WORRIES AND UNHAPPINESS	
EMPLOYMENT	
FINANCES	
MARRIAGE	
CHILDREN	

Part II:	
Sections	Diagnostic Disorders
SOCIAL NETWORKS	
ADULT DEMOGRAPHICS	
CHILDHOOD DEMOGRAPHICS	
CHILDHOOD	
ATTENTION- DEFICIT/HYPERACTIVITY	
OPPOSITIONAL-DEFIANT DISORDER	
CONDUCT DISORDER	
SEPARATION ANXIETY DISORDER	
FAMILY BURDEN	
PERCEPTIONS OF THE PAST	
TERROR	

HOW OFTEN DO YOU FEEL THE FOLLOWING?

- Nearly all the time
- Pretty often
- Not very much
- Never

**HOW MUCH HAVE YOUR ACTIVITIES BEEN LIMITED BY HEALTH PROBLEMS
IN THE PAST THREE MONTHS?**

100	Excellent functioning in all areas of life (e.g., superior performance at work and excellent personal relationships)
-- 90	Good functioning in all areas of life (e.g., no problems at work or in personal life)
-- 80	Slight difficulty (e.g., temporarily falling behind in work or school, minor argument with friend or relative)
-- 70	Some difficulty (e.g., some work or school problems, but still generally doing well; or some interpersonal problems, but still having meaningful relationships)
-- 60	Moderate difficulty (e.g., inadequate work or school performance ongoing conflicts with people in your personal life)
-- 50 has no friends)	Serious impairment in one area (e.g., can't keep a job or
-- 40 no friends and has	Serious impairment in more than one area (e.g., unable to work and conflicts with family)
-- 30	Unable to function in most areas (e.g., no job, no friends, stays in bed)

bed most days)

-- 20 or	Difficulty with basic needs (e.g., needs help with bathing or dress preparing meals; cannot be left alone for long periods)
-- 10 or nursing	Unable to meet basic needs (e.g., requires constant superv home care)
0	Unconscious (e.g., in coma or on a life support machine)

WAS THERE EVER A TIME IN YOUR LIFE WHEN YOU HAD A STRONG FEAR OF...

GROUP 1: ANIMALS

- Bugs
- Snakes or dogs
- Any other animals

GROUP 2: NATURAL ENVIRONMENT

- Still water, like a swimming pool or a lake
- Storms
- Thunder or lightning

GROUP 3: MEDICAL SETTINGS

- Going to the dentist
- Going to the doctor
- Getting a shot or injection
- Seeing blood
- Seeing injury
- Being in a hospital or doctor's office

GROUP 4: CLOSED SPACES

- Caves
- Tunnels
- Closets
- Elevators

GROUP 5: HIGH PLACES

- Roofs
- Balconies
- Bridges
- High staircases

UP 6: FLYING

- Flying
- Airplanes

WAS THERE EVER A TIME IN YOUR LIFE WHEN YOU FELT VERY AFRAID OR REALLY REALLY SHY WITH PEOPLE LIKE ...

- Meeting new people
- Going to parties
- Going on a date
- Using a public bathroom
- Giving a speech
- Speaking in class

WAS THERE EVER A TIME IN YOUR LIFE WHEN YOU FELT VERY UNCOMFORTABLE OR AFRAID OF...

- Being in crowds
- Going to public places
- Traveling by yourself
- Traveling away from home

**WHICH PROBLEMS DID YOU HAVE MOST OF THE DAY NEARLY EVERY DAY?
(CHECK OFF "YES" RESPONSES IN BOXES Ö)**

- q Sad, empty, or depressed
- q So sad that nothing could cheer you up
- q Discouraged about your life
- q Hopeless about the future
- q Lost interest in almost all things
- q Nothing was fun
- q Much smaller appetite than usual
- q Much larger appetite than usual
- q Gain weight without trying to
- q Lost weight without trying to
- q A lot more trouble than usual falling asleep
- q Slept a lot more than usual
- q Slept much less than usual
- q Tired or low in energy
- q A lot more energy than usual
- q Talked or moved more slowly than is normal for you
- q Anyone else noticed that you were talking or moving slowly
- q So restless or jittery that you paced up and down

(CHECK OFF “YES” RESPONSES IN BOXES Ö)

- q Anyone else noticed that you were restless
- q Thoughts came much more slowly than usual
- q Thoughts seemed to jump from one thing to another
- q A lot more trouble concentrating than is normal for you
- q Unable to make up your mind about things
- q Lost self-confidence
- q Not as good as other people

- q Totally worthless
- q Guilty
- q Irritable, grouchy, or in a bad mood
- q Nervous or anxious
- q Sudden attacks of intense fear or panic
- q Thought a lot about death
- q Thought it would be better if you were dead
- q Thought about committing suicide
- q Made a suicide plan
- q Made a suicide attempt
- q Could not cope with everyday responsibilities
- q Wanted to be alone rather than spend time with friends or relatives
- q Less talkative than usual
- q Often in tears

WHICH STATEMENT IN EACH SERIES COMES CLOSEST TO YOUR EXPERIENCE?

Circle the number of the statement that comes closest to your experience.

Problems falling asleep

1. You never took longer than 30 minutes to fall asleep.
2. You took at least 30 minutes to fall asleep, less than half the time.
3. You took at least 30 minutes to fall asleep, more than half the time.
4. You took more than 60 minutes to fall asleep, more than half the time.

Waking up at night

1. You did not wake up at night.
2. You had a restless, light sleep with few brief awakenings each night.
3. You woke up at least once a night, but you got back to sleep easily.
4. You woke up more than once a night and stayed awake for 20 minutes or more, more than half the time.

Waking up too early

1. Most of the time, you woke up no more than 30 minutes before you needed to get up.
2. More than half the time, you woke up more than 30 minutes before you needed to get up.
3. You almost always woke up at least one hour or so before you needed to, but you went back to sleep eventually.
4. You woke up at least one hour before you needed to and couldn't get back to sleep.

The amount of sleep you got each night

1. You slept no longer than 7-8 hours/night, without napping during the day.
2. You slept no longer than 10 hours in a 24-hour period including naps.
3. You slept no longer than 12 hours in a 24-hour period including naps.
4. You slept longer than 12 hours in a 24-hour period including naps.

Sadness

1. You did not feel sad.
2. You felt sad less than half the time.
3. You felt sad more than half the time.
4. You felt sad nearly all the time.

Concentrating and making decisions

1. There was no change in your usual capacity to concentrate or make decisions.
2. You occasionally felt indecisive or found that your attention wandered.
3. Most of the time, you struggled to focus your attention or to make decisions.
4. You couldn't concentrate well enough to read or you couldn't make even minor decisions.

Feeling down on yourself

1. You saw yourself as equally worthwhile and deserving as other people.
2. You were more self-blaming than usual.
3. You largely believed that you caused problems for others.
4. You thought almost constantly about major and minor defects in yourself.

Interest in your daily activities

1. There was no change from usual in how interested you were in other people or activities.
2. You noticed that you were less interested in people or activities.
3. You found you had interest in only one or two of your formerly pursued activities.
4. You had virtually no interest in formerly pursued activities.

Energy

1. There was no change in your usual level of activity.
2. You got tired more easily than usual.
3. You had to make a big effort to start or finish your usual daily activities (for example, shopping, homework, cooking, or going to work).
4. You really couldn't carry out most of your usual daily activities because you just didn't have the energy.

WHICH STATEMENT IN EACH SERIES COMES CLOSEST TO YOUR EXPERIENCE DURING THE WORST FOUR DAYS.

Circle the number of the statement that comes closest to your experience.

Mood

1. Your mood was no more high than usual in terms of things like being happy, self-confident, or optimistic.
2. Your mood was a little more high than usual.
3. Your mood was quite a bit more high than usual, but never over the edge or inappropriate.
4. Your mood was over the edge in terms of things like being unrealistically self-confident or optimistic or very happy even when bad things were happening.
5. You were uncontrollably high in terms of things like laughing out loud without cause or singing loudly in public places.

Physical Arousal

1. You had no increase in physical arousal in terms of things like energy or restlessness or difficulty sitting still.
2. You had some increase in arousal, but not enough for most people to notice.
3. You had a big enough increase in arousal for most people to notice, with things like increases in hand gestures, loudness, or being a lot more animated than usual.
4. You were so highly aroused that you felt agitated or restless or hyper, but not enough to be out of control.
5. You were uncontrollably agitated or restless or hyper.

Sexual Interest

1. You had no increase in sexual interest.
2. You had a mild increase in sexual interest.
3. You had a strong increase in sexual thoughts without talking about it or doing anything.
4. You talked a lot more about sex than usual without doing anything about it.
5. You inappropriately propositioned people or touched people sexually or engaged in other sexual behaviors you wouldn't normally do.

Sleep

1. You experienced no decrease in sleep.
2. You slept less than normal by up to one hour.
3. You slept less than normal by more than one hour.
4. You slept less than usual and didn't feel the need for more sleep.
5. You didn't feel the need for any sleep at all.

Irritability

1. You experienced no increase in irritability, in terms of things like feeling grumpy or acting annoyed or angry.
2. You experienced some increase in irritability, but not enough for most people to notice.
3. You experienced a big enough increase in irritability for most people to notice, with things like sometimes being short or snappy with people or having occasional outbursts of anger.
4. You were very irritable most of the time.
5. You were so hostile or uncooperative that it was impossible for people to be around you.

Talking

1. You experienced no increase in talkativeness.
2. You wanted to be more talkative, but didn't actually talk a lot more than usual.
3. At times you talked a lot more than usual or a lot more than the situation required.
4. You often talked a lot more than the situation required or talked so much that it was hard for other people to interrupt you.
5. You talked nonstop or so much that no one could interrupt you even when they tried.

Racing Thoughts/Disorganized Thinking:

1. Your thoughts did not come more quickly or seem more confused or escape you more than usual.
2. Your thoughts came somewhat more quickly than usual, or seemed a bit more confused than usual, or you lost your train of thought somewhat more than usual.
3. Your thoughts raced through your mind, or you easily lost your train of thought, or your mind kept jumping from one topic to another.
4. Your thoughts jumped around so much that people had a hard time following you or you couldn't keep yourself on track in a conversation.
5. Your thoughts were going so fast or you were so confused that it was impossible for anyone to follow you or for you to make yourself understood.

Impractical/Unrealistic Thinking

1. You didn't think or talk about anything different than usual
2. You thought a lot about new interests or new plans that were not very practical or realistic.
3. You thought a lot about really strange unrealistic things like hyper-religious ideas or totally unrealistic plans.
4. You had a lot of grandiose ideas about being able to do things you can't really do, or paranoid ideas about plots or conspiracies that don't really exist, or ideas about you being at the center of things that really don't have much to do with you.
5. Your mind was so confused that you were having delusions or hearing voices or seeing things.

Disruptive/Aggressive Behavior

1. You were no more disruptive or aggressive in your behavior than usual.
2. You were often loud or sarcastic with people, but never threatened or got physical.
3. You sometimes threatened people or made hostile demands, but never got physical.

4. You frequently threatened or shouted at people, but without getting physical.
5. You physically assaulted someone or destroyed property.

Appearance

1. You dressed the same as always.
2. You had a big reduction in neatness of dressing or grooming, but not so much that most people would get worried about you.
3. You had a big change in dressing and grooming, either due to looking like a mess in terms of clothes and grooming or due to being very overdressed.
4. You had an extreme change in dressing or grooming, like being only partly clothed or wearing wild make-up or looking like a total mess.
5. You were completely un-groomed or disorganized in clothing or wore bizarre clothes.

Thought You Had a Problem

1. You recognized that you were sick and needed help.
2. You realized that you might have a problem.
3. You recognized that your behavior had changed a great deal, but didn't think it was a problem.
4. You realized that there had been some change in your behavior, but didn't really appreciate how great it had been.
5. You had times when you were totally unaware that your behavior was different from normal.

DID YOU HAVE 2 OR MORE OF THE FOLLOWING PROBLEMS?

- Heart pounding or racing
- Sweating
- Trembling
- Feeling sick to your stomach
- Having a dry mouth
- Having chills or hot flushes
- Feeling numbness or tingling sensations
- Having trouble breathing
- Feeling like you were choking
- Having pain or discomfort in your chest
- Feeling dizzy or faint
- Afraid you might die

- Fear of losing control, going crazy, or passing out
- Feeling like you were “not really there,” like you were watching a movie of yourself
- Feeling that things around you were unreal

DID YOU EVER STRONGLY FEAR...

- Meeting new people
- Talking to people in authority
- Speaking up in a meeting or class
- Going to parties or other social gatherings
- Acting, performing, or giving a talk in front of an audience
- Taking an important exam or interviewing for a job
- Working while someone watches
- Entering a room when others are already present
- Talking with people you don’t know very well
- Expressing disagreement to people you don’t know very well
- Writing or eating or drinking while someone watches
- Urinating in a public bathroom or using a bathroom away from home
- Being in a dating situation
- Any other social or performance situation where you could be the center of attention or where something embarrassing might happen

DID YOU EVER HAVE 2 OR MORE OF THE FOLLOWING REACTIONS?

- Heart pounding or racing

- Sweating
- Trembling
- Feeling sick to your stomach
- Having a dry mouth
- Having chills or hot flushes
- Feeling numbness or tingling sensations
- Having trouble breathing normally
- Feeling like you were choking
- Having pain or discomfort in your chest
- Feeling dizzy or faint
- Afraid that you might die
- Fear of losing control, going crazy, or passing out
- Feeling like you were distant from the situation “not really there,” or like you were watching yourself in a movie
- Feeling that things around you were unreal

DID YOU EVER STONGLY FEAR...

- Being home alone
- Being in crowds
- Traveling away from home
- Traveling alone or being alone away from home
- Using public transportation
- Driving a car
- Standing in a line in a public place

- Being in a department store, shopping mall, or supermarket
- Being in a movie theater, auditorium, lecture hall, or church
- Being in a restaurant or any other public place
- Being in a wide, open field or street

DID YOU HAVE 1 OR MORE OF THE FOLLOWING REACTIONS?

- Having trouble breathing normally
- Feeling like you were choking
- Having pain or discomfort in your chest
- Feeling sick to your stomach
- Feeling dizzy or faint
- Fear of losing control, going crazy, or passing out
- Afraid that you might die
- Having chills or hot flashes
- Feeling numbness or tingling sensations
- Feeling like you were “not really there,” like you were watching a movie of yourself
- Feeling that things around you were not real or like a dream

EXAMPLES OF COMMONLY MENTIONED REASONS FOR BEING ANXIOUS

DIFFUSE WORRIES, SUCH AS . . .

- Everything
- Nothing in particular

PERSONAL PROBLEMS, SUCH AS . . .

- Finances

- Success at school or work
- Social life
- Love life
- Relationships at school or work
- Relationships with family
- Physical appearance
- Physical health
- Mental health
- Substance use

PHOBIC AND OBSESSIVE-COMPULSIVE SITUATIONS . . .

- Social phobias (e.g., meeting people after moving to a new town)
- Agoraphobia (e.g., leaving home alone after a divorce)
- Specific phobias (e.g., fears of bugs, heights, or closed spaces)
- Obsessions (e.g., worry about germs)
- Compulsions (e.g., repetitive hand washing)

NETWORK PROBLEMS, SUCH AS...

- Being away from home or apart from loved ones
- The health or welfare of loved ones — first mention
- The health or welfare of loved ones — second mention
- The health or welfare of loved ones — third mention

SOCIAL PROBLEMS, SUCH AS . . .

- Crime/violence
- The economy
- The environment (e.g. global warming, pollution)
- Moral decline of society (e.g. commercialism, decline of the family)
- War/revolution

DID ANY OF THESE 3 EXPERIENCES EVER HAPPEN TO YOU?

- A. You seriously thought about committing suicide
- B. You made a plan for committing suicide
- C. You attempted suicide

WHICH OF THESE 3 STATEMENTS BEST DESCRIBES YOUR SITUATION?

1. I made a serious attempt to kill myself and it was only luck that I did not succeed.
2. I tried to kill myself, but knew that the method was not fool-proof.
3. My attempt was a cry for help, I did not intend to die.

WHAT METHOD DID YOU USE?

- A. Gun
- B. Razor, knife or other sharp instrument
- C. Overdose of prescription medications
- D. Overdose of over-the-counter medications
- E. Overdose of other drug (e.g. heroin, crack, alcohol)

- F. Poisoning (e.g. carbon monoxide, rat poison)
- G. Hanging, strangulation, suffocation
- H. Drowning
- I. Jumping from high places
- J. Motor vehicle crash
- K. Other (please describe)

ALCOHOL EQUIVALENTS

HARD LIQUOR

1 mixed drink	=	1 drink
1 shot glass	=	1 drink
½ pint	=	6 drinks
1 pint	=	12 drinks
1 fifth	=	20 drinks
1 quart or liter	=	24 drinks

-

-

WINE

1 glass	=	1 drink
1 bottle	=	6 drinks
1 "wine cooler"	=	1 drink
1 gallon	=	30 drinks

-

-

BEER OR ALE

1 12 oz bottle	=	1 drink
1 12 oz can	=	1 drink
1 40 oz bottle	=	3 drinks
1 six pack	=	6 drinks
1 pitcher	=	5 drinks
1 case	=	24 drinks

COCAINE

Powder	Free base	Paste
Crack	Coca leaves	

SEDATIVES AND TRANQUILIZERS (SLEEPING PILLS, "DOWNERS," "NERVE PILLS"), SUCH AS

Amobarbital	Dalmane	Limbitrol	Paxipam	Sk-Lygen
Amytal	Deprol	Mebaral	Pentobarbital	Sopor
Ativan	Diazepam	Meprobamate	Phenobarbital	Tranxene
Barbiturate	Doriden	Methaqualone	Placidyl	Tuinal
Buticap	Durax	Menrium	Restoril	Valium
Butisol	Equanil	Miltown	Secobarbital	Xanax
Centrax	Halcion	Nembutal	Seconal	
Chloral Hydrate	Librium	Noludar	Serax	

STIMULANTS (AMPHETAMINES, "UPPERS," "SPEED," "ICE," "CRANK"), SUCH AS . . .

Benzedrine ("bennies")	Ecstasy	Plegine
Biphetamine	Eskatrol	Pondomin
Cylert	Fastin	Preludin
Desoxyn	Ionamin	Ritalin
Dexamyl	Mazanor	Sanorex
Dexedrine ("dexies")	Methamphetamine	Tenuate
Dextroamphetamine	Methedrine	Tepanil
Didrex	Obredrin-L.A.	Voranil

ANALGESICS (PAINKILLERS), SUCH AS . . .

Anileridine	Levo-Dromoran	Stadol
Buprenex	Methadone	Talacen
Codeine	Morphine	Talwin
Darvon	Percodan	Talwin NX
Demerol	Phenaphen with codeine	Tylenol with codeine
Dilaudid	Propoxyphene	Wygesic
Dolene	SK-65	

OTHER DRUGS, SUCH AS . . .

Heroin	Glue	Peyote
Opium	LSD (acid, white lightning)	

DID YOU EVER IN YOUR LIFETIME GO TO SEE ANY OF THESE PROFESSIONALS FOR PROBLEMS WITH YOUR EMOTIONS OR NERVES OR YOUR USE OF ALCOHOL OR DRUGS?

- A. A psychiatrist
- B. General practitioner or family doctor
- C. Any other medical doctor, like a cardiologist, gynecologist or urologist
- D. Psychologist
- E. Social worker
- F. Counselor
- G. Any other mental health professional, such as a psychotherapist or a mental health nurse
- H. A nurse, occupational therapist, or other health professional
- I. A religious or spiritual advisor like a minister, priest, or rabbi
- J. Any other healer, like an herbalist, chiropractor, or spiritualist

IN WHICH OF THESE LOCATIONS DID YOU SEE THE PROFESSIONAL?

- A. Hospital emergency department
- B. Psychiatric outpatient clinic
- C. Drug or alcohol outpatient clinic
- D. Private office
- E. Social service agency or department
- F. Program in jail or prison
- G. Drop-in center or program for people with emotional problems with alcohol or drugs
- H. Church or other religious building

WHICH OF THESE THREE STATEMENTS BEST DESCRIBES WHY YOU DIDN'T WANT TO SEE A PROFESSIONAL?

1. I didn't think I had a problem
2. I had a problem, but thought I could handle it on my own
3. I thought that I needed help but didn't believe professional treatment would be helpful

WHICH OF THESE WERE THE MAIN THINGS YOU WERE HOPING TO GET FROM TREATMENT?

- A. To help with your emotions (e.g., Sadness, anger)
- B. To control problem behaviors (e.g., Drinking problems, gambling)
- C. To deal with general body complaints (e.g., Tiredness, headaches)
- D. To help make a life decision (e.g., To get married or change jobs)
- E. To cope with ongoing stress (e.g., Job stress, marital problems)
- F. To cope with recent stressful events (e.g., Divorce, death of a loved one)
- G. To come to terms with your past (e.g., Feelings about your childhood)

DID YOU USE ANY OF THESE THERAPIES IN THE PAST 12 MONTHS

- Acupuncture
- Biofeedback
- Chiropractic
- Energy healing
- Exercise or movement therapy

- Herbal therapy (e.g., St. John's wort, chamomile)
- High dose mega-vitamins
- Homeopathy
- Hypnosis
- Imagery techniques
- Massage therapy
- Prayer or other spiritual practices
- Relaxation or meditation techniques
- Special diets
- Spiritual healing by others
- Any other non-traditional remedy or therapy (Please describe)

WHAT TYPES OF HERBAL MEDICINES DID YOU USE?

- Chamomile
- Kava
- Lavender
- St. John's wort
- Valerian
- Chasteberry
- Black cohosh
- Other (Please describe)

WHAT KIND OF SELF-HELP GROUP DID YOU GO TO IN THE PAST 12 MONTHS?

- A. Groups for people with substance problems (such as Alcoholics Anonymous or Rational

Recovery)

- B. Groups for people with emotional problems (such as Grow, The Manic Depressive Association, or Emotions Anonymous)
- C. Groups for people with eating problems
- D. Groups for dealing with the death of a loved one (such as The Compassionate Friends or Widow to Widow)
- E. Groups for people making other life transitions (such as Parents Without Partners or Empty Nesters)
- F. Groups for survivors (such as Adult Children of Alcoholics or Survivors of Childhood Sexual Abuse)
- G. Groups for people with physical disabilities or illnesses (such as Living with Cancer or Living with Aids)
- H. Parent support groups (such as Toughlove or Parents Anonymous)
- I. Groups for the families of people with a physical illness (such as the Candlelighters or Families of Children with Cancer)
- J. Groups for the families of people with emotional or substance problems (such as the National Alliance for the Mentally Ill or Al Anon)
- K. Any other self-help group, mutual help group, or support group

WHICH OF THE FOLLOWING STATEMENTS BEST DESCRIBES THE RELATIONSHIP BETWEEN YOUR PARTICIPATION IN THE SELF-HELP GROUP AND YOUR SEEING A PROFESSIONAL?

- 1. A professional ran the group
- 2. A professional asked me to attend the group as part of my treatment, but the group was not run by a professional
- 3. You attended the self-help group at the same time you saw a professional, but the two were not related
- 4. You attended the self-help group at a different time than when you saw a professional

IN THE PAST 12 MONTHS, DID YOU TAKE ANY OF THE FOLLOWING TYPES OF PRESCRIPTION MEDICATIONS UNDER THE SUPERVISION OF A DOCTOR, FOR YOUR EMOTIONS OR NERVES OR YOUR USE OF ALCOHOL OR DRUGS?

- Sleeping pills or other sedatives, (such as ambien or sonata)

- Anti-depressant medications, (such as prozac or zoloft)
- Tranquilizers, (such as xanax or ativan)
- Amphetamines or other stimulants, (such as ritalin or dextroamphetamine)
- Anti-psychotic medications, (such as haldol or risperdal)

DID YOU TAKE ANY OF THE FOLLOWING MEDICINES?

Acetophenazine

Adapin

Adderall

Alprazolam

Amantadine

Ambien

Amitriptyline

Amobarbital

Amoxapine

Amphetamines

Amytal

Anafranil

Antabuse

Antidepressant

Antipsychotic

Aquachloral

Artane

Asendin

Ativan

Aventyl

Benadryl

Benztropine

Bupropion

Buspar

Buspirone

Carbamazepine

Carbatrol

Catapres

Celexa

Chloral Hydrate

Chlordiazepoxide

Chlorpromazine

Citalopram

Clomipramine

Clonazepam

Clonidine
Clorazepate
Clorazil
Clorprothixene
Clozapine
Clozaril
Cogentin
Cylert
Dalmane
Depacon
Depakene
Depakote
Desipramine
Desoxyn
Desoxyn Gradumet
Desyrel
Dexedrine
Dextroamphetamine
Dextrostat
Dihydroergotamine Mesylate
Diazepam
Diphenhydramine
Disulfiram
Divalproex
Doral
Doriden
Doxepin
Droperidol
Duralith
Effexor
Elavil
Epitol
Equanil
Eskalith
Eskalith CR-450
Estazolam
Ethchlorvynol
Etrafon
Fluoxetine
Fluphenazine
Flurazepam
Fluvoxamine
Gabapentin
Gen-Xene
Glutethimide
Halazepam
Halcion
Haldol
Haldol Depot
Haloperidol
Hydroxyzine
Imipramine

Inapsine
Inderal
Isocarboxazid
Janimine
Klonopin
Lamictal
Lamotrigine
Librax
Libritabs
Librium
Limbitrol
Lithium
Lithium Carbonate
Lithium Citrate Syrup
Lithobid
Lithonate
Lithotabs
Lorazepam
Loxapine
Loxitane
Ludiomil
Luminal
Luvox
Maprotiline
Marplan
Mellaril
Meprobamate
Mesoridazine
Methamphetamine
Methotriimeprazine
Methyl-Phenidate
Midazolam
Miltown
Mirtazapine
Mitran
Moban
Moclobemide
Molindone
Nardil
Navane
Nefazodone
Nembutal
Neuramate
Neurontin
Norpramine
Nortriptyline
Obetrol
Olanzapine
Orap
Oxazepam
Oxybutynin
Pamelor

Parnate
Paroxetine
Paxil
Paxipam
Pemoline
Permitil
Perphenazine
Phenelzine
Phenergan
Phenobarbital
Phenytoin
Pimozone
Placidyl
Prazepam
Prolixin
Prolixin Depot
Propofol
Propranolol
Prosom
Protriptyline
Prozac
Quazepam
Quetiapine
Remeron
Reserpine
Restoril
Risperdal
Risperidone
Ritalin
Secobarbital
Seconal
Serax
Serentil
Seroquel
Sertraline
Serzone
Sinequan
Sodium Pentobarbital
Sodium Valproate
Sonata
Stelazine
Surmontil
Symmetrel
Taractan
Tegretol
Temazepam
Thioridazine
Thiothixene
Thorazine
Tindal
Tofranil
Tranxene

Tranylcypromine
Trazodone
Triavil
Triazolam
Trifluoperazine
Triflupromazine
Trihexyphenidyl
Trilafon
Trimipramine
Valium
Valproate
Valproic Acid
Venlafaxine
Versed
Vesprin
Vistaril
Vivactil
Wellbutrin
Xanax
Zaleplon
Zoloft
Zolpidem
Zyban
Zyprexa

WHAT PROBLEMS DID YOU TAKE THE MEDICINE FOR?

I. Mood

- Sadness/ depression/ crying
- Manic mood
- Anger or irritability
- Nerves/ anxiety
- Panic
- Suicidal thoughts

II. Physical symptoms

- Low energy
- Poor appetite
- Poor sleep
- Physical pain

III. Cognitive symptoms

- Poor concentration
- Poor memory

IV. Role functioning

- Little or no sexual functioning
- Marital problems
- Not getting along with others
- Poor work performance

V. Other

- Alcohol/ drug problems
- Other (specify)

WHICH OF THESE ARE REASONS WHY YOU STOPPED TAKING THE MEDICINE?

- The medicine was not helping
- You thought the problem would get better without more medicine
- You couldn't afford to pay for the medicine
- You were too embarrassed to continue taking the medicine
- You wanted to solve the problem without medications
- The medicine caused side-effects that made you stop
- You were afraid that you would get dependent on the medication
- Someone in your personal life pressured you to stop
- Any other reason for stopping

***DID YOU EVER HAVE ANY OF THESE STRESSFUL EXPERIENCES?
(CHECK OFF "YES" RESPONSES IN BOXES Ö)***

GROUP 1: Traumatic Personal Experiences

- q Combat experience
- q Relief worker in war zone
- q Civilian in war zone
- q Civilian in region of terror
- q Refugee
- q Kidnapped
- q Toxic chemical exposure
- q Automobile accident

- q Other life-threatening accident
- q Natural disaster
- q Man-made disaster
- q Life-threatening illness

GROUP 2: Personal Violence

- q Beaten up as a child by caregiver
- q Beaten up by a spouse or romantic partner
- q Beaten up by someone else
- q Mugged or threatened with a weapon
- q Raped
- q Sexually assaulted
- q Stalked

GROUP 3: Events Affecting Others

- q Unexpected death of a loved one
- q Child's serious illness
- q Traumatic event to loved one
- q Witnessed serious physical fights at home
- q Witnessed death or dead body or saw someone seriously hurt
- q Accidentally caused serious injury or death
- q Purposely injured, tortured, or killed someone
- q Saw atrocities
- q Any other traumatic or life-threatening event

DID YOU HAVE ANY OF THESE REACTIONS?
 (CHECK OFF "YES" RESPONSES IN BOXES Ö)

GROUP 1: Traumatic Personal Experiences

- q Trying not to think about it
- q Staying away from reminders of it
- q Being unable to remember parts of it
- q Losing interest in things you used to enjoy
- q Feeling emotionally distant from other people
- q Trouble feeling normal feelings
- q Feeling you have no reason to plan for the future

GROUP 2: Personal Violence

- q Unwanted memories
- q Unpleasant dreams
- q Flashbacks
- q Getting very upset when reminded of it
- q Physical reactions

GROUP 3: Events Affecting Others

- q Sleep problems
- q Irritability
- q Trouble concentrating
- q Being more alert or watchful
- q Being jumpy or easily startled

WHICH CONDITIONS RESULTED FROM THAT INJURY?

1. Broken or dislocated bones
2. Sprain, strain, or pulled muscle
3. Cuts, scrapes, or puncture wounds
4. Head injury, concussion
5. Bruise, contusion, or internal bleeding
6. Burn, scald
7. Poisoning from chemicals, medicines, or drugs
8. Respiratory problem such as breathing, cough, pneumonia

WHERE DID THE INJURY OCCUR?

1. Your home or yard
2. Someone else's home or yard
3. School (including playground)
4. Workplace
5. Traveling to or from work or as part of work
6. Street or highway (not traveling for work)
7. Public space (e.g., Sidewalk) or building
8. Farm or agricultural area

9. Place of recreation or sports (except at school)

WHO DID THIS TO YOU?

Circle all that apply

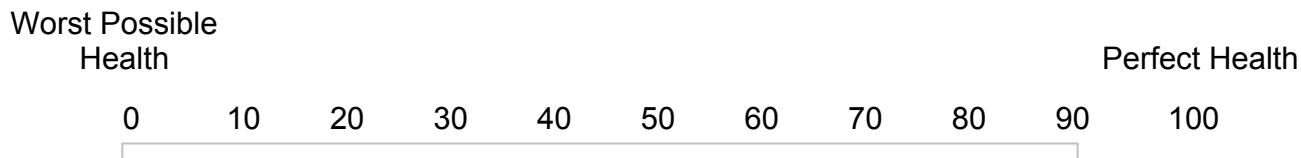
1. Spouse or romantic partner
2. Parent or guardian
3. Step-relative
4. Other relative
5. Someone else you knew
6. A stranger

7. WHAT NUMBER BEST DESCRIBES YOUR PAIN?



- None
- Mild difficulty
- Moderate difficulty
- Severe difficulty

HEALTH RATING SCALE



HOW OFTEN DID YOU HAVE THE FOLLOWING FEELINGS IN THE PAST 30 DAYS?

- All the time
- Most of the time
- Some of the time
- A little of the time
- None of the time

- Often
- Sometimes
- Rarely
- Never

DID YOU EVER TAKE ANY OF THESE MEDICATIONS?

Acetophenazine	Perphenazine
Centrax	Pimozide
Chlorpromazine	Prazepam
Clorprothixene	Prolixin
Clozapine	Quetiapine
Clozaril	Risperdal
Droperidol	

	Risperidone
Fluphenazine	Serentil
Haldol	Seroquel
Haloperidol	Stelazine
Inapsine	Taractan
Loxapine	Thioridazine
Loxitane	Thiothixene
Mellaril	Thorazine
Mesoridazine	Tindal
Moban	Trifluoperazine
Molindone	Triflupromazine
Navane	Trilafon
Olanzapine	Vesprin
Orap	Zyprexa
Permitil	

HOW MANY TIMES DID YOU EVER MAKE A BET OF ANY KIND?

- Never
- 1-10 Times
- 11-50 Times
- 51-100 Times
- 101-500 Times
- 501-1000 Times
- More Than 1000

HOW MANY TIMES IN YOUR LIFE DID YOU EVER BET ON EACH OF THE FOLLOWING?

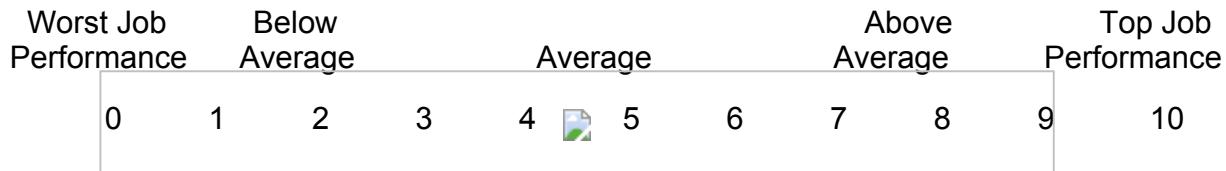
- Never
- 1-10 Times

- 11-100 Times
- 101-500 Times
- More than 500 Times

HOW OFTEN DID YOU HAVE THESE EXPERIENCES IN THE PAST 30 DAYS?

- All of the time
- Most of the time
- About half of the time
- Some of the time
- A little of the time
- None of the time

WHAT NUMBER BEST DESCRIBES YOUR OVERALL JOB PERFORMANCE?



WHICH LETTER REPRESENTS YOUR INCOME OR EARNINGS IN THE PAST 12 MONTHS FROM EACH OF THE FOLLOWING SOURCES?

A.	Less than \$0 (Loss)	S.	\$16,000 - \$16,999
B.	\$0 (none)	T.	\$17,000 - \$17,999
C.	\$1 - \$999	U.	\$18,000 - \$18,999
D.	\$1,000 - \$1,999	V.	\$19,000 - \$19,999
E.	\$2,000 - \$2,999	W.	\$20,000 - \$24,999
F.	\$3,000 - \$3,999	X.	\$25,000 - \$29,999
G.	\$4,000 - \$4,999	Y.	\$30,000 - \$34,999
H.	\$5,000 - \$5,999	Z.	\$35,000 - \$39,999

I.	\$6,000 - \$6,999	AA.	\$40,000 - \$44,999
J.	\$7,000 - \$7,999	BB.	\$45,000 - \$49,999
K.	\$8,000 - \$8,999	CC.	\$50,000 - \$74,999
L.	\$9,000 - \$9,999	DD.	\$75,000 - \$99,999
M.	\$10,000 - \$10,999	EE.	\$100,000 - \$149,000
N.	\$11,000 - \$11,999	FF.	\$150,000 - \$199,999
O.	\$12,000 - \$12,999	GG.	\$200,000 - \$299,999
P.	\$13,000 - \$13,999	HH.	\$300,000 - \$499,999
Q.	\$14,000 - \$14,999	II.	\$500,000 - \$999,999
R.	\$15,000 - \$15,999	JJ.	\$1,000,000 or more

LIST A

- Pushed, grabbed or shoved
- Threw something
- Slapped or hit

LIST A

- Pushed, grabbed or shoved
- Threw something
- Slapped, hit, or spanked

LIST B

- Kicked, bit or hit
- Beat up
- Choked
- Burned or scalded
- Threatened with

LIST B

- Kicked, bit or hit with a fist
- Beat up
- Choked
- Burned or scalded

- Threatened with a knife or gun

WHICH OF THE FOLLOWING BEST DESCRIBES YOUR SEXUAL ORIENTATION?

- A. Heterosexual – Primarily attracted to members of the opposite sex
- B. Homosexual – Primarily attracted to members of your own sex
- C. Bisexual – Attracted to both men and women

DURING THE PAST 12 MONTHS, HOW OFTEN DID YOU OR YOUR SEXUAL PARTNERS WEAR A CONDOM (“RUBBER”) WHILE HAVING SEX?

- Always
- Most of the time
- Sometimes
- Rarely
- Never

WHAT ARE YOUR MAIN ETHNIC ORIGINS?

North and Central America 1. Belize 2. Canada 3. Costa Rica 4. El Salvador 5. Guatemala 6. Honduras 7. Mexico 8. Nicaragua 9. Panama 10. United States	49. Gambia 40. Gabon 41. Ghana 42. Guinea 43. Guinea Bissau 44. Kenya 45. Lesotho 46. Liberia 47. Libya 48. Madagascar 49. Gambia 50. Mali 51. Malawi 52. Mauritania 53. Morocco 54. Mozambique	82. Cyprus 83. Czech Republic 84. Denmark 85. Estonia 86. England 87. Finland 88. France 89. Germany 90. Gibraltar 91. Greece 92. Greenland 93. Hungary 94. Iceland 95. Ireland 96. Italy 97. Latvia
South America 11. Argentina 12. Bolivia		

13. Brazil	55. Namibia	98. Lithuania
14. Chile	56. Niger	99. Luxembourg
15. Colombia	57. Nigeria	100. Monaco
16. Ecuador	58. Rep. Of The Congo	101. Macedonia
17. Falkland Islands	59. Reunion	102. Netherlands
18. Guyana	60. Rwanda	103. New Caledonia
19. Paraguay	61. Senegal	104. Norway
20. Peru	62. Sierra Leone	105. Poland
21. Suriname	63. Somalia	106. Portugal
22. Uruguay	64. South Africa	107. Romania
23. Venezuela	65. Sudan	108. Serbia
Africa	66. Swaziland	109. Scotland
24. Algeria	67. Tanzania	110. Slovakia
25. Angola	68. Togo	111. Slovenia
26. Benin	69. Tunisia	112. Spain
27. Botswana	70. Uganda	113. Sweden
28. Burkina Faso	71. Western Sahara	114. Switzerland
29. Cameroon	72. Zambia	115. Turkey
30. Central African Republic	73. Zimbabwe	116. Montenegro
31. Chad	74. Sao Tome And Principe	117. M Alta
32. Congo	75. Wallis And Futuna	118. Isle Of Man
33. Comoros	Europe	119. Andorra
34. Djibouti	76. Albania	120. Faroe Island
35. Ivory Coast	77. Austria	121. Liechtenstein
36. Egypt	78. Belgium	Asia
37. Equatorial Guinea	79. Bosnia And Herzegovina	122. Afghanistan
38. Eritrea	80. Bulgaria	123. Bangladesh
39. Ethiopia	81. Croatia	124. Bhutan

125. Brunei	166. Lebanon	209. Marshall Islands
126. Burma/ Myanmar	167. Oman	210. Mayotte
127. Cambodia	168. Qatar	211. Micronesia
128. China	169. Saudi Arabia	212. New Caledonia
129. Federated States Of Micronesia	170. Syria	213. New Zealand
130. Guam	171. United Arab Emirates	214. Palau
131. Hong Kong	172. West Bank	215. Papua New Guinea
132. India	173. Yemen	216. Samoa Islands
133. Indonesia	174. Bahrain	217. San Marino
134. Japan	Islands	218. Seychelles
135. Laos	175. Anguilla	219. Solomon Islands
136. Malaysia	176. Antigua And Barbuda	220. Tonga
137. Mongolia	177. Aruba	221. Tuvalu
138. Nepal	178. Barbados	222. Vanuatu
139. North Korea	179. Cayman Islands	
140. Pakistan	180. Cuba	
141. Philippines	181. Dominica	
142. Singapore	182. Dominican Republic	
143. South Korea	183. Grenada	
144. Sri Lanka	184. Haiti	
145. Taiwan	185. Jamaica	
146. Thailand	186. Marie Galante	

147. Vietnam

**Commonwealth of
Independent States (RUSSIA)**

148. Armenia

149. Azerbaijan

150. Belarus

151. Georgia

152. Kazakhstan

153. Kyrgyzstan

154. Moldova

155. Russia

156. Tajikistan

157. Turkmenistan

158. Ukraine

159. Uzbekistan

187. Martinique

188. Montserrat

189. Netherlands Antilles

190. Puerto Rico

191. St. BarthelemY

192. St. Kitts And Nevis

193. St. Lucia

194. St. Martin

195. St. Vincent And The
Grenadines

196. The Bahamas

197. Trinidad

198. Virgin Islands

(British)

199. Virgin Islands (U.S.)

200. American Samoa
Islands

201. Australia

202. Cape Verde

203. Cook Island

204. Fiji

205. French Polynesia

206. Jersey

207. Kiribati

208. Maldives

Middle East

160. Gaza Strip

161. Iran

162. Iraq

163. Israel

164. Jordan

165. Kuwait



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DID YOU EVER DO ANY OF THE THINGS ON THIS LIST?

- Pushed, grabbed or shoved
- Threw something
- Slapped, hit, or punched

INTERFERENCE SCALE



· Not at all

· A little

· Some

· A lot

· Extremely

· Not at all

· Mild

· Moderate

· Severe

· Very Severe

SC25a.

This question differs from SC25 in that it asks about a more serious type of irritability – one involving arguing, shouting, or hitting.

SC31.

Code NO if the R never attended school.

SC32.

“Childhood” refers to whatever R considers childhood. It may be the reference period, “between the ages of 5 and 7,” as stated in SC31, or R may consider childhood as adolescent or teen years. Any of these frames of reference is acceptable for this question.

SC33

All children do these things sometimes. It is important to emphasize “frequently” and to probe a response of “sometimes” by repeating the question and emphasizing the word “frequently.”

“Childhood” refers to whatever the R considers his or her childhood.

SC34.

“Childhood” refers to whatever the R considers his or her childhood.

SC35.

This question differs from SC34 in that it asks about experiences during adulthood.

D24a.

“This period” refers to the period of being (sad/and/discouraged /and/uninterested) and some other problems lasting (several days/two weeks) or longer.

D29a.

We are looking for a physiological cause of the depression, such as medication or alcohol causing depression. An example of physical illness causing depression would be thyroid disease (code “YES”). If

illness or injury to the R result in the R's feeling sad or discouraged because, for example, s/he had to stay in the hospital, or an injury prevents him or her from carrying out their usual activities, code "NO."

IR8m.

The intended harm could be psychological (e.g., embarrassing someone) rather than physical.

SP3a

By "faced with" we mean either being in the situation or thinking that you might have to be.

SP5a

By "faced with" we mean either being in the situation or thinking that you might have to be.

SP7a.

By “faced with” we mean either being in the situation or thinking that you might have to be.

SP9a.

By “faced with” we mean either being in the situation or thinking that you might have to be.

SP9g.

A “panic attack” is a sudden attack of fear or anxiety.

SP16.

If R says, “It depends which thing”, explain “whichever of the situations interfered with your life the most.”

SP18.

In this question, we mean two or more symptoms at the same time.

SO10.

A panic attack is a sudden attack of extreme fear or anxiety.

SO10a.

A panic attack is a sudden attack of extreme fear or anxiety.

AG4d.

A panic attack is a sudden attack of extreme fear or anxiety.

AG8a.

A panic attack is a sudden attack of extreme fear or anxiety.

SU3.

If the R volunteers “never,” code “LESS THAN ONCE A MONTH.”

SU88a.

“Opportunity to use” is defined as someone either offered R alcohol or drugs or R was present when others were using and R could have used if he/she wanted to. Do not include times when a health care provider offered free samples.

SR12.

Sessions lasting fewer than 30 minutes should be excluded. The goal here is to discriminate between a real therapy session and a professional merely giving a few encouraging words of support or just listening to the R’s mental health concerns.

SR13.

An informal recommendation to take medicine is not enough. The doctor must either write a prescription or give the medicine to the patient.

SR110.

Money spent by the R for the treatment of a child or spouse or someone else does not count. It needs to be treatment for the R. If the R volunteers that the money was spent on couples therapy or family therapy in which s/he was a participant, all this money should be counted.

PH1.

Oral contraceptives, if prescribed, are included in this question. If Rs say they were taking someone else's prescription medication, this counts.

PH15_01.

If R insinuates in this question that the medicine was prescribed by a doctor (even if it was another person's "recommendation," for example, the nurse practitioner), a code of 1 should be recorded so that exactly who wrote the prescription can be recorded in PH16.

PT2.

A peacekeeper is a person who works for an international organization, a government, or a military organization to supervise and enforce a truce between hostile groups.

PT7.

If R says that he/she thinks everyone is exposed to such substances because of pollution, global warming, destruction of the ozone layer, etc. These responses should be coded "NO".

If R is not sure if exposed, code "NO". "Yes" responses require the R to have been told by an official source that there was a definite exposure.

PT35.

Some Rs respond by saying that they think everyone is exposed to such substances because of pollution, global warming, destruction of the ozone layer, etc. These responses should be coded “NO”.

If R is not sure if exposed, code “NO”. “Yes” responses require the R to have been told by an official source that there was a definite exposure.

PT8.

“Involved” can include being a pedestrian or bicyclist who was partly responsible. However, code “NO” if the R was merely a witness, an observer, or a person who arrived after the accident and provided assistance.

PT36.

“Involved” can include being a pedestrian or bicyclist who was partly responsible. However, code “NO” if the R was merely a witness, an observer, or a person who arrived after the accident and provided assistance.

PT10.

“Involved” can include being present at the time of the disaster even if the R was not injured. However, code “NO” if the R was merely an observer or relief worker who arrived after the disaster. These experiences will be coded elsewhere.

PT18.

Sexually molested means that a stranger, or someone you knew, including family members and friends, touched the sexual parts of your body or forced you to touch the sexual parts of their body – against your will or without your consent.

PT46.

Sexually molested means that a stranger, or someone you knew, including family members and friends, touched the sexual parts of your body or forced you to touch the sexual parts of their body – against your will or without your consent.

PT20.

Unexpected death does not include situations such as an elderly person dying or a person with a known heart condition suddenly experiencing a fatal heart attack.

PT22.

The examples are intended to provide a context to help the R define “extremely traumatic.” If the R asks whether a particular event counts, the rule should be to tell the R that anything that s/he considers extremely traumatic counts.

PT24.

This question is asking about specific incidents. Broad philosophical responses, for example, a response such as “my failure to donate money to charity probably means poor children are starving to death somewhere” should be coded “NO”.

PT48.

Unexpected death does not include situations such as an elderly person dying or a person with a known heart condition suddenly experiencing a fatal heart attack.

PT50.

The examples are intended to provide a context to help the R define “extremely traumatic.” If the R asks whether a particular event counts, the rule should be to tell the R that anything that s/he considers

extremely traumatic counts.

PT52.

This question is asking about specific incidents. Broad philosophical responses, for example, a response such as “my failure to donate money to charity probably means poor children are starving to death somewhere” should be coded “NO”.

PT30.

Some of the traumatic events asked about here overlap. It is consequently important to include the parenthetical phrase “other than what you have already told me about” in cases where previous events have been reported.

If reports are given of events previously mentioned, code “NO.” Code as a separate event if events occupy distinct periods of time, even if there is some overlap of the time periods.

PT38.

“Involved” can include being present at the time of the disaster even if the R was not injured. However, code “NO” if the R was merely an observer or relief worker who arrived after the disaster. These experiences will be coded elsewhere.

PT39.

If the R mentions toxic chemical exposure, do not record here. It should be recorded in PT35.

PT55a.

Take care to have the R report NEW events here, not to elaborate on events already reported.

PT55c.

If the event occurred to the R, ask how old the R was when the event happened. An exception is when the event only becomes traumatic at a later date. An example is the discovery, when the R is 40 years of age, that everyone in the town where the R grew up was exposed to potentially fatal toxic chemicals in the lake where they all swam. In an instance of this sort, ask how old the R was when s/he first learned that the water was contaminated.

Events indicating trauma that occurred to others (e.g., learning that one's daughter was raped) should always be dated from the time the R first learned about the events.

PT62_intro1

This question contains many distinct concepts that are important to the question. If the R has difficulty answering, repeat the question, being sure to read it slowly.

PT62_intro2

This question contains many distinct concepts that are important to the question. If the R has difficulty answering, repeat the question, being sure to read it slowly.

PT62_intro3

This question contains many distinct concepts that are important to the question. If the R has difficulty answering, repeat the question, being sure to read it slowly.

PT62_intro4

This question contains many distinct concepts that are important to the question. If the R has difficulty answering, repeat the question, being sure to read it slowly.

PT64a.

Review the list of events R endorsed or repeat the list of PTSD reactions from PT62. The “worst event” is recorded, as well as the R's age at the time, and which occurrence it was. If the R doesn't know which event caused the most problems, the most recent event is selected.

When the R has two or more events that caused problems, and no one event caused more problems than others, we want the R to tell us about the most recent of the events that caused the largest number of problems. That is why we use the phrase “of these very upsetting events” when probing following a “don't know” response.

PT64b.

Review the list of events the R endorsed or repeat the list of PTSD reactions from PT62. The “worst event” is recorded, as well as the R's age at the time, and which occurrence it was. If the R doesn't know which event caused the most problems, the most recent event is selected.

When the R has two or more events that caused problems, and no one event caused more problems than others, we want the R to tell us about the most recent of the events that caused the largest number of problems. That is why we use the phrase “of these very upsetting events” when probing following a “don't know” response.

If R was unconscious due to a head injury, the amnesia does not count here. If the R volunteers that s/he was “knocked out” or unconscious, code “NO”.

PT118.

If the R wants to discuss a different event (e.g., one with more significance), say, “For this study, we ask all of our Rs about one totally random event. It is often not the event our Rs might have chosen to tell us more about. But it's very important that we follow this standard procedure in all of our interviews. Thank you for telling me that this was not your most upsetting event. I will make a note of that.”

PT125a.

Only record the number of people of a type, if volunteered by the R. Do not probe to obtain information on the number of people of a type.

PT126.

The death asked about in this question should be associated with the event. If the R was a refugee, and an 89 year old grandmother back at home died of a heart attack, code “NO”.

PT126a.

Only record the number of people of a type, if volunteered by the R. Do not probe to obtain information on the number of people of a type.

PT127a.

Only record the number of people of a type, if volunteered by the R. Do not probe to obtain information on the number of people of a type.

PT129a.

If the R was a refugee, record the country s/he fled from, not the country where s/he obtained asylum.

PT148a.

Only record the number of people of a type, if volunteered by the R. Do not probe to obtain information on the number of people of a type.

PT149a.

Only record the number of people of a type, if volunteered by the R. Do not probe to obtain information on the number of people of a type.

PT156a.

Only record the number of people of a type, if volunteered by the R. Do not probe to obtain information on the number of people of a type.

PT157a.

Only record the number of people of a type, if volunteered by the R. Do not probe to obtain information on the number of people of a type.

PT158a.

Only record the number of people of a type, if volunteered by the R. Do not probe to obtain information on the number of people of a type.

PT269.

If the R's event is "some other event," it is best to use the R's description of the event, rather than the phrase "some other event" when reading this question.

CC1c.

If R says "migraines" the code should be 'yes'.

CC1e.

If R mentions any allergies the code should be 'yes'.

CC1l.

COPD stands for Chronic Obstructive Pulmonary Disease.

CC1m.

Other parasitic diseases may include Hydatid disease, Diphyllobothriasis, Chagas disease, Ascariasis.

CC1r.

HIV stands for Human Immuno-Deficiency Virus. AIDS stands for Acquired Immuno-Deficiency Syndrome.

CC9.

If the R says that this is not the condition s/he would like to talk about the interviewer can say "For this study we ask all of our Rs about one totally random chosen condition. It may not be the condition you would choose to tell us about, but it's very important that we follow this standard procedure in all our interviews. Thank you for telling me that this is not the condition you are most concerned about, I will

make a note of that."

CC15a.

If the time period is more than 1 day the interviewer should convert the headache duration to hours (i.e., 3 days=72 hours).

NSD4g.

This question is referring to hearing things that others around the R cannot hear.

EA1.

This question is about the R's self-image, regardless of actual weight. Concern about being too thin/skinny or not having muscles does not count. R must be concerned about being overweight, including concerns about only part of one's body, such as having fat hips.

EA2.

“Purposefully” means that we do not want to count loss of weight due to illness. Note that the unit of measurement is recorded in the following item.

EA6.

This question is intended to capture fear of weight gain, despite the R’s being thin, and regardless of whether or not the R actually did gain any weight.

EA9.

The missed menstrual periods must have occurred around the time that the R was losing weight or was at the low weight. Do not count periods missed at other times.

PR5a.

If more than one such operation, ask for the age at the first operation.

PR6.

If stopped, but she does not know if it will be permanent, code stopped temporarily.

PR13.

Count as ‘YES’ if the R volunteers that symptoms were experienced during the first day(s) of her periods.

PR14.

The R may volunteer that she didn’t have a period every month. That is fine and she should still answer the question as it’s written.

PR16.

This question is intended to measure how much of the week prior to her period the R is affected by the change in her mood.

O1a.

If the R volunteers that this concern occurred only at times when there was objective danger of contamination – such as during a famine – the response should be coded “NO”.

O1h.

We are looking here for unrealistic worries in the absence of evidence. If the R volunteers that there was a period of concern associated with an objective danger (e.g., worry about developing cancer among a citizen of Kiev after the Chernobyl nuclear accident), the response should be coded “NO”. Similarly, if there was an actual illness that he/she learned about from a doctor prior to the time it caused any symptoms, the response should be coded “NO”.

O7.

We are interested in determining how much of the total time R spent with obsessions (unpleasant thoughts) and how much was spent carrying out behaviors related to the obsessions (compulsive behaviors). Some people with these problems spend all their time with the unpleasant thoughts and very little time carrying out behaviors intended to control the thoughts. Other people, in comparison, spend all their time carrying out obsessive behaviors to prevent the thoughts from occurring and consequently have the thoughts in their mind only a small amount of the time. This is an important distinction for our purposes, so clarify the question if the R expresses confusion.

O8.

We are interested in determining how much of the total time the R spent with obsessions (unpleasant thoughts) and how much was spent carrying out behaviors related to the obsessions (compulsive behaviors). Some people with these problems spend all their time with the unpleasant thoughts and very little time carrying out behaviors intended to control the thoughts. Other people, in comparison, spend all their time carrying out obsessive behaviors to prevent the thoughts from occurring and consequently have the thoughts in their mind only a small amount of the time. This is an important distinction for our purposes, so clarify the question if the R expresses confusion.

O11.

This Q is only about the thoughts, images, and impulses. They are not about the behaviors associated with these thoughts, images, and impulses.

O12.

This Q is only about the thoughts, images, and impulses. They are not about the behaviors associated with these thoughts, images, and impulses.

O13.

This Q is only about the thoughts, images, and impulses. They are not about the behaviors associated with these thoughts, images, and impulses.

O14.

This Q is only about the thoughts, images, and impulses. They are not about the behaviors associated with these thoughts, images, and impulses.

O15.

This Q is only about the thoughts, images, and impulses. They are not about the behaviors associated with these thoughts, images, and impulses.

O16.

Most days means more than half the days.

O17a.

This Q is only about the thoughts, images, and impulses. They are not about the behaviors associated with these thoughts, images, and impulses.

O18.

This Q is only about the thoughts, images, and impulses. They are not about the behaviors associated with these thoughts, images, and impulses.

O19.

This Q is only about the thoughts, images, and impulses. They are not about the behaviors associated with these thoughts, images, and impulses.

O20.

This Q is only about the thoughts, images, and impulses. They are not about the behaviors associated with these thoughts, images, and impulses.

O22.

This Q is only about the compulsive behaviors. It is not about the thoughts, images, and impulses that cause these behaviors.

O28.

Most days means more than half the days.

PS1a.

Note that visions seen or voices heard during dreams or half-asleep or under the influence of alcohol or drugs are excluded. If R volunteers that visions were seen or voices were heard exclusively while having a high fever, code "NO". During periods of grieving, following the death of someone close, an individual may see a brief vision of the deceased. If the R only reports this type of vision, code "NO".

PS1c.

If R gives a metaphorical response to this question, such as, "My husband is a very dominating man who tries to control my thoughts," code "NO".

PS1d.

If R gives a metaphorical response to this question, such as, "My husband is a very dominating man who tries to control my thoughts," code "NO".

PS1f.

If the R volunteers the description of a plausible story in which an actual plot occurred, code "NO". If you are in doubt as to the plausibility, code "YES".

PS9.

Hospitalized means hospitalized overnight.

EM4a.

Do not include time when the R was a full-time student or retired.

EM8.

“Temporarily laid off” means the R is not working because his or her place of work has temporarily reduced the need for workers, even though the R could be called back to work at some time in the future. Temporary lay-off is common in seasonal jobs like in the construction industry and in assembly line jobs where periodic retooling leads to lay-offs.

EM15.

The R’s main job is the job at which s/he spends the most time. S/he will be asked to respond to this question in light of his or her current job, not usual or regular job (if different).

EM16.

Do not ask for the company name where the R works, but ask what kind of place it is that s/he works for, whether the place is a manufacturing or a sales enterprise and what kind of product or service is manufactured or sold.

EM17.

We need number of hours that the R worked, not the number s/he got paid for. Also, emphasize average week.

EM19.

The R's main job is the job at which s/he spent the most time. S/he will be asked to respond to this question in light of their last job, not usual or regular job (if different).

EM20.

Do not ask for the company name where the R worked, but ask what kind of place it is that s/he worked

for, whether the place is a manufacturing or a sales enterprise and what kind of product or service is manufactured or sold.

SE7.

The R's spouse's main job is the job at which s/he spent the most time.

SE8.

Do not ask for the company name where the R's spouse/partner worked, but ask what kind of place it is that s/he worked for, whether the place is a manufacturing or a sales enterprise and what kind of product or service is manufactured or sold.

SE9.

The R's spouse's main job is the job at which s/he spends the most time.

SE10.

Do not ask for the company name where the R's spouse/partner works, but ask what kind of place it is that s/he works for, whether the place is a manufacturing or a sales enterprise and what kind of product or service is manufactured or sold.

FN5.

If there was more than one spouse or partner during the past 12 months, use the earnings income of the most recent spouse or partner.

FN7.

Include any family members who lived with the R even part of the year.

MR1_2.

Dating does not have to include sexual activity.

M5.

Doing any one of these things even once counts.

M6.

Being the recipient of any one of these things even once counts.

M7a.

Doing any one of these things even once counts.

M8.

Being the recipient of any one of these things even once counts.

MR10_2.

Doing any one of these things even once counts.

MR11.

Being the recipient of any one of these things even once counts.

MR12.

Doing any one of these things even once counts.

MR13.

Being the recipient of any one of these things even once counts.

CN1.

Children who died should not be counted.

CN2.

This question includes every person the R supported or helped raise whether or not the person lived with the R.

SN1.

If the R's spouse lives elsewhere because of being in the armed forces, prison, etc., speaking with the spouse counts.

SN2.

If the R answers ‘it depends on the friend’ stress ‘any of your friends’.

DE7

The definition of “when/while growing up” is whatever it means to the R.

DE8.

The definition of “when/while growing up” is whatever it means to the R.

DE20.

Translating the amount of education (for example, the R says s/he finished high school) into years of school is acceptable. However, if the R finished his or her education in another country, it is important to probe for how many years of school were completed as the years of education vary among countries.

CH8.

If the R says there was more than 1 male head of household before s/he was 17, emphasize ‘most of the time before you were 17’.

CH9.

Self-employment and farming counts as working for pay.

CH11.

The R’s father’s main job is the job at which he spent the most time.

CH12.

Do not ask for the company name where the R’s father worked, but ask what kind of place it is that they worked for, whether the place is a manufacturing or a sales enterprise and what kind of product or service was manufactured or sold.

CH13.

If the R says there was more than 1 female head of household before s/he was 17, emphasize ‘most of the time before you were 17’.

CH16.

The R’s mother’s main job is the job at which she spent the most time.

CH17.

Do not ask for the company name where the R’s mother worked, but ask what kind of place it is that she worked for, whether the place is a manufacturing or a sales enterprise and what kind of product or service was manufactured or sold.

CH19.

ADC stands for Aid to Dependent Children.

CH38.

If there was more than 1 mother figure emphasize ‘most time’.

CH52.

‘Problem’ is whatever it means to the R, it does not require a professional diagnosis.

CH68.

If there was more than 1 father figure emphasize ‘most time’.

CH82.

‘Problem’ is whatever it means to the R, it does not require a professional diagnosis.

AD1b.

Code ‘yes’ even if the R says that the things s/he didn’t pay attention to or did inaccurately really weren’t important.

AD1f.

This refers to subtle disturbances like other peoples’ conversations or people walking or working quietly in the vicinity.

AD1g.

Examples would include doing homework, watching a television program or movie, doing an art project, writing a letter, or following verbal or written instructions.

AD30a.

Would you say you had this problem often during that period of 6 months or more?

AD30c.

This symptom refers to the almost limitless ability of these children to keep active. They often seem as though they were 'driven by a motor'.

AD30f.

Would you say you had this problem often during that period of 6 months or more?

AD30i.

Emphasize abruptly. This is not meant to include welcome or somewhat anticipated interruptions (as when a person enters a room and politely joins in a conversation).

OD1d.

Evading directions or procrastinating should be coded ‘YES’.

OD1f.

It doesn’t count if the R was truly taken advantage of. Record ‘yes’ if the R believes that his or her feelings were not reasonable given the situation.

OD1j.

It doesn’t count if the R was truly treated in an offensive way. Record ‘yes’ if the R believes that his or her feelings were not reasonable given the situation.

OD1k.

This doesn't include being annoyed by younger siblings or being nagged by parents or teachers. It should be a reaction felt to others on a more universal level.

CD32.

Informal, e.g. getting kicked out of class, and formal measures should be included here.

CD39b1.

“Altogether” means that the R should add up all the separate times.

SA1b.

If the R reports that the person was injured and s/he worried about them, code ‘NO’. We want to know if the R worried when there was no reason to worry.

SA1h.

We are asking about actual symptoms here. If the R reports lying about having symptoms in an attempt to prevent the parent from going out, code “NO”.

SA1i.

“Near you” means in the same room.

SA11d.

If the person did leave and the R worried only after that, code “NO”.

FB2Intr1.

Step-parents count here. Note that the R can have more than two living parents due to the fact that step-parents are counted. In-laws do not count.

FB6a.

Ex-spouses do not count here. There can be multiple people in each response category other than the SPOUSE/ PARTNER category. Check the category if one or more persons in that category are reported to have the illness. No distinction is made between one and more than one person in a category.

FB6b.

Ex-spouses do not count here. There can be multiple people in each response category other than the SPOUSE/ PARTNER category. Check the category if one or more persons in that category are reported to have the illness. No distinction is made between one and more than one person in a category.

FB6c.

Alzheimer's would be included here.

FB6d.

Ex-spouses do not count here. There can be multiple people in each response category other than the SPOUSE/ PARTNER category. Check the category if one or more persons in that category are reported to have the illness. No distinction is made between one and more than one person in a category.

FB6e.

Ex-spouses do not count here. There can be multiple people in each response category other than the SPOUSE/ PARTNER category. Check the category if one or more persons in that category are reported to have the illness. No distinction is made between one and more than one person in a category.

FB6f.

Includes heart disease, asthma, cancer, etc.

FB6g.

Ex-spouses do not count here. There can be multiple people in each response category other than the SPOUSE/ PARTNER category. Check the category if one or more persons in that category are reported to have the illness. No distinction is made between one and more than one person in a category.

FB6h.

Ex-spouses do not count here. There can be multiple people in each response category other than the SPOUSE/ PARTNER category. Check the category if one or more persons in that category are reported to have the illness. No distinction is made between one and more than one person in a category.

FB6i.

Ex-spouses do not count here. There can be multiple people in each response category other than the SPOUSE/ PARTNER category. Check the category if one or more persons in that category are reported to have the illness. No distinction is made between one and more than one person in a category.

FB6j.

Ex-spouses do not count here. There can be multiple people in each response category other than the SPOUSE/ PARTNER category. Check the category if one or more persons in that category are reported to have the illness. No distinction is made between one and more than one person in a category.

FB6k.

Ex-spouses do not count here. There can be multiple people in each response category other than the SPOUSE/ PARTNER category. Check the category if one or more persons in that category are reported to have the illness. No distinction is made between one and more than one person in a category.

FB6l.

Ex-spouses do not count here. There can be multiple people in each response category other than the SPOUSE/ PARTNER category. Check the category if one or more persons in that category are reported to have the illness. No distinction is made between one and more than one person in a category.

FB15a.

The estimated cost should include both



Collaborative Psychiatric Epidemiology Surveys

NSAL



Collaborative Psychiatric Epidemiology Surveys

NSAL Adult Concepts and Measures (Main & SAQ)

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NSAL ADULT CONCEPTS AND MEASURES (MAIN & SAQ)

<u>Page Number</u>	<u>Question Number</u>	<u>Construct</u>	<u>Question Source</u>
NEIGHBORHOOD			
1	A2	Contact with Neighbors	NSBA I
1; 3 SAQ	A3-A4; A8h-j	Neighborhood Safety	NSBA I; ADDHEALTH & UNOCAP modified
2	A5-A5a	Neighborhood Participation	NSBA I
2	A6	Proximity to Resources	Baltimore Health Study; DAS 1996
2 SAQ	A7b,c,i	Neighborhood Domains Satisfaction	
3 SAQ	A8a-g	Cohesion and Trust	Human Development in Chicago Neighborhoods; Sampson et al., 1997; ADDHEALTH&UNOCAP modified
3-4 SAQ	A9-A11	Stability	Urban Poverty and Family Life Survey of Chicago, 1987
4 SAQ	A12	Problems With Dwelling	The OASIS Research Project, 2000 modified
RELIGION			
3	B1	Religion/Denomination	NSBA I
3-4; 4 SAQ	B2-B7; B21-B23	Organizational Religious Participation	NSBA
6	B16	Non-Organizational/Private Religious Participation	NSBA
6	B17	Importance of Religion	NSBA I (a-b); NBES (c)
7	B18	Overall Religiosity	NSBA
7	B19	Overall Spirituality	Fetzer, 1999 adapted
5 SAQ	B26	Religious Guidance	NSBA Panel
7	B20	Commitment Question	NCS-R
COGNITIVE FUNCTIONING			
8-11	CG50a-e	Digit Symbol	Weschler, 1981
12	CG50-CG61	Short Portable Mental Status Questionnaire (SPMSQ)	Pfeiffer, 1975
WELL-BEING			
1	A1	General Life Satisfaction	NSBA
2 SAQ	A7	Life Domains Satisfaction	NSBA; The OASIS Research Project, 2000
44	E25	Happiness	NSBA
PSYCHOLOGICAL RESOURCES			
13	C1a-j	Self-Esteem	Rosenberg, 1965
13	C1k-l	Hopelessness	Everson; DAS 1995
14	C2a-g	Mastery	Pearlin, 1989
14	C2h	Religious Coping	Fetzer, 1999
14	C3-C7	Goal Striving Stress	NSBA Panel
6 SAQ	C40	John Henryism	James, 1983
7 SAQ	C43	General Coping Strategies	Lazarus and Folkman, 1988
339	G21	Coping with Discrimination	YES Health; McNeilly et al, 1996 adapted & Krieger, 1990
PHYSICAL HEALTH AND HELP-SEEKING			
16	C8, C9	Self-Reported Physical Health	NSBA Panel
2 SAQ	A7a	Health Satisfaction	NSBA Panel
2 SAQ	A7e,f	Health Domains	
16	C8a	Self-Reported Dental Health	New
10-11 SAQ	C58	Oral Health Impact Profile Subset	University of Michigan Dental Health Study

Page Number	Question Number	Construct	Question Source
17-18	C10-C11	Lifetime Diagnosed Health Problems & Limitations	NSBA (a-m); New (n-v)
19	C12-C13	12 Months other Health Problems & Interference	NSBA
8 SAQ	C44-C45	Preventative Care	New
8 SAQ	C46	Isolated Sleep Paralysis	Community Mental Health Council, Chicago
9 SAQ	C47-C50	Sleep Quality	CARDIA study; DAS 1995
19	C14	Exercise	ACL
20	C15-C20	BMI: Height/Weight	DAS 1995
24-28; 10 SAQ	C29-C39; C56-C57	30-Day Impairment	WMH modified by NCS-R
20; 9 SAQ	C21-C21a, C51	Medical Help-Seeking	NSBA
21	C22	Alternative Health Help-Seeking	NSBA I
10 SAQ	C54-C55	Herbal and Home Remedies	NSBA
9 SAQ	C52-C53	Barriers to Medical Treatment	NSBA
21-22	C23-C26a	Health and Mental Health Insurance	HRS modified
11 SAQ	C59	Services Used for the Elderly	The OASIS Research Project, 2000

CURRENT AND PAST EMPLOYMENT AND WORKPLACE

29, 32-33	D1-D10; D21-D28	Occupation and Industry	NSBA I; NSBA II
29, 33	D6; D25	Hours worked	NSBA I; NSBA II
29	D7	Salary	NSBA I; NSBA II
30, 33; 13 SAQ	D9-D10;D27-D28;D41-D42	Job Satisfaction and Enjoyment	NSBA I; NSBA II; ACL
30-31, 33-34	D11a-D12; D29a-D30	Workplace Segmentation	NSBA I; NSBA II
31-32, 34-35	D14-D16; D32-D34	Supervisor and Workgroup Racial Composition	DAS 1995
32, 35-36	D17-D20; D35-D40	Employment Uncertainty	NSBA I; NSBA II
17 SAQ	D49-D54	Irregular Work	ACL
18 SAQ	D55-D58	Social Barter Work	ACL

SOCIAL RESOURCES AND INTERACTIONS

4	B8	Contact with Church Members	NSBA
4; 5 SAQ	B9-B11;B24-B25a-d,f-i	Church Tangible Support	NSBA; Fetzer adapted
4-5	B12-B13	Closeness to and Satisfaction with Church Members	NSBA
5; 5 SAQ	B14; B25e	Church Emotional Support	Fetzer
5	B15	Negative Interaction with Church Members	Fetzer adapted
37	E3	Contact with Family	NSBA
19 SAQ	E31	Family Proximity	NSBA
37; 19-20 SAQ	E1,E2,E4;E33,E34,E35b-e	Family Tangible Support	NSBA; Fetzer adapted
38; 2,19 SAQ	E4a-E5; A7d&j, E32	Closeness to and Satisfaction with Family	NSBA
38; 20 SAQ	E6; E35a	Family Emotional Support	Fetzer adapted
20 SAQ	E36	Family Provider Role	NSBA
38	E7	Negative Interaction with Family	Fetzer adapted
39	E8	Contact with Friends	NSBA
39; 18-19 SAQ	E9-E10; E26, E29	Friends Tangible Support	NSBA
39; 2,18-19 SAQ	E11; A7g-h,E27-E28	Closeness to and Satisfaction with Friends	NSBA
40	E12-E12a	Social System: Fictive Kin	NSBA I modified
42	E16	Main Romantic Involvement	NSBA
43	E19	Marital/Current Partner Satisfaction	NSFH; ACL
21 SAQ	E37a-c, E38a	Emotional Support from Spouse	NCS; Antonucci

Page Number	Question Number	Construct	Question Source
21 SAQ	E37d-e	Tangible Support from Spouse	NCS; Antonucci
21 SAQ	E38b-f	Negative Interaction with Spouse	Fetzer adapted
43-44	E20-E21	Step-Parent Relationships	Tolman/Wilson
22-26 SAQ	E40-E43,E47-E50,E54-E57	Consensual Solidarity with Children and Parents	The OASIS Research Project, 2000
23-24,26 SAQ	E44, E51, E58	Conflict With Children and Parents	The OASIS Research Project, 2000
23, 25 SAQ	E46, E53	Frequency of Contact with Parents	The OASIS Research Project, 2000
26 SAQ	E59-E62	Grandparent	New
VALUES AND ATTITUDES			
26-27 SAQ	E63	Care Responsibility for Elderly	The OASIS Research Project, 2000
27 SAQ	E64	Children's Duties to Parents	The OASIS Research Project, 2000
28 SAQ	E65	Financial Responsibility for Elderly	The OASIS Research Project, 2000
28 SAQ	E66	Responsibility for Future Personal Care	The OASIS Research Project, 2000
PSYCHIATRIC DISORDERS AND MENTAL HEALTH			
16	C8b	Self-Reported Mental Health	New
45-50	SC20-SC36	Screening Questions for Disorders	NCS-R
51-287	DP1- SA50b	<i>See Next Table for list of Mental Disorders</i>	NCS-R
167-175	PH1-PH20b	Pharmacoepidemiology	NCS-R
211; 7 SAQ whts	NSD1; C41	CES-D 12 items	NIMH, 1972; Radloff 1977; Roberts 1992
212; 8 SAQ whts	NSD2a-f; C42a-f	Six Item Serious Psychological Distress	NCHS; NCS, 1992
243-246	FH1-FH39	Family Mental Health History	Nesse/Weissman
MENTAL HEALTH SERVICES AND HELP-SEEKING			
various	various	Help for Specific Disorders	New
288-309	SR1-SR99	General Professional Services	NCS-R
309-311, 319-323	SR100-SR108, SR128-SR135	Alternative Treatment and Therapies	NCS-R
312-319	SR111-SR127a	Barriers to Treatment	NCS-R
324-325	F1-F6c	Personal Problem Identification	NSBA
326	F7	Informal Help Resources	NSBA
327-328	F8	Formal Help Resources	NSBA
329	F10	Barriers to Formal Help	NSBA
GROUP AND PERSONAL IDENTITY			
330	G1-G2	Group Identity	NSBA
29 SAQ	G24	Multidimensional Inventory of Black Identity modified (Centrality Scale, Private and Public Regard Scales)	Sellers, 1997
28 SAQ	G22	Being Black/Caribbean Awareness	Brown, T.
331	G3	Closeness to Racial/Ethnic Groups	NSBA
332	G4	Differential Closeness	NSBA
335	G11-G11a_wh	Common Fate	NSBA Panel
35-36 SAQ	H69	Exposure to Black Contexts	NSBA I
36-37 SAQ Carib	H70	Acculturation Rating Scale adapted (ARSMA-II)	Cuéllar, 1995
RACIAL DISCRIMINATION AND IDEOLOGY			
332-333	G5-G5_cb	Black/Caribbean Stereotypes	NSBA I
30 SAQ	G25	Individual Social Stereotypes	NSBA I

Page Number	Question Number	Construct	Question Source
333-334	G6-G6c_cb	Perceptions of Whites' Racial Group Intentions	NSBA
334-335	G7, G9, G10	Shade of Skin Color and Treatment	DAS 1995; Brown, K.
336-337	G12-G15	Major Experiences of Unfair treatment	YES Health; DAS 1995
338-339	G18-G20	Everyday Discrimination	DAS 1995
30 SAQ	G26	Black Autonomy	NSBA I
31 SAQ	G27a	Self and System Blame	NSBA modified
31 SAQ	G27b-d	Racial Ideology	DAS 1995
31 SAQ	G27e-f	Social Distance/Encroachment	Eurobarometer 30
31-32, 38 SAQ	G28, H77	Personal and Normative Social Distance (Pluralistic Ignorance)	DAS 1995; Eurobarometer 30
32 SAQ	G29-G30	Perceptions of Race Discrimination	NSBA I
32 SAQ	G31-G33	Interracial Contact	Eurobarometer 30
33 SAQ	G34-G35	Race Socialization	NSBA I
33-34 SAQ	G37	Stratification Beliefs:Egalitarianism, National Pride (b) Protestant Ethic, Authoritarianism, Social Dominance	DAS 1995; Eurobarometer 30
34 SAQ	G38	Feeling Thermometer (for 10 race/ethnic groups)	GSS; Eurobarometer 30
LIFE STRESSORS			
23	C27	Past Month Chronic Stress	NSBA
12 SAQ	C60	Negative Life Events	DAS 1995 modified
12 SAQ	C61	Difficult Life Situations	YES Health
351-352	TR1-TR4	September 11 Exposure	New
JOB STRESSORS			
31, 34	D13, D31	Workplace Discrimination	NSBA I; NSBA II
16 SAQ	D48	Chronic Job Discrimination	McNeilly et al, 1996 and Bobo & Suh, 2000 adapted
13 SAQ	D43	Role Conflict	Job Stress Survey, NIOSH
14 SAQ	D44	Intragroup Conflict	Job Stress Survey, NIOSH
14 SAQ	D45	Physical Environment	Job Stress Survey, NIOSH
15 SAQ	D46	Job Task and Decision Control	Job Stress Survey, NIOSH
15-16 SAQ	D47	Job Future Ambiguity	Job Stress Survey, NIOSH
FINANCIAL STRESSORS			
345	H18	Experiencing Material Hardship	CPS 1995 modified
353	H39-H40	Subjective Financial Assessment	NSBA; ACL
35 SAQ	H65-H67	Relative Deprivation	MacArthur SES Network
35 SAQ	H68	Subjective Social Class	Eurobarometer 30
353	H41	Food Insufficiency	Census Bureau CPS
353	H42	Financial Worries	NSBA
354	H42.5	Economic Assistance	NSBA Panel
354-355	H43-H46	Personal and Family Income	NSBA; DAS 1995
355-356	H49-H50a	Lifetime Welfare History	Danziger
40 SAQ	H84-H85	Precautionary Savings	New
40 SAQ	H86	Wealth – Assets	PSID 1999 modified
41 SAQ	H87	Debts	PSID 1999 modified
41 SAQ	H88-H89	Own Group-Out Group Relative Deprivation	NEW?

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POLITICS AND GOVERNMENT			
350	H35-H37	Liberal/Conservative Scales	DAS 1995
350	H38	Black Organization Group Participation	NSBA
36 SAQ	H72	Political Participation	NSBA
37 SAQ	H73-H74	Presidential Elections	NBES 1984
37 SAQ	H75	Party Preference	NSBA Panel modified
37-38 SAQ	H76	Economic, Political, and Social Ideology	Hutchings & Jackson
39 SAQ	H78-H79	Black Politics	NSBA I
DEMOGRAPHICS			
41-42	E13-E15a	Marital Status	NSBA; HRS
44; 21 SAQ	E22-E24.1; E39	Fertility: # of Children	NSBA; DAS
340	H1	Date of Birth	NSBA
340-342	H2-H6, H12	Early Life: Geography, Parents, and Health	NSBA and New
341-342	H7-H11b	Parents' Education and Employment	NSBA
343-344	H13-H17e	R's and Spouse's Education	NSBA I and NSBA II
343	H14	Military Service	NSBA
345-347	H19-H26	R's and Parents' Ethnicity and Race	ACL I modified; Census 2000 general race groups
43	E18	Spouse's Race	Census 2000 general race categories
348	H27	Parents' and Grandparents' Birthplace	New
357	H52-H56	Housing	NSBA; PSID modified
348-349	H28-H34	Immigration Status	New
37 SAQ Carib	H71	Years in US	New
360-361	J4-J5a	Birth Order	NSBA I
361	J6-J9	Three Generational Family Determination	NSBA I
TECHNOLOGY AND MEDIA			
360	J1a	Computer Ownership	New
360	J1-J3	Internet and E-Mail Access and Usage	New
42 SAQ	J11	Black/Caribbean Media Consumption	New
42 SAQ	J12	Negative Stereotypes in Media	New
OTHER			
39 SAQ	H80-H83	Knowledge of Saving Devices/Investment Options	New
358-359	H57-H61	Detention History	New
359	H62-H64	Non-Residential Household Members	New
INTERVIEWER OBSERVATIONS			
363	K1-KK6	Respondents' Attitudes and Behaviors	NSBA
363-364	K7-K10b	Interruptions	NSBA
365-366	K11-K16	Respondents' Difficulty with Interview	NSBA
366-367	K19	Interviewer's Assessment of Respondent	NSBA
367	K20	Household Conditions and Decorations	NSBA
367-368	K21-K22	Respondents' and Spouse's Shade of Skin Color	New
368	K26-K27	Respondents' Mental Health	NSBA modified



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NSAL Occupation ISCO-88 Code List

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A. Legislators, senior officials and managers

1. Legislators and senior officials (all members of state, regional or local legislatures)

(Code all members of national, state, regional, or local legislatures, or national, state, regional, or local government policy advisors, implementers, or representatives, or senior officials of special-interest organizations, here. Senior government officials who manage a government-controlled industrial, public utility, transport or other such business enterprise or organization, should be classified as corporate managers or managers, as appropriate)

Examples include:

- 1.1 Charity organization senior officials
- 1.2 Employers' organization senior officials
- 1.3 Environmental protection organization senior officials
- 1.4 Humanitarian organization senior officials
- 1.5 Political party leaders
- 1.6 Special-interest organization senior officials
- 1.7 Sports association senior officials
- 1.8 Trade and industry association leaders
- 1.9 Trade union leaders
- 1.10 Wild life protection organization senior officials

2. Corporate managers (organizations having 3+ managers or 11+ employees)

(Code corporate managers who manage enterprises and organizations having three or more managers, or eleven or more employees, or departments or sections of enterprises and organizations having three or more managers, or eleven or more employees, here.)

Examples include:

- 2.1 Chief executive officers
- 2.2 Deans
- 2.3 Managing directors of companies
- 2.4 Marketing department managers
- 2.5 Operations department managers
- 2.6 Personnel department managers
- 2.7 Presidents of companies
- 2.8 Production department managers
- 2.9 Sales department managers
- 2.10 Section managers

3. General managers (organizations having 1-2 managers or less than 11 employees)

(Code general managers and managers of small enterprises and organizations having only one or two managers, or ten or fewer employees, here.)

Examples include:

- 3.1 Managers in businesses in which there are not more than one other manager
- 3.2 Managers in businesses in which there are not more than ten employees
- 3.3 Small business managers

B. Professionals

4. Physical, mathematical and engineering science professionals (university degree required)

(Code physical, mathematical and engineering science professionals holding positions requiring a college or university degree in the physical, mathematical or engineering sciences, here.)

Examples include:

- 4.1 Architects
- 4.2 Chemists
- 4.3 Computer applications engineers
- 4.4 Computer programmers
- 4.5 Computer systems analysts
- 4.6 Engineering technologists
- 4.7 Engineers
- 4.8 General public service administrators
- 4.9 Mathematicians
- 4.10 Physicists
- 4.11 Statisticians

5. Life science and health professionals (university degree required)

(Code life science and health professionals holding positions requiring a college or university degree in the life or medical sciences, here.)

Examples include:

- 5.1 Agronomists
- 5.2 Biologists
- 5.3 Botanists
- 5.4 Chiropractors
- 5.5 Dentists
- 5.6 Medical doctors
- 5.7 Professional midwives
- 5.8 Pathologists
- 5.9 Pharmacists
- 5.10 Registered nurses
- 5.11 Veterinarians

6. Teaching professionals (university degree required)

(Code teaching professionals holding positions requiring a college or university degree in teaching or one or more other disciplines, here.)

Examples include:

- 6.1 College and university lecturers
- 6.2 College and university professors
- 6.3 College and university readers
- 6.4 Curricula developers
- 6.5 Pre-primary education teachers
- 6.6 Primary education teachers
- 6.7 Professional remedial teachers
- 6.8 Secondary education teachers
- 6.9 School inspectors
- 6.10 Special education teachers

7. Other professionals (university degree required)

(Code other professionals holding positions requiring a college or university degree in their field, here.)

Examples include:

- 7.1 Accountants
- 7.2 Artists (actors, ballet dancers, opera singers, commercial artists, etc.)
- 7.3 Journalists
- 7.4 Lawyers
- 7.5 Librarians
- 7.6 Ministers of religion (with an associates degree or higher)
- 7.7 Professional social workers (with an associate degree or higher)
- 7.8 Psychologists
- 7.9 Public service administrative professionals
- 7.10 Vocational guidance counselors

C. Technicians and associate professionals

8. Physical and engineering science associate professionals (some formal training required)

(Code physical and engineering science associate professionals who do not have a college or university degree in their field, but have completed a course of formal training, here.)

Examples include:

- 8.1 Aircraft pilots
- 8.2 Air traffic controllers
- 8.3 Building inspectors
- 8.4 Computer assistants
- 8.5 Computer equipment operators
- 8.6 Engineering technicians
- 8.7 Medical equipment operators
- 8.8 Photographers
- 8.9 Physical science technicians
- 8.10 Quality inspectors

9. Life science and health associate professionals (some formal training required)

(Code life science and health associate professionals who do not have a college or university degree in their field but have completed a course of formal training, here.)

Examples include:

- 9.1 Associate midwives
- 9.2 Dieticians
- 9.3 Faith healers
- 9.4 Farming advisers
- 9.5 Herbal healers
- 9.6 Life science technicians
- 9.7 Massage Therapists
- 9.8 Medical assistants
- 9.9 Optometrists
- 9.10 Practical nurses
- 9.11 Sanitary inspectors

10. Teaching associate professionals (some formal training required)

(Code teaching associate professionals who do not have a college or university degree in their field but have completed a course of formal training, here.)

Examples include:

- 10.1 Driving instructors
- 10.2 Flying instructors
- 10.3 Pre-primary education teaching assistants
- 10.4 Primary education teaching assistants
- 10.5 Professional nursery teaching assistants
- 10.6 Professional remedial teaching assistants
- 10.7 Professional special education teaching assistants
- 10.8 Teachers of the visually impaired
- 10.9 Teachers of the mentally handicapped
- 10.10 Teachers of the hearing impaired

11. Other associate professionals (some formal training required)

(Code other associate professionals who do not have a college or university degree in their field but have completed a course of formal training.)

Examples include:

- 11.1 Administrative secretaries
- 11.2 Bookkeepers (bookkeeping clerks are 12)
- 11.3 Employment agents
- 11.4 Entertainers (who perform on the streets, in night-clubs, at circuses, in bands,
etc.)
- 11.5 Insurance agents
- 11.6 Police detectives
- 11.7 Real estate agents
- 11.8 Religious workers
- 11.9 Social workers (with less than an associate degree)
- 11.10 Stock brokers

D. Clerks

12. Office clerks (no direct contact with clients)

(Code office clerks who do not have direct contact with clients here.)

Examples include:

- 12.1 Bookkeeping clerks (bookkeepers are 11)
- 12.2 Filing clerks
- 12.3 Mail carriers
- 12.4 Mail clerks
- 12.5 Materials clerks
- 12.6 Personnel clerks
- 12.7 Secretaries
- 12.8 Stock clerks
- 12.9 Tax clerks
- 12.10 Typists

13. Customer service clerks (direct contact with clients)

(Code customer service clerks who have direct contact with clients, including contact with clients over the telephone, here.)

Examples include:

- 13.1 Bank tellers
- 13.2 Bookmakers
- 13.3 Cashiers
- 13.4 Counter clerks
- 13.5 Debt collectors
- 13.6 Pawnbrokers
- 13.7 Post office counter clerks
- 13.8 Receptionists
- 13.9 Telephone switchboard-operators
- 13.10 Ticket clerks

E. Service workers / shop & market sales workers

14. Personal and protective service workers (*provide personal services*)

(Code personal service workers who provide various personal services in connection with travelling, housekeeping, child-care, and other services, here. Also code protective service workers who protect individuals and property, and maintain law and order, here.)

Examples include:

- 14.1 Child-care workers
- 14.2 Cooks
- 14.3 Fire-fighters
- 14.4 Flight attendants
- 14.5 Hairdressers
- 14.6 Housekeepers
- 14.7 Nursing aids
- 14.8 Police officers
- 14.9 Security guards
- 14.10 Train conductors

15. Models, salespersons, and demonstrators (*pose, display, demonstrate or sell goods*)

(Code models, salespersons, and demonstrators who pose, display, demonstrate, or sell goods in the retail, wholesale, advertising, or fashion industries, here.)

Examples include:

- 15.1 Advertising models
- 15.2 Artist's models
- 15.3 Demonstrators
- 15.4 Fashion models
- 15.5 Market salespersons
- 15.6 Retail salespersons
- 15.7 Fruit stand salespersons
- 15.8 Vegetable-stand salespersons
- 15.9 Wholesale salespersons

F. Skilled agricultural and fishery workers

16. Market-oriented skilled agricultural and fishery workers (*perform complex, non-routine tasks*)

(Code market-oriented skilled agricultural and fishery workers, who are not mainly managers or machinery operators, but do perform complex, and non-routine tasks, here.)

Examples include:

- 16.1 Beekeepers
- 16.2 Dog breeders
- 16.3 Farmers
- 16.4 Fishery workers
- 16.5 Hunters
- 16.6 Loggers
- 16.7 Skilled farm workers
- 16.8 Skilled forestry workers
- 16.9 Trappers

17. Subsistence agricultural and fishery workers (*for personal, not commercial use*)

(Code subsistence agricultural and fishery workers, who are not managers, machinery operators, or market oriented, but do provide food, shelter and a minimum of cash income for themselves and their households, here. it should be noted that the necessary skills an understanding of the natural environment and the crops and animals worked with, as well as manual strength and dexterity are usually acquired by working from childhood with other members of the household to produce the necessities for subsisting.)

Examples include:

- 17.1 Subsistence farmers
- 17.2 Subsistence farm workers
- 17.3 Subsistence fishers
- 17.4 Subsistence fishery workers
- 17.5 Subsistence hunters
- 17.5 Subsistence hunting workers
- 17.7 Subsistence wild plant gatherers
- 17.8 Subsistence herders
- 17.9 Subsistence aquatic life gatherers
- 17.10 Subsistence trappers

G. Craft and related trades workers – occupations which are craft oriented consist of skilled jobs directly involved in the production of goods where the tasks and duties require an understanding of and experience with natural resources and raw materials used and how to achieve the desired techniques and practices, but they may also use more technologically advanced tools and machines.

18. Extraction and building trades workers (*mining, quarrying, and construction industries*)

(Code extraction and building trades workers, in the mining, quarrying, and construction industries, here.)

Examples include:

- 18.1 Bricklayers
- 18.2 Building exterior cleaners
- 18.3 Carpenters
- 18.4 Cement finishers
- 18.5 Electricians
- 18.6 Miners
- 18.7 Painters
- 18.8 Plumbers
- 18.9 Roofers
- 18.10 Stone cutters

19. Metal, machinery and related trades workers (*manufacturing, repair, communications, public utilities*)

(Code metal, machinery, and related trades workers, in the manufacturing, repair, communications, and public utilities industries, here.)

Examples include:

- 19.1 Blacksmiths
- 19.2 Electrical fitters
- 19.3 Electric power line workers
- 19.4 Mechanics
- 19.5 Metal-smiths
- 19.6 Sheet-metal workers
- 19.7 Structural metalworkers
- 19.8 Telephone installers
- 19.9 Toolmakers
- 19.10 Welders

20. Precision, handicraft, printing and related trades workers (skilled handicraft, printing)

(Code precision handicraft, printing, and related trades workers, in the manufacturing, and repair industries, here.)

Examples include:

- 20.1 Film developers
- 20.2 Glass blowers
- 20.3 Handicraft workers
- 20.4 Jewelers
- 20.5 Musical instrument makers
- 20.6 Potters
- 20.7 Printers
- 20.8 Silk-screen printers
- 20.9 Sign-writers
- 20.10 Typesetters

21. Other craft and related trades workers (skilled craftsman)

(Code other craft and related trades workers in manufacturing, retail, and personal services, here.)

Examples include:

- 21.1 Bakers
- 21.2 Basket makers
- 21.3 Butchers
- 21.4 Cabinet-makers
- 21.5 Cigarette makers
- 21.6 Dressmakers
- 21.7 Food graders
- 21.8 Shoe-makers
- 21.9 Tobacco graders
- 21.10 Wood treaters

H. Plant and machine operators and assemblers

22. Stationary plant and related operators (*make materials from which parts are made*)

(Code stationary plant and related operators in manufacturing, mining, public utilities, and sanitary services, here. Stationary plant and related operators operate and monitor industrial plants, automated assembly lines, and industrial robots.)

Examples include:

- 22.1 Chemical machine operators (mixing, heat-treating, filtering, distilling, etc.)
- 22.2 Furnace operators
- 22.3 Glass-blowing machine operators
- 22.4 Kiln-operators
- 22.5 Mining machine operators
- 22.6 Plant operators
- 22.7 Power plant operators
- 22.8 Water purification plant operators
- 22.9 Well-drilling equipment operators
- 22.10 Wood-processing plant operators

23. Machine operators and assemblers (*make finished products*)

(Code machine operators and assemblers, who primarily operate and monitor industrial machinery, or assemble products to strict specifications and procedures, here.)

Examples include:

- 23.1 Assemblers (machinery, equipment, supplies, and other products)
- 23.2 Chemical production machine operators (coating, finishing, plating, developing,
etc.)
- 23.3 Food canning machine operators
- 23.4 Machine tool operators
- 23.5 Plastic products machine operators
- 23.6 Printing-press operators
- 23.7 Sewing-machine operators
- 23.8 Textile machine operators
- 23.9 Woodworking machine operators

24. Drivers and mobile plant operators (*mobile implies operating a machine in a plant*)

(Code drivers and mobile plant operators who tend or drive trains, motor vehicles, industrial and agricultural machinery and equipment, and ships and other water-craft, here.)

Examples include:

- 24.1 Bulldozer operators
- 24.2 Bus drivers
- 24.3 Crane operators
- 24.4 Fork-lift operators
- 24.5 Locomotive engineers
- 24.6 Motorized farm equipment operators
- 24.7 Railroad brakers
- 24.8 Sailors
- 24.9 Taxi drivers
- 24.10 Truck drivers

I. Elementary occupations – jobs that only require low or elementary skills and little or no judgment.

25. Sales and services elementary occupations (perform routine, unskilled services)

(Code elementary sales and services workers, who sell goods or services door-to-door, on the street, or over the telephone, or clean private households, business establishments, transportation equipment, or laundry by hand, or perform other routine, unskilled services, here.)

Examples include:

- 25.1 Domestic cleaners
- 25.2 Door-to-door salespersons
- 25.3 Garbage collectors
- 25.4 Hand dishwashers
- 24.5 Janitors
- 24.6 Newspaper deliverers
- 24.7 Odd-jobs persons
- 24.8 Shoe-shiners
- 24.9 Telephone salespersons
- 24.10 Window washers

26. Agricultural, fishery and related laborers (perform routine tasks using hand-held tools)

(Code agricultural, fishery and related laborers, who perform simple routine tasks using hand-held tools, such as digging, shoveling, raking, fertilizing, etc., here.)

Examples include:

- 26.1 Aquatic laborers
- 26.2 Brush cutters
- 26.3 Choppers
- 26.4 Farm laborers
- 26.5 Fish hatchery worker
- 26.6 Fruit pickers
- 26.7 Greenhouse laborers
- 26.8 Hatchery laborers
- 26.9 Migratory workers
- 26.10 Tree tapping laborers

27. Laborers in mining, construction, manufacturing and transport (perform routine tasks)

(Code laborers in the mining, construction, manufacturing, and transportation industries, who perform simple, routine tasks, using simple, hand-held tools, such as lifting, moving, carrying, clearing, etc., here.)

Examples include:

- 27.1 Animal-drawn vehicle drivers
- 27.2 Bottle sorters
- 27.3 Construction laborers
- 27.4 Factory laborers
- 27.5 Freight handlers
- 26.6 Hand packers
- 27.7 Mining laborers
- 27.8 Order pullers
- 29.9 Rickshaw drivers
- 29.10 Simple-assembly workers (nuts and bolts, supermarket warehouse, etc.)

J. Armed forces

28. Armed forces

(Code all active members of the army, navy, air force, marines, coast guard, and national guard, commissioned, non-commissioned, and warrant officers, and all enlisted personnel, here. Do not code civilian employees working for the military or members of the national guard not on active duty, here.)

K. OTHER

29. Other (specify)

97. Never worked



Collaborative Psychiatric Epidemiology Surveys

NSAL Income Imputation Memo

Nakesha Faison

December 8, 2003

Myriam Torres

April 12, 2007 (Revised)

A. Overview

The purpose of this document is to detail the steps taken to impute family income **hhinc** for the NSAL adult sample (final n ≈ 6082). The goal of the project was to impute income for approximately 13.8% of the sample, or 839 respondents.

DISCLAIMER: DO NOT ATTEMPT TO REPLICATE THESE ANALYSES. CHANGES WERE MADE TO THE VARIABLES USED TO CREATE THE FAMILY INCOME MEASURE AFTER THE IMPUTATION.

Before beginning imputation, we combined responses for H45 (actual income given 77.6%) and H46 (income in ranges 8.6%) and called this variable **incfam**. The majority of the remaining with missing data consisted of 2 groups: those who refused or did not know their income (12.7%) and those who were partial interviews and without much information on the strong predictors of income (1.1%).

B. Imputation Process

STEP 1: DETERMINE THE MOST SIGNIFICANT PREDICTORS OF INCOME:

Income predictor variables from previous studies were reviewed, and compared to available variables in the NSAL questionnaire, to first establish all potential income predictor variables:

- Traditional family income predictor variables include: education, work status, home owner status, marital status, race, age, gender, region, and number in household contributing to income. To these we added if R grew up in or outside the U.S and were US or Foreign educated.
- To determine the strongest predictors of income, a linear regression needed to be run on the cases with income data, using **target dependent variable, incfam**.
- Income predictor variables were prepared/recoded into dichotomous variables for regression:
 - recoded **H13**, education, into **h13rc** (set 97, 'other'=missing)
 - created dichotomous work status, **wkstat** (**D3**:1,8,9=working(1)/else=not working(0) if **D101**=1 through 11)
 - dichotomized **H52**, homeowner status, into **ownhome** (own=1/don't own=0)
 - dichotomized **E13**, marital status into **marstat** (ever married=1/never married=0)
 - used **race3cat** (race in 3 categories) to make 2 dummy variables (compare to whites):
 - **blackdum** Blacks=1/Whites & Caribbeans=0
 - **caribdum** Caribbeans=1/B&W=0
 - used **age** as it was (range 18-95)
 - used **sex** to create gender dummy variable, **sexdum** (1=male/0=female)
 - used **h47**, # supporting hhd \$, no recoding
 - dichotomized **region** into **reg2cat** (south=1/non-south=0)
 - recoded **h3**, "US or Foreign grew up" into **h3rc** (US=1/Foreign=0)
 - first regression run, also used **h30**, "US or Foreign educated" (1=US)
- **Regression 1:** dependent variable, family income (**incfam**); 12 independent variables: **h13rc*****, **wkstat***, **ownhome*****, **marstat****, **blackdum****, **caribdum**, **age**, **sexdum*****, **h47*****, **reg2cat*****, **h3rc**, **h30rc**; $R^2=.24$; $F=26.19^{***}$
 - 8 variables emerged as significant predictors of income; order of strongest predictors determined by standardized beta coefficients (in parentheses):
 1. **h13rc**, education in years (.099)
 2. **h47**, # contributing to hhd \$ (.088)
 3. **ownhome**, homeowner status (.065)

4. sexdum, gender (.041)
5. wkstat, work status (.037)
6. marstat, marital status (.037)
7. blackdum, Black dummy variable (-.045)
8. reg2cat, region (-.054)

- **Regression 2:** to satisfy our curiosity (because blackdum was significant), regression analyses were run separately for each category of race3cat (black, white, Caribbean):
 - **Blacks:** dependent variable, family income (**incfam**); 8 independent variables: h13rc***, ownhome**, h47***, wkstat, marstat*, sexdum, age, reg2cat; R²=.04; F=13.69***
 - **Whites:** dependent variable, family income (**incfam**); 8 independent variables: h13rc*, ownhome, h47*, wkstat, marstat, sexdum, age, reg2cat*; R²=.04; F=3.54***
 - **Caribbeans:** dependent variable, family income (**incfam**); 9 independent variables: h13rc***, ownhome**, h47***, wkstat***, marstat**, sexdum***, age, reg2cat***, h3rc; R²=.29; F=56.63***
 - As you can see the results are quite interesting, with different variables predicting income for the three groups: I decided to include age although not significant in the first regression; I also decided to include US/Foreign grew up for Caribbeans; This may make for an interesting future investigation.

STEP 2: PREPARE FINAL DATA SET FOR USE IN ANSWERTREE

- 3 outlier cases where income $\geq \$1,000,000$ were recoded as missing

STEP 3: PREPARE 8 INCOME PREDICTOR VARIABLES FOR ANSWER TREE

- We used the SPSS add-in ‘Answer Tree v1.0’ to generate binary classification trees and implemented the C&RT algorithm for determining where each predictor variable is partitioned producing subsets of the data that are as homogeneous as possible in terms of family income.

AnswerTree requires variables to be categorical; missing values included as a category.

- Created recode variables (9=missing all variables):
 - **educ3lev** (1=some hs 2=hs diploma 3=college)
 - **hhup2** (1=1 person 2=2 people 3=3 or more people)
 - **ownhome** (0=don't know 1=own)
 - **sex** (1=male 2=female)
 - **work3lev** (1=not working 2=part time 3=full time)
 - **marstat** (1=married 2=partner 3=sep/div/wid 4=never married)
 - --initially created **e13rc**: 1=married/partner 2=sep/div/wid 3=never married
 - **race3cat** (1=Black 2=Caribbean 3=White)
 - **region** (1=Northeast 2=Midwest 3=South 4=West)

STEP 4: CREATE ANSWER TREE

- **Answer Tree**
 - Interested in determining percentage of variation explained
 - Inserted income variables as nominal and numeric

- Decided to try C&RT method first (binary splits only), then CHAID (nonbinary splits; allows ordinal vars): CHAID didn't work out, nonbinary splits didn't resemble reality (e.g. education = less than 12.5 yrs vs 12.5-16.5 yrs vs.etc)
- **See handout of final C&RT Tree**
 - 29% variance explained: determined from Risk Estimate:
Risk Estimate before *growing* tree: 1.4858
Risk Estimate after growing tree: 1.05546

$$1 - \frac{1.05546}{1.4858} = .29 \text{ or } 29\%$$

 - 57 total nodes, 29 terminal—determine imputations for missing income values
- **29 Terminal Nodes: Definitions**
 - Node 15: (n=91) \$58,168.48
1 person contributes to hhd \$ & college & home owner & married
 - Node 31: (n=324) \$47,090.28
1 person contributes to hhd \$ & college & home owner & never married OR sep/div/wid OR partner OR missing & fulltime
 - Node 32: (n=124) \$28,693.57
1 person contributing to hhd \$ & college & home owner & never married OR sep/div/wid OR partner OR missing & parttime OR not working
 - Node 33: (n=162) \$37,883.76
1 person contributes to hhd \$ & college & not home owner OR missing & fulltime & male
 - Node 34: (n=283) \$29,914.42
1 person contributes to hhd \$ & college & not home owner OR missing & fulltime & female
 - Node 18: (n=214) \$18,878.37
1 person contributes to hhd \$ & college & not home owner OR missing & parttime OR not working
 - Node 35: (n=70) \$49,206.19
1 person contributes to hhd \$ & hs dip OR some hs OR missing & parttime OR fulltime & White & home owner
 - Node 36: (n=49) \$23,777.18
1 person contributes to hhd \$ & hs dip OR some hs OR missing & parttime OR fulltime & White & not home owner OR missing
 - Node 37: (n=302) \$28,287.91
1 person contributes to hhd \$ & hs dip OR some hs OR missing & parttime OR fulltime & Black OR Caribbean & male
 - Node 38: (n=540) \$19,881.24
1 person contributes to hhd \$ & hs dip OR some hs OR missing & parttime OR fulltime & Black OR Caribbean & female
 - Node 39: (n=48) \$29,566
1 person contributes to hhd \$ & hs dip OR some hs OR missing & not working & married & hs dip
 - Node 40: (n=51) \$15,610.37
1 person contributes to hhd \$ & hs dip OR some hs OR missing & not working & married & some hs
 - Node 41: (n=233) \$15,491.85

- 1 person contributes to hhd \$ & hs dip OR some hs OR missing & not working & never married OR sep/div/wid OR partner & home owner
- o Node 42: (n=423) \$10,510.60
 - 1 person contributes to hhd \$ & hs dip OR some hs OR missing & not working & never married OR sep/div/wid OR partner & not home owner OR missing
- o Node 43: (n=348) \$68,000 (median)
 - 2 or more people contribute to hhd \$ & college & homeowner & married & South OR Midwest
- o Node 44: (n=151) \$90,929
 - 2 or more people contribute to hhd \$ & college & homeowner & married & Northeast OR West
- o Node 45: (n=64) \$69,000 (median)
 - 2 or more people contribute to hhd \$ & college & homeowner & never married OR sep/div/wid OR partner & Northeast
- o Node 46: (n=132) \$48,175.68
 - 2 or more people contribute to hhd \$ & college & homeowner & never married OR sep/div/wid OR partner & South OR Midwest OR West
- o Node 47: (n=116) \$47,994.61
 - 2 or more people contribute to hhd \$ & college & not homeowner OR missing & fulltime & never married OR sep/div/wid
- o Node 48: (n=174) \$59,119.31
 - 2 or more people contribute to hhd \$ & college & not homeowner OR missing & fulltime & married OR partner
- o Node 26: (n=122) \$35,699.11
 - 2 or more people contribute to hhd \$ & college & not homeowner OR missing & parttime OR not working
- o Node 49: (n=292) \$44,348.45
 - 2 or more people contribute to hhd \$ & hs dip OR some hs & fulltime & homeowner & South
- o Node 50: (n=118) \$61,701.17
 - 2 or more people contribute to hhd \$ & hs dip OR some hs & fulltime & homeowner & Northeast OR Midwest OR West
- o Node 51: (n=130) \$39,777.39
 - 2 or more people contribute to hhd \$ & hs dip OR some hs & fulltime & not homeowner OR missing & male
- o Node 52: (n=152) \$29,790.01
 - 2 or more people contribute to hhd \$ & hs dip OR some hs & fulltime & not homeowner OR missing & female
- o Node 53: (n=78) \$29,431.89
 - 2 or more people contribute to hhd \$ & hs dip OR some hs & parttime OR not working & never married OR sep/div/wid & male
- o Node 54: (n=153) \$18,201.78
 - 2 or more people contribute to hhd \$ & hs dip OR some hs & parttime OR not working & never married OR sep/div/wid & female
- o Node 55: (n=181) \$38,844.09
 - 2 or more people contribute to hhd \$ & hs dip OR some hs & parttime OR not working & married OR partner & hs dip
- o Node 56: (n=118) \$23,844.47
 - 2 or more people contribute to hhd \$ & hs dip OR some hs & parttime OR not working & married OR partner & some hs

STEP 5: CREATE SPSS SYNTAX BASED ON THE FINAL (29) NODES.

These syntax lines were used to create **hhinc**, the imputed family income variable, with income values for all cases. The **incfam** variable (H was used original

*** FIRST IMPUTE CASES WITH MISSING DATA IN FAMILY INCOME ***

```
IF (MISSING(incfam) & hhsup2= 1 & educ3lev = 3 & ownhome = 1 & marstat = 1) hhinc = 58168.48.  
IF (MISSING(incfam) & hhsup2= 1 & educ3lev = 3 & ownhome = 1 & marstat > 1 & work3lev = 3)  
hhinc = 47090.28.  
IF (MISSING(incfam) & hhsup2 = 1 & educ3lev = 3 & ownhome = 1 & marstat > 1 & work3lev <= 2)  
hhinc = 28693.57.  
IF (MISSING(incfam) & hhsup2 = 1 & educ3lev = 3 & ANY(ownhome,0,9) & work3lev = 3 & sex = 1)  
hhinc = 37883.76.  
IF (MISSING(incfam) & hhsup2 = 1 & educ3lev = 3 & ANY(ownhome,0,9) & work3lev = 3 & sex = 2)  
hhinc = 29914.42.  
IF (MISSING(incfam) & hhsup2 = 1 & educ3lev = 3 & ANY(ownhome,0,9) & work3lev <= 2) hhinc =  
18878.37.  
IF (MISSING(incfam) & hhsup2 = 1 & ANY(educ3lev,1,2,9) & ANY(work3lev,2,3) & race3cat = 3 &  
ownhome = 1) hhinc = 49206.19.  
IF (MISSING(incfam) & hhsup2 = 1 & ANY(educ3lev,1,2,9) & ANY(work3lev,2,3) & race3cat = 3 &  
ANY(ownhome,0,9)) hhinc = 23777.18.  
IF (MISSING(incfam) & hhsup2 = 1 & ANY(educ3lev,1,2,9) & ANY(work3lev,2,3) & race3cat <= 2 &  
sex = 1) hhinc = 28287.91.  
IF (MISSING(incfam) & hhsup2 = 1 & ANY(educ3lev,1,2,9) & ANY(work3lev,2,3) & race3cat <= 2 &  
sex = 2) hhinc = 19881.24.  
IF (MISSING(incfam) & hhsup2 = 1 & ANY(educ3lev,1,2,9) & work3lev = 1 & marstat = 1 & educ3lev  
= 2) hhinc = 29566.  
IF (MISSING(incfam) & hhsup2 = 1 & ANY(educ3lev,1,2,9) & work3lev = 1 & marstat = 1 & educ3lev  
= 1) hhinc = 15610.37.  
IF (MISSING(incfam) & hhsup2 = 1 & ANY(educ3lev,1,2,9) & work3lev = 1 & RANGE(marstat,2,4) &  
ownhome = 1) hhinc = 15491.85.  
IF (MISSING(incfam) & hhsup2 = 1 & ANY(educ3lev,1,2,9) & work3lev = 1 & RANGE(marstat,2,4) &  
ANY(ownhome,0,9) ) hhinc = 10510.6.  
IF (MISSING(incfam) & RANGE(hhsup2,2,3) & educ3lev = 3 & ownhome = 1 & marstat = 1 &  
RANGE(region,2,3)) hhinc = 68000.  
IF (MISSING(incfam) & RANGE(hhsup2,2,3) & educ3lev = 3 & ownhome = 1 & marstat = 1 &  
ANY(region,1,4)) hhinc = 90929.  
IF (MISSING(incfam) & RANGE(hhsup2,2,3) & educ3lev = 3 & ownhome = 1 & RANGE (marstat,2,4)  
& region = 1) hhinc = 69000.  
IF (MISSING(incfam) & RANGE(hhsup2,2,3) & educ3lev = 3 & ownhome = 1 & RANGE (marstat,2,4)  
& region > 1) hhinc = 48175.68.  
IF (MISSING(incfam) & RANGE(hhsup2,2,3) & educ3lev = 3 & ANY(ownhome,0,9) & work3lev = 3 &  
RANGE(marstat,3,4)) hhinc = 47994.61.  
IF (MISSING(incfam) & RANGE(hhsup2,2,3) & educ3lev = 3 & ANY(ownhome,0,9) & work3lev = 3 &  
marstat <= 2) hhinc = 59119.31.  
IF (MISSING(incfam) & RANGE(hhsup2,2,3) & educ3lev = 3 & ANY(ownhome,0,9) & work3lev <= 2)  
hhinc = 35699.11.  
IF (MISSING(incfam) & RANGE(hhsup2,2,3) & educ3lev <= 2 & work3lev = 3 & ownhome = 1 &  
region = 3) hhinc = 44348.45.
```

```

IF (MISSING(incfam) & RANGE(hhsup2,2,3) & educ3lev <= 2 & work3lev = 3 & ownhome = 1 &
ANY(region,1,2,4)) hhinc = 61701.17.
IF (MISSING(incfam) & RANGE(hhsup2,2,3) & educ3lev <= 2 & work3lev = 3 &
ANY(ownhome,0,9) & sex = 1) hhinc = 39777.39.
IF (MISSING(incfam) & RANGE(hhsup2,2,3) & educ3lev <= 2 & work3lev = 3 &
ANY(ownhome,0,9) & sex = 2) hhinc = 29790.01.
IF (MISSING(incfam) & RANGE(hhsup2,2,3) & educ3lev <= 2 & work3lev <= 2 &
RANGE(marstat,3,4) & sex = 1) hhinc = 29431.89.
IF (MISSING(incfam) & RANGE(hhsup2,2,3) & educ3lev <= 2 & work3lev <= 2 &
RANGE(marstat,3,4) & sex = 2) hhinc = 18201.78.
IF (MISSING(incfam) & RANGE(hhsup2,2,3) & educ3lev <= 2 & work3lev <= 2 & marstat <= 2 &
educ3lev = 2) hhinc = 38844.09.
IF (MISSING(incfam) & RANGE(hhsup2,2,3) & educ3lev <= 2 & work3lev <= 2 & marstat <= 2 &
educ3lev = 1) hhinc = 23844.47.
VARIABLE LABEL hhinc 'IMPUTED FAMILY INCOME'.
EXECUTE.

IF (sampleid = 60200501711) hhinc = 29790.01.
IF (sampleid = 60700405411) hhinc = 10510.6.
IF (sampleid = 70200913211) hhinc = 18201.78.
IF (sampleid = 73900630511) hhinc = 18201.78.
IF (sampleid = 70201723411) hhinc = 39777.39.
EXECUTE.

```

***** NEXT CREATE FLAG VARIABLE THAT ALLOWS SELECTION OF IMPUTED CASES *****

```

COMPUTE incimpgf = 0 .
EXECUTE .
IF (RANGE(hhinc,1,95000)) incimpgf = 1 .
VARIABLE LABELS incimpgf 'Imputed Fam Income Cases Flag'.
EXECUTE .

```

***** ADD VALID CASES FOR FAMILY INCOME TO THE IMPUTED CASES ****

```

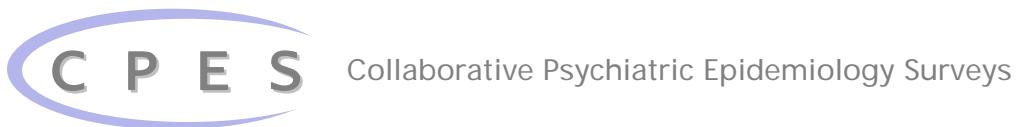
IF (RANGE(incfam,0,5000000)) hhinc = incfam .
EXECUTE .

```

Family income means before and after imputation.

	Missing responses	Mean non-missing	Mean only imputed cases	Mean after imputation
Unweighted	839	\$36,956.00	\$33,264.39	\$36,446.75
Weighted	714	\$43,234.62	\$36,271.67	\$42,417.66

Those who did not report their family income on average came from households where the Respondent had characteristics of lower income families than those who reported their family income.



Collaborative Psychiatric Epidemiology Surveys

NSAL White R Skipped in Adult Instrument

July 20, 2010

A. Several sections were not administered to the White sample. See below for a list of sections skipped if the NSAL respondent was White.

Page Number	Question Numbers	Mental Disorder	Administered to Whites
51-74	DP1-DP88	Depression	X
75-86	M1-M54	Mania	X
87-102	PD1-PD66	Panic Disorder	X
103-113	SO1-SO40	Social Phobia	X
114-124	AG1-AG39	Agoraphobia	X
125-139	GA1-GA51b	Generalized Anxiety Disorder	X
140-146	SD0-SD29	Suicidality	
147-166	SU1-SU120b	Alcohol and Other Substance Abuse and Dependence	
167-175	PH1-PH175	Pharmacoepidemiology	
176-178	PEA40-PEA83	Personality Disorders	
179-210	PT1-PT281	Post-Traumatic Stress Disorder	
211-212	NSD1-NSD2	30-Day Symptoms	
213	TB1	Tobacco Use	
214-226	EA1-EA43	Eating Disorders: Anorexia and Bulimia	
227-230	PR1-PR19a	Pre-Menstrual Dysphoric Disorder	
231-233	O1-O17	Obsessive-Compulsive Disorder	
234-240	PS1-PS10	Psychosis Screen	
241-242	GM1-GM6	Gambling	
243-246	FH1-FH39	Family History	X
247-261	AD1-AD51	Attention-Deficit/Hyperactivity Disorder	
262-268	OD1-OD27	Oppositional Defiant Disorder	
269-275	CD1-CD40	Conduct Disorder	
276-287	SA1-SA50b	Separation Anxiety	
288-323	SR1-SR135	Services	

B. The NSAL Black Caribbean sample had some questions that no one else had.



Collaborative Psychiatric Epidemiology Surveys

NSAL Major Skips in Adult Instrument

July 13, 2010

A. Said NO to B20: Commitment question; B20=5, 8, or 9

- Background information: This question has been placed after the religion question because it is early enough into the interview (about 12 minutes), and is just before the physical and emotional questions. It has been worded and treated a bit differently from NCS-R's commitment question. It says "Parts of the rest of the interview..." instead of "The rest of the interview...". In addition, if they say NO, DK, or RF, they proceed with questions that are not health related: Sections D, E, G to end. NCS-R terminates the interview.

B. R failed the SPMSQ (less than 4 correct answers; CG61=2)

- If R is 55 years of age or older **and** scored less than 30 correct answers in the Digit Symbol test, they get the SPMSQ test for dementia. If they fail the SPMSQ, that is, they give less than 4 correct answers, they are considered incapable of answering the interview questions adequately and are skipped to Question J4. The ending statement they get is a bit different, referring to the interview being shorter than expected.

C. White skips

- Whites will skip out of some questions in D, G, and H. The major skip for Whites will be that they will be skipped out of SD to GM, and AD to SR (they will be asked the FH questions).

D. Caribbean sample (not a skip)

- NOTE: This sample will get a few more questions than Whites and Blacks do. These questions are in sections D, G, and H.

CHART 1 - NSAL ADULT CONCEPTS AND MEASURES (MAIN & SAQ)

<u>Page Number</u>	<u>Question Number</u>	<u>Construct</u>	<u>Question Source</u>
<u>NEIGHBORHOOD</u>			
1	A2	Contact with Neighbors	NSBA I
1; 3 SAQ	A3-A4; A8h-j	Neighborhood Safety	NSBA I; ADDHEALTH & UNOCAP modified
2	A5-A5a	Neighborhood Participation	NSBA I
2	A6	Proximity to Resources	Baltimore Health Study; DAS 1996
2 SAQ	A7b,c,i	Neighborhood Domains Satisfaction	??
3 SAQ	A8a-g	Cohesion and Trust	Human Development in Chicago Neighborhoods; Sampson et al., 1997; ADDHEALTH&UNOCAP modified
3-4 SAQ	A9-A11	Stability	Urban Poverty and Family Life Survey of Chicago, 1987
4 SAQ	A12	Problems With Dwelling	The OASIS Research Project, 2000 modified
<u>RELIGION</u>			
3	B1	Religion/Denomination	NSBA I
3-4; 4 SAQ	B2-B7; B21-B23	Organizational Religious Participation	NSBA
6	B16	Private Religious Participation	NSBA
6	B17	Importance of Religion	NSBA I (a-b); NBES (c)
7	B18	Overall Religiosity	NSBA
7	B19	Overall Spirituality	Fetzer, 1999 adapted
5 SAQ	B26	Religious Guidance	NSBA Panel
7	B20	Commitment Question	NCS-R
<u>COGNITIVE FUNCTIONING</u>			
8-11	CG50a-e	Digit Symbol	Weschler, 1981
12	CG50-CG61	Short Portable Mental Status Questionnaire (SPMSQ)	Pfeiffer, 1975
<u>WELL-BEING</u>			
1	A1	General Life Satisfaction	NSBA
2 SAQ	A7	Life Domains Satisfaction	NSBA; The OASIS Research Project, 2000
44	E25	Happiness	NSBA
<u>PSYCHOLOGICAL RESOURCES</u>			
13	C1a-j	Self-Esteem	Rosenberg, 1965
13	C1k-l	Hopelessness	Everson; DAS 1995
14	C2a-g	Mastery	Pearlin, 1989
14	C2h	Religious Coping	Fetzer, 1999
14	C3-C7	Goal Striving Stress	NSBA Panel
6 SAQ	C40	John Henryism	James, 1983
7 SAQ	C43	General Coping Strategies	Lazarus and Folkman, 1988
339	G21	Coping with Discrimination	YES Health; McNeilly et al, 1996 adapted & Krieger, 1990
<u>PHYSICAL HEALTH AND HELP-SEEKING</u>			
16	C8, C9	Self-Reported Physical Health	NSBA Panel
2 SAQ	A7a	Health Satisfaction	NSBA Panel
2 SAQ	A7e,f	Health Domains	??
16	C8a	Self-Reported Dental Health	New
10-11 SAQ	C58	Oral Health Impact Profile Subset	University of Michigan Dental Health Study

Page Number	Question Number	Construct	Question Source
17-18	C10-C11	Lifetime Diagnosed Health Problems & Limitations	NSBA (a-m); New (n-v)
19	C12-C13	12 Months other Health Problems & Interference	NSBA
8 SAQ	C44-C45	Preventative Care	New
8 SAQ	C46	Isolated Sleep Paralysis	Community Mental Health Council, Chicago
9 SAQ	C47-C50	Sleep Quality	CARDIA study; DAS 1995
19	C14	Exercise	ACL
20	C15-C20	BMI: Height/Weight	DAS 1995
24-28; 10 SAQ	C29-C39; C56-C57	30-Day Impairment	WMH modified by NCS-R
20; 9 SAQ	C21-C21a, C51	Medical Help-Seeking	NSBA
21	C22	Alternative Health Help-Seeking	NSBA I
10 SAQ	C54-C55	Herbal and Home Remedies	NSBA
9 SAQ	C52-C53	Barriers to Medical Treatment	NSBA
21-22	C23-C26a	Health and Mental Health Insurance	HRS modified
11 SAQ	C59	Services Used for the Elderly	The OASIS Research Project, 2000
CURRENT AND PAST EMPLOYMENT AND WORKPLACE			
29, 32-33	D1-D10; D21-D28	Occupation and Industry	NSBA I; NSBA II
29, 33	D6; D25	Hours worked	NSBA I; NSBA II
29	D7	Salary	NSBA I; NSBA II
30, 33; 13 SAQ	D9-D10;D27-D28;D41-D42	Job Satisfaction and Enjoyment	NSBA I; NSBA II; ACL
30-31, 33-34	D11a-D12; D29a-D30	Workplace Segmentation	NSBA I; NSBA II
31-32, 34-35	D14-D16; D32-D34	Supervisor and Workgroup Racial Composition	DAS 1995
32, 35-36	D17-D20; D35-D40	Employment Uncertainty	NSBA I; NSBA II
17 SAQ	D49-D54	Irregular Work	ACL
18 SAQ	D55-D58	Social Barter Work	ACL
SOCIAL RESOURCES AND INTERACTIONS			
4	B8	Contact with Church Members	NSBA
4; 5 SAQ	B9-B11;B24-B25a-d,f-i	Church Tangible Support	NSBA; Fetzer adapted
4-5	B12-B13	Closeness to and Satisfaction with Church Members	NSBA
5; 5 SAQ	B14; B25e	Church Emotional Support	Fetzer
5	B15	Negative Interaction with Church Members	Fetzer adapted
37	E3	Contact with Family	NSBA
19 SAQ	E31	Family Proximity	NSBA
37; 19-20 SAQ	E1,E2,E4;E33,E34,E35b-e	Family Tangible Support	NSBA; Fetzer adapted
38; 2,19 SAQ	E4a-E5; A7d&j, E32	Closeness to and Satisfaction with Family	NSBA
38; 20 SAQ	E6; E35a	Family Emotional Support	Fetzer adapted
20 SAQ	E36	Family Provider Role	NSBA
38	E7	Negative Interaction with Family	Fetzer adapted
39	E8	Contact with Friends	NSBA
39; 18-19 SAQ	E9-E10; E26, E29	Friends Tangible Support	NSBA
39; 2,18-19 SAQ	E11; A7g-h,E27-E28	Closeness to and Satisfaction with Friends	NSBA
40	E12-E12a	Social System: Fictive Kin	NSBA I modified
42	E16	Main Romantic Involvement	NSBA
43	E19	Marital/Current Partner Satisfaction	NSFH; ACL

Page Number	Question Number	Construct	Question Source
21 SAQ	E37a-c, E38a	Emotional Support from Spouse	NCS; Antonucci
21 SAQ	E37d-e	Tangible Support from Spouse	NCS; Antonucci
21 SAQ	E38b-f	Negative Interaction with Spouse	Fetzer adapted
43-44	E20-E21	Step-Parent Relationships	Tolman/Wilson
22-26 SAQ	E40-E43, E47-E50, E54-E57	Consensual Solidarity with Children and Parents	The OASIS Research Project, 2000
23-24, 26 SAQ	E44, E51, E58	Conflict With Children and Parents	The OASIS Research Project, 2000
23, 25 SAQ	E46, E53	Frequency of Contact with Parents	The OASIS Research Project, 2000
26 SAQ	E59-E62	Grandparent	New
VALUES AND ATTITUDES			
26-27 SAQ	E63	Care Responsibility for Elderly	The OASIS Research Project, 2000
27 SAQ	E64	Children's Duties to Parents	The OASIS Research Project, 2000
28 SAQ	E65	Financial Responsibility for Elderly	The OASIS Research Project, 2000
28 SAQ	E66	Responsibility for Future Personal Care	The OASIS Research Project, 2000
PSYCHIATRIC DISORDERS AND MENTAL HEALTH			
16	C8b	Self-Reported Mental Health	New
45-50	SC20-SC36	Screening Questions for Disorders	NCS-R
51-287	DP1-SA50b	<i>See Next Table for list of Mental Disorders</i>	NCS-R
167-175	PH1-PH20b	Pharmacoepidemiology	NCS-R
211; 7 SAQ whts	NSD1; C41	CES-D 12 items	NIMH, 1972; Radloff 1977; Roberts 1992
212; 8 SAQ whts	NSD2a-f; C42a-f	Six Item Serious Psychological Distress	NCHS; NCS, 1992
243-246	FH1-FH39	Family Mental Health History	Nesse/Weissman
MENTAL HEALTH SERVICES AND HELP-SEEKING			
various	various	Help for Specific Disorders	New
288-309	SR1-SR99	General Professional Services	NCS-R
309-311, 319-323	SR100-SR108, SR128-SR135	Alternative Treatment and Therapies	NCS-R
312-319	SR111-SR127a	Barriers to Treatment	NCS-R
324-325	F1-F6c	Personal Problem Identification	NSBA
326	F7	Informal Help Resources	NSBA
327-328	F8	Formal Help Resources	NSBA
329	F10	Barriers to Formal Help	NSBA
GROUP AND PERSONAL IDENTITY			
330	G1-G2	Group Identity	NSBA
29 SAQ	G24	Multidimensional Inventory of Black Identity modified (Centrality Scale, Private and Public Regard Scales)	Sellers, 1997
28 SAQ	G22	Being Black/Caribbean Awareness	Brown, T.
331	G3	Closeness to Racial/Ethnic Groups	NSBA
332	G4	Differential Closeness	NSBA
335	G11-G11a_wh	Common Fate	NSBA Panel
35-36 SAQ	H69	Exposure to Black Contexts	NSBA I
36-37 SAQ Carib	H70	Acculturation Rating Scale adapted (ARSMA-II)	Cuéllar, 1995

<u>Page Number</u>	<u>Question Number</u>	<u>Construct</u>	<u>Question Source</u>
RACIAL DISCRIMINATION AND IDEOLOGY			
332-333	G5-G5_cb	Black/Caribbean Stereotypes	NSBA I
30 SAQ	G25	Individual Social Stereotypes	NSBA I
333-334	G6-G6c_cb	Perceptions of Whites' Racial Group Intentions	NSBA
334-335	G7, G9, G10	Shade of Skin Color and Treatment	DAS 1995; Brown, K.
336-337	G12-G15	Major Experiences of Discrimination	YES Health; DAS 1995
338-339	G18-G20	Everyday Discrimination	DAS 1995
30 SAQ	G26	Black Autonomy	NSBA I
31 SAQ	G27a	Self and System Blame	NSBA modified
31 SAQ	G27b-d	Racial Ideology	DAS 1995
31 SAQ	G27e-f	Social Distance/Encroachment	Eurobarometer 30
31-32, 38 SAQ	G28, H77	Personal and Normative Social Distance (Pluralistic Ignorance)	DAS 1995; Eurobarometer 30
32 SAQ	G29-G30	Perceptions of Race Discrimination	NSBA I
32 SAQ	G31-G33	Interracial Contact	Eurobarometer 30
33 SAQ	G34-G35	Race Socialization	NSBA I
33-34 SAQ	G37	Stratification Beliefs:Egalitarianism, National Pride (b) Protestant Ethic, Authoritarianism, Social Dominance	DAS 1995; Eurobarometer 30
34 SAQ	G38	Feeling Thermometer (for 10 race/ethnic groups)	GSS; Eurobarometer 30
LIFE STRESSORS			
23	C27	Past Month Chronic Stress	NSBA
12 SAQ	C60	Negative Life Events	DAS 1995 modified
12 SAQ	C61	Difficult Life Situations	YES Health
351-352	TR1-TR4	September 11 Exposure	New
JOB STRESSORS			
31, 34	D13, D31	Workplace Discrimination	NSBA I; NSBA II
16 SAQ	D48	Chronic Job Discrimination	McNeilly et al, 1996 and Bobo & Suh, 2000 adapted
13 SAQ	D43	Role Conflict	Job Stress Survey, NIOSH
14 SAQ	D44	Intragroup Conflict	Job Stress Survey, NIOSH
14 SAQ	D45	Physical Environment	Job Stress Survey, NIOSH
15 SAQ	D46	Job Task and Decision Control	Job Stress Survey, NIOSH
15-16 SAQ	D47	Job Future Ambiguity	Job Stress Survey, NIOSH
FINANCIAL STRESSORS			
345	H18	Experiencing Material Hardship	CPS 1995 modified
353	H39-H40	Subjective Financial Assessment	NSBA; ACL
35 SAQ	H65-H67	Relative Deprivation	MacArthur SES Network
35 SAQ	H68	Subjective Social Class	Eurobarometer 30
353	H41	Food Insufficiency	Census Bureau CPS
353	H42	Financial Worries	NSBA
354	H42.5	Economic Assistance	NSBA Panel
354-355	H43-H46	Personal and Family Income	NSBA; DAS 1995
355-356	H49-H50a	Lifetime Welfare History	Danziger
40 SAQ	H84-H85	Precautionary Savings	New

<u>Page Number</u>	<u>Question Number</u>	<u>Construct</u>	<u>Question Source</u>
40 SAQ	H86	Wealth – Assets	PSID 1999 modified
41 SAQ	H87	Debts	PSID 1999 modified
41 SAQ	H88-H89	Own Group-Out Group Relative Deprivation	NEW?
POLITICS AND GOVERNMENT			
350	H35-H37	Liberal/Conservative Scales	DAS 1995
350	H38	Black Organization Group Participation	NSBA
36 SAQ	H72	Political Participation	NSBA
37 SAQ	H73-H74	Presidential Elections	NBES 1984
37 SAQ	H75	Party Preference	NSBA Panel modified
37-38 SAQ	H76	Economic, Political, and Social Ideology	Hutchings & Jackson
39 SAQ	H78-H79	Black Politics	NSBA I
DEMOGRAPHICS			
41-42	E13-E15a	Marital Status	NSBA; HRS
44; 21 SAQ	E22-E24.1; E39	Fertility: # of Children	NSBA; DAS
340	H1	Date of Birth	NSBA
340-342	H2-H6, H12	Early Life: Geography, Parents, and Health	NSBA and New
341-342	H7-H11b	Parents' Education and Employment	NSBA
343-344	H13-H17e	R's and Spouse's Education	NSBA I and NSBA II
343	H14	Military Service	NSBA
345-347	H19-H26	R's and Parents' Ethnicity and Race	ACL I modified; Census 2000 general race groups
43	E18	Spouse's Race	Census 2000 general race categories
348	H27	Parents' and Grandparents' Birthplace	New
357	H52-H56	Housing	NSBA; PSID modified
348-349	H28-H34	Immigration Status	New
37 SAQ Carib	H71	Years in US	New
360-361	J4-J5a	Birth Order	NSBA I
361	J6-J9	Three Generational Family Determination	NSBA I
TECHNOLOGY AND MEDIA			
360	J1a	Computer Ownership	New
360	J1-J3	Internet and E-Mail Access and Usage	New
42 SAQ	J11	Black/Caribbean Media Consumption	New
42 SAQ	J12	Negative Stereotypes in Media	New
OTHER			
39 SAQ	H80-H83	Knowledge of Saving Devices/Investment Options	New
358-359	H57-H61	Detention History	New
359	H62-H64	Non-Residential Household Members	New
INTERVIEWER OBSERVATIONS			
363	K1-KK6	Respondents' Attitudes and Behaviors	NSBA
363-364	K7-K10b	Interruptions	NSBA
365-366	K11-K16	Respondents' Difficulty with Interview	NSBA
366-367	K19	Interviewer's Assessment of Respondent	NSBA
367	K20	Household Conditions and Decorations	NSBA
367-368	K21-K22	Respondents' and Spouse's Shade of Skin Color	New

<u>Page Number</u>	<u>Question Number</u>	<u>Construct</u>	<u>Question Source</u>
368	K26-K27	Respondents' Mental Health	NSBA modified

IN GENERAL, HOW SATISFIED ARE YOU WITH YOUR LIFE AS A WHOLE?

- Very satisfied
- Somewhat satisfied
- Somewhat dissatisfied
- Very dissatisfied

HOW OFTEN DO YOU GET TOGETHER WITH YOUR NEIGHBORS?

- Nearly everyday -- 4 or more times a week
- At least once a week -- 1 to 3 times
- A few times a month -- 2 to 3 Times
- At least once a month
- A few times a year
- Never

***HOW OFTEN ARE THERE PROBLEMS WITH MUGGINGS, BURGLARIES,
ASSAULTS OR ANYTHING ELSE LIKE THAT AROUND HERE?***

- Very often
- Fairly often
- Not too often
- Hardly ever
- Never

***HOW MUCH OF A PROBLEM IS THE SELLING AND USE OF DRUGS AROUND
HERE?***

- § Very serious
- § Fairly serious
- § Not too serious

§ Not serious at all

HOW OFTEN DO YOU USUALLY ATTEND RELIGIOUS SERVICES?

- Nearly everyday - 4 or more times a week
- At least once a week - 1 to 3 times
- A few times a month - 1 to 3 times
- A few times a year
- Less than once a year

BESIDES REGULAR SERVICE, HOW OFTEN DO YOU TAKE PART IN OTHER ACTIVITIES AT YOUR CHURCH?

- Nearly everyday - 4 or more times a week
- At least once a week - 1 to 3 Times
- A few times a month - 1 to 3 Times
- A few times a year
- Never

HOW OFTEN DO YOU....?

- Nearly every day
- At least once a week
- A few times a month
- At least once a month
- A few times a year

- Never



HOW LIKELY IS IT THAT YOU WILL ACTUALLY REACH THIS STEP?

- Highly likely
- Somewhat likely
- Somewhat unlikely
- Highly unlikely

HOW DISAPPOINTED WOULD YOU BE IF YOU FOUND OUT THAT YOU COULD NEVER REACH STEP ____?

- Very disappointed

- Fairly disappointed
- Slightly disappointed
- Not at all disappointed

AT THE PRESENT TIME, HOW WOULD YOU RATE YOUR....?

- Excellent
- Very good
- Good
- Fair
- Poor

COMPARED TO ONE YEAR AGO, WOULD YOU RATE YOUR HEALTH IN GENERAL NOW AS?

- Much better now
- Somewhat better now
- Somewhat worse now
- Much worse now

DO YOU CONSIDER YOURSELF.....?

- Very overweight
- Somewhat overweight
- Only a little overweight
- Just about right
- Underweight

HOW MUCH DIFFICULTY DID YOU HAVE IN EACH OF THE FOLLOWING AREAS?

- None
- Mild

- Moderate
- Severe

HOW MUCH DID YOUR HEALTH-RELATED DIFFICULTIES INTERFERE WITH THE LIFE AND ACTIVITIES OF YOUR CLOSE FRIENDS AND FAMILY MEMBERS DURING THE PAST 30 DAYS?

- None
- A little
- Some
- A lot
- Extremely

ARE YOU WORKING NOW?

- Working now full time
- Working now part time
- Temporarily laid off
- Maternity Leave
- Illness/Sick Leave
- Unemployed
- Retired
- Full-time Homemaker/housewife
- Student
- Permanently disabled

IS YOUR WORK SUPERVISOR A?

- Black male
- White male
- Black female

- White female
- No supervisor
- Other (SPECIFY) _____

ARE THE BLACK PEOPLE IN YOUR WORK GROUP.....?

- Mostly Caribbean
- Half Caribbean
- Mostly Black Americans

IS YOUR WORK GROUP.....?

- All Black
- Mostly Black
- About half Black
- Mostly White
- All White except you
- Other (SPECIFY) _____

WAS YOUR WORK SUPERVISOR A?

- Black male
- White male
- Black female
- White female
- No supervisor

- Other (SPECIFY) _____

WERE THE BLACK PEOPLE IN YOUR WORK GROUP...?

- Mostly Caribbean
- Half Caribbean
- Mostly Black Americans

WAS YOUR WORK GROUP....?

- All Black
- Mostly Black
- About half Black
- Mostly White
- All White except you
- Other (SPECIFY) _____

HOW OFTEN DO YOU SEE, WRITE OR TALK ON THE TELEPHONE WITH.....?

- Nearly everyday (4 or more times a week)
- At least once a week (1 to 3 times)
- A few times a month (2 to 3 times)
- At least once a month
- A few times a year
- Hardly ever

- Never

ARE YOU CURRENTLY.....?

- Married
- Partner
- Separated
- Divorced
- Widowed
- Never married

WHAT DO YOU THINK THE LIKELIHOOD IS THAT YOU WILL EVER GET MARRIED/REMARRIED?

- Highly likely
- Somewhat likely
- Somewhat unlikely
- Highly unlikely

WHICH DO YOU FEEL BEST DESCRIBES YOUR SPOUSE'S/CURRENT PARTNER'S RACIAL BACKGROUND?

- Black or African American
- White
- American Indian or Alaska Native
- Asian
- Pacific Islander
- Other(SPECIFY)_____

TAKING ALL THINGS TOGETHER, HOW SATISFIED ARE YOU WITH YOUR MARRIAGE/CURRENT RELATIONSHIP?

- Very satisfied
- Somewhat satisfied
- Somewhat dissatisfied
- Very dissatisfied

HOW LONG WAS/HAS THIS BEEN A PROBLEM FOR YOU?

- Less than a month
- A month or so
- Two or three months
- Four to six months
- Seven months to a year
- More than a year

FROM THE LIST, PLEASE TELL ME ALL THE PEOPLE YOU MAY HAVE TALKED TO ABOUT YOUR PROBLEM. PLEASE TELL ME ONE PERSON AT A TIME.

- Husband/Wife/Partner
- Son
- Daughter
- Father
- Mother
- Brother
- Sister

- Other Relative
- Friend
- Didn't talk to anyone (else)

WHERE DID YOU SEE THAT PERSON?

- Hospital
- Outpatient clinic
- Private office
- Social Service Agency
- Jail/Prison
- Church
- Other(SPECIFY)_____

COMPARED TO MOST BLACK PEOPLE, WHAT SHADE OF SKIN COLOR.....?

- Very dark brown
- Dark brown
- Medium brown
- Light brown
- Very light brown

WHEN WAS THE LAST TIME THIS HAPPENED?

- § Within the last week
- § Within the last month

- § Within the last year
- § More than a year ago

WHAT DO YOU THINK WAS THE MAIN REASON FOR THIS/THESE EXPERIENCE (S)?

- Your Ancestry or National Origins
- Your Gender
- Your Race
- Your Age
- Your Height or Weight
- Your Shade of Skin Color
- Other (SPECIFY) _____

IN YOUR DAY-TO-DAY LIFE, HOW OFTEN DO ANY OF THE FOLLOWING THINGS HAPPEN TO YOU?

- Almost everyday
- At least once a week
- A few times a month
- A few times a year
- Less than once a year

WAS THAT IN A.....?

- Rural or country area
- Small town
- Small city
- Suburb of a city
- Large city
- Military Base or Reservation

UP TO AGE 16 WHAT MAN MOSTLY RAISED YOU?

- Biological Father
- Step Father
- Grandfather
- Uncle
- Other (SPECIFY) _____

UP TO AGE 16, WHAT WOMAN MOSTLY RAISED YOU?

- Biological Mother
- Step Mother
- Grandmother
- Aunt

- Other (SPECIFY) _____

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- Black or African American
- White
- American Indian or Alaska Native
- Asian
- Pacific Islander
- Other (Specify) _____

DO YOU THINK YOUR SOCIAL AND ECONOMIC SITUATION HAS.....?

- Improved a great deal
- Improved a little
- Stayed the same
- Worsened a little
- Worsened a great deal

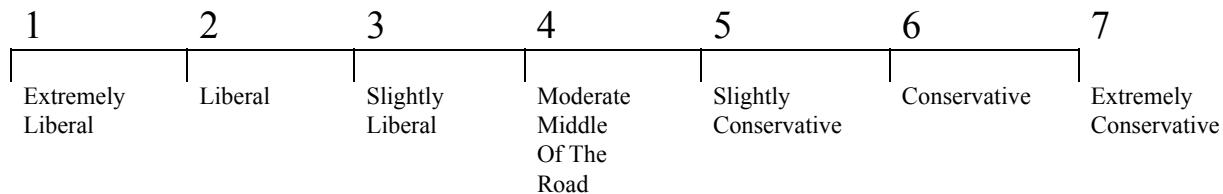
HOW WELL DO YOU FEEL THAT YOU SPEAK ENGLISH?

- Not at all
- A little

- Somewhat
- Well
- Very well

WHEN YOU FIRST CAME TO THIS COUNTRY, WHAT KIND OF VISA DID YOU HAVE?

- Permanent or Green Card
- Visitors
- Student
- Work/Working
- Other (SPECIFY) _____



HOW DIFFICULT IS IT FOR YOU/YOUR FAMILY TO MEET THE MONTHLY PAYMENTS ON YOUR/YOUR FAMILY'S BILLS?

- Extremely difficult
- Very difficult
- Somewhat difficult
- Slightly difficult
- Not difficult at all

A)	Less than \$0 (Loss)	M)	\$10,000 - \$10,999	Y)	\$30,000 - \$34,999
B)	\$0 (None)	N)	\$11,000 - \$11,999	Z)	\$35,000 - \$39,999
C)	\$1 - \$999	O)	\$12,000 - \$12,999	AA)	\$40,000 - \$44,999
D)	\$1,000 - \$1,999	P)	\$13,000 - \$13,999	BB)	\$45,000 - \$49,999
E)	\$2,000 - \$2,999	Q)	\$14,000 - \$14,999	CC)	\$50,000 - \$74,999
F)	\$3,000 - \$3,999	R)	\$15,000 - \$15,999	DD)	\$75,000 - \$99,999
G)	\$4,000 - \$4,999	S)	\$16,000 - \$16,999	EE)	\$100,000 - \$149,000
H)	\$5,000 - \$5,999	T)	\$17,000 - \$17,999	FF)	\$150,000 - \$199,999
I)	\$6,000 - \$6,999	U)	\$18,000 - \$18,999	GG)	\$200,000 - \$299,999
J)	\$7,000 - \$7,999	V)	\$19,000 - \$19,999	HH)	\$300,000 - \$499,999
K)	\$8,000 - \$8,999	W)	\$20,000 - \$24,999	II)	\$500,000 - \$999,999
L)	\$9,000 - \$9,999	X)	\$25,000 - \$29,999	JJ)	\$1,000,000 or more

ABOUT HOW MUCH OF THE TIME BEFORE YOU TURNED 18 DID YOUR FAMILY RECEIVE PUBLIC ASSISTANCE?

- Just briefly
- Less than half the time
- About half the time
- Most of the time
- Almost all of the time

HAVE YOU EVER SPENT TIME IN A.....?

- Reform school
- Detention center
- Jail
- Prison

HOW OFTEN DO YOU USE THE INTERNET OR SEND EMAIL?

- Everyday
- 2 to 3 Times a Week
- Weekly
- Occasionally

WHERE DO YOU USE THE INTERNET OR SEND EMAIL?

- Office (work)
- School
- Home
- Library/ Community Center

WAS THERE EVER A TIME IN YOUR LIFE WHEN YOU HAD A STRONG FEAR OF...

GROUP 1: ANIMALS

- Bugs
- Snakes, dogs
- Any other animals

GROUP 2: NATURAL ENVIRONMENT

- Still water, like in a swimming pool or lake
- Storms
- Thunder or lightning

GROUP 3: MEDICAL SETTINGS

- Going to the dentist
- Going to the doctor
- Getting a shot or injection
- Seeing blood
- Seeing injury
- Being in a hospital or doctor's office

GROUP 4: CLOSED SPACES

- Caves

- Tunnels
- Closets
- Elevators

GROUP 5: HIGH PLACES

- Roofs
- Balconies
- Bridges
- Staircases

GROUP 6: FLYING

- Flying
- Airplanes

**WAS THERE EVER A TIME IN YOUR LIFE WHEN YOU FELT VERY AFRAID OR
REALLY, REALLY SHY WITH PEOPLE LIKE...**

- Meeting new people
- Going to parties
- Going on a date
- Using a public bathroom

WAS THERE EVER A TIME IN YOUR LIFE WHEN FELT AFRAID OF.....

- Being in crowds
- Going to public places
- Traveling alone
- Traveling away from home

**WHICH PROBLEMS DID YOU HAVE MOST OF THE DAY NEARLY EVERY DAY?
(CHECK OFF "YES" RESPONSES IN BOXES Ö)**

- Q Sad, empty, or depressed
- Q So sad that nothing could cheer you up
- Q Discouraged about your life
- Q Hopeless about the future

- Q Lost interest in almost all things
- Q Felt like nothing was fun even when good things happened
- Q Much smaller appetite than usual
- Q Much larger appetite than usual
- Q Gain weight without trying to
- Q Lost weight without trying to
- Q A lot more trouble than usual falling asleep
- Q Slept a lot more than usual
- Q Slept much less than usual
- Q Tired or low in energy
- Q A lot more energy than usual
- Q Talked or moved more slowly than is normal for you
- Q Anyone else noticed that you were talking or moved slowly
- Q So restless or jittery that you paced up and down

(CHECK OFF “YES” RESPONSES IN BOXES Ö)

- Q Anyone else noticed that you were restless
- Q Thoughts came much more slowly than usual
- Q Thoughts seemed to jump from one thing to another
- Q A lot more trouble concentrating than is normal for you
- Q Unable to make up your mind about things
- Q Lost self-confidence
- Q Not as good as other people
- Q Totally worthless
- Q Guilty
- Q Irritable, grouchy, or in a bad mood
- Q Nervous or anxious
- Q Sudden attacks of intense fear or panic
- Q Thought a lot about death

- Thought it would be better if you were dead
- Thought about committing suicide
- Made suicide plan
- Made a suicide attempt
- Could not cope with everyday responsibilities
- Wanted to be alone rather than spend time with friends or relatives
- Less talkative than usual
- Often in tears

PICK THE ONE STATEMENT IN EACH SERIES THAT COMES CLOSEST TO YOUR EXPERIENCE DURING THAT WORST (SEVERAL DAYS/TWO WEEKS)

PROBLEMS FALLING ASLEEP:

- 1) You never took longer than 30 minutes to fall asleep.
- 2) You took at least 30 minutes to fall asleep, less than half the time.
- 3) You took at least 30 minutes to fall asleep, more than half the time.
- 4) You took more than 60 minutes to fall asleep, more than half the time.

WAKING UP AT NIGHT

- 1) You did not wake up at night.
- 2) You had a restless, light sleep with few brief awakenings each night.
- 3) You woke up at least once a night, but you got back to sleep easily.
- 4) You woke up more than once a night and stayed awake for 20 minutes or more, more than half the time.

WAKING UP TOO EARLY

- 1) Most of the time, you woke up no more than 30 minutes before you needed to get up.
- 2) More than half the time, you woke up more than 30 minutes before you needed to get up.
- 3) You almost always woke up at least one hour or so before you needed to, but you went back to sleep eventually.
- 4) You woke up at least one hour before you needed to and couldn't get back to sleep.

AMOUNT OF SLEEP YOU GOT EACH NIGHT

- 1) You slept no longer than 7-8 hours/night, without napping during the day.
- 2) You slept no longer than 10 hours in a 24-hour period including naps.
- 3) You slept no longer than 12 hours in a 24-hour period including naps.
- 4) You slept longer than 12 hours in a 24-hour period including naps.

SADNESS

- 1) You did not feel sad.
- 2) You felt sad less than half of the time.
- 3) You felt sad more than half of the time.
- 4) You felt sad nearly all the time.

CONCENTRATING AND MAKING DECISIONS

- 1) There was no change in your usual capacity to concentrate or make decisions.
- 2) You occasionally felt indecisive or found that your attention wandered.
- 3) Most of the time, you struggled to focus your attention or to make decisions.
- 4) You couldn't concentrate well enough to read or you couldn't make even minor decisions.

FEELING DOWN ON YOURSELF

- 1) You saw yourself as equally worthwhile and deserving as other people.
- 2) You were more self-blaming than usual.
- 3) You largely believed that you caused problems for others.
- 4) You thought almost constantly about major and minor defects in yourself.

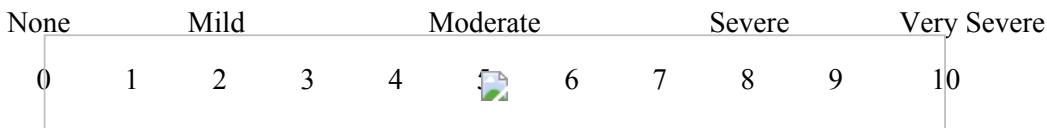
INTEREST IN YOUR DAILY ACTIVITIES

- 1) There was no change from usual in how interested you were in other people or activities.
- 2) You noticed that you were less interested in people or activities.
- 3) You found you had interest in only one or two of your formerly pursued activities.
- 4) You had virtually no interest in formerly pursued activities.

ENERGY

- 1) There was no change in your usual level of activity.
- 2) You got tired more easily than usual.
- 3) You had to make a big effort to start or finish your usual daily activities (for example, shopping, homework, cooking, or going to work).
- 4) You really couldn't carry out most of your usual daily activities because you just didn't have the energy.

INTERFERENCE SCALE



DID YOU EVER FEEL SHY, AFRAID OR UNCOMFORTABLE IN THE FOLLOWING SITUATIONS...

(CHECK OFF "YES" RESPONSES IN BOXES Ö)

- q Meeting new people
- q Talking to people in authority
- q Speaking up in a meeting or class
- q Going to parties or other social gatherings
- q Acting, performing, or giving a talk in front of an audience
- q Taking an important exam or interviewing for a job
- q Working while someone watches
- q Entering a room when others are already present
- q Talking with people you don't know very well
- q Expressing disagreement to people you don't know very well
- q Writing or eating or drinking while someone watches
- q Urinating in a public bathroom or using a bathroom away from home
- q Being in a dating situation
- q Any other social or performance situation where you could be the center of attention or where something

embarrassing might happen

DID YOU EVER HAVE 2 OR MORE OF THE FOLLOWING PROBLEMS?

- Heart pounding or racing
- Sweating
- Trembling
- Feeling sick to your stomach
- Having a dry mouth
- Having chills or hot flushes
- Feeling numbness or tingling sensations
- Having trouble breathing normally
- Feeling like you were choking
- Having pain or discomfort in your chest
- Feeling dizzy or faint
- Afraid that you might die
- Fear of losing control, going crazy, or passing out
- Feeling like you were “not really there,” like you were watching a movie of yourself
- Feeling that things around you were unreal

DID YOU EVER STONGLY FEAR...

(CHECK OFF “YES” RESPONSES IN BOXES ☐)

- q Being home alone
- q Being in crowds
- q Traveling away from home

- q Traveling alone or being alone away from home
- q Using public transportation
- q Driving a car
- q Standing in a line in a public place
- q Being in a department store, shopping mall, or supermarket
- q Being in a movie theater, auditorium, lecture hall, or church
- q Being in a restaurant or any other public places
- q Being in a wide, open field or street

DID YOU HAVE 1 OR MORE OF THE FOLLOWING REACTIONS?

- Having trouble breathing normally
- Feeling like you were choking
- Having pain or discomfort in your chest
- Feeling sick to your stomach
- Feeling dizzy or faint
- Fear of losing control, going crazy, or passing out
- Afraid that you might die
- Having chills or hot flushes
- Feeling numbness or tingling sensations
- Feeling like you were “not really there,” like you were watching a movie of yourself
- Feeling that things around you were not real or like a dream

EXAMPLES OF COMMONLY MENTIONED REASONS FOR BEING ANXIOUS

DIFFUSE WORRIES, SUCH AS . . .

- Everything
- Nothing in particular

PERSONAL PROBLEMS, SUCH AS . . .

- Finances
- Success at school or work
- Social life
- Love life
- Relationships at school or work
- Relationships with family
- Physical appearance
- Physical health
- Mental health
- Substance use

PHOBIAS AND OBSESSIVE-COMPULSIVE SITUATIONS, SUCH AS . . .

- Social phobias (e.g. meeting people after moving to a new town)
- Agoraphobia (e.g. leaving home alone after a divorce)
- Specific phobias (e.g. fears of bugs, heights, or closed spaces)
- Obsessions (e.g. worry about germs)
- Compulsions (e.g. repetitive hand washing)

NETWORK PROBLEMS, SUCH AS....

- Being away from home or apart from loved ones
- The health or welfare of loved ones ----first mention
- The health or welfare of loved ones ----second mention
- The health or welfare of loved ones ----third mention

SOCIETAL PROBLEMS, SUCH AS . . .

- Crime/violence
- The economy
- The environment (e.g. global warming, pollution)
- Moral decline of society (e.g. commercialism, decline of the family)
- War/revolution

DID ANY OF THESE 3 EXPERIENCES EVER HAPPEN TO YOU?

- A. You seriously thought about committing suicide
- B. You made a plan for committing suicide
- C. You attempted suicide

WHICH OF THESE 3 STATEMENTS BEST DESCRIBES YOUR SITUATION?

1. I made a serious attempt to kill myself and it was only luck that I did not succeed.
2. I tried to kill myself, but knew that the method was not fool-proof.
3. My attempt was a cry for help; I did not intend to die.

WHAT METHOD DID YOU USE?

- A. Gun
- B. Razor, knife or other sharp instrument
- C. Overdose of prescription medications
- D. Overdose of over-the-counter medications
- E. Overdose of other drug (e.g. heroin, crack, alcohol)
- F. Poisoning (e.g. carbon monoxide, rat poison)
- G. Hanging, strangulation, suffocation

- H. Drowning
- I. Jumping from high places
- J. Motor vehicle crash
- K. Other (Please describe) _____

ALCOHOL EQUIVALENTS

HARD LIQUOR

1 mixed drink	= 1 drink
1 shot glass	= 1 drink
½ pint	= 6 drinks
1 pint	= 12 drinks
1 fifth	= 20 drinks
1 quart or liter	= 24 drinks

-

WINE

1 glass	= 1 drink
1 bottle	= 6 drinks
1 "wine cooler"	= 1 drink
1 gallon	= 30 drinks

-

BEER OR ALE

1 12 oz bottle	= 1 drink
1 12 oz can	= 1 drink
1 40 oz bottle	= 3 drinks
1 six pack	= 6 drinks
1 pitcher	= 5 drinks
1 case	= 24 drinks

COCAINE

Powder	Free base	Paste
Crack	Coca leaves	

SEDATIVES AND TRANQUILIZERS (SLEEPING PILLS, "DOWNERS," "NERVE PILLS"), SUCH AS . . .

Amobarbital	Dalmane	Limbital	Paxipam	Sk-Lygen
Amytal	Deprol	Mebaral	Pentobarbital	Sopor
Ativan	Diazepam	Meprobamate	Phenobarbital	Tranxene
Barbiturate	Doriden	Methaqualone	Placidyl	Tuinal
Buticap	Durax	Menrium	Restoril	Valium
Butisol	Equanil	Miltown	Secobarbital	Xanax
Centrax	Halcion	Nembutal	Seconal	
Chloral Hydrate	Librium	Noludar	Serax	

STIMULANTS (AMPHETAMINES, "UPPERS," "SPEED," "ICE," "CRANK"), SUCH AS . . .

Benzedrine ("bennies")	Eskatrol	Paxipam	Ritalin	Tepanil
Biphedamine	Fastin	Pentobarbital	Sanorex	Tranxene
Cylert	Ionamin	Phenobarbital	Secobarbital	Tuinal
Desoxyn	Mazanor	Plegine	Seconal	Valium
Dexamyl	Methamphetamine	Placidyl	Serax	Voranil
Dexedrine ("dexies")	Methedrine	Pondomin	Sk-Lygen	Xanax
Dextroamphetamine	Obredrin-L.A.	Preludin	Sopor	
Didrex	Paxipam	Restoril	Tenuate	

ANALGESICS (PAINKILLERS), SUCH AS . . .

Anileridine	Levo-Dromoran	Stadol
Buprenex	Methadone	Talacen
Codeine	Morphine	Talwin
Darvon	Percodan	Talwin NX
Demerol	Phenaphen with codeine	Tylenol with codeine
Dilaudid	Propoxyphene	Wygesic
Dolene	SK-65	

OTHER DRUGS, SUCH AS . . .

Heroin	Glue	Peyote
Opium	LSD (acid, white lightning)	

IN THE PAST 12 MONTHS, DID YOU TAKE ANY OF THE FOLLOWING TYPES OF PRESCRIPTION MEDICATIONS UNDER THE SUPERVISION OF A DOCTOR, FOR YOUR EMOTIONS OR NERVES OR YOUR USE OF ALCOHOL OR DRUGS?

- Sleeping pills or other sedatives, (such as ambien or sonata)
- Anti-depressant medications, (such as prozac or zoloft)
- Tranquilizers, (such as xanax or ativan)
- Amphetamines or other stimulants, (such as ritalin or dextroamphetamine)
- Anti-psychotic medications, (such as haldol or risperdal)

DID YOU TAKE ANY OF THE FOLLOWING MEDICINES?

ophenazine zin	Dalmane Depacon	Imipramine Inapsine	Neuramate Neurontin	Seroquel Sertraline
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erall	Depakene	Inderal	Norpramine	Serzone
azolam	Depakote	Isocarboxazid	Nortriptyline	Sinequan
ntadine	Desipramine	Janimine	Obetrol	Sodium Pentobarbital
ien	Desoxyn	Klonopin	Olanzapine	Sodium Valproate
riptyline	Desoxyn Gradumet	Lamictal	Orap	Sonata
barbital	Desyrel	Lamotrigine	Oxazepam	Stelazine
xapine	Dexedrine	Librax	Oxybutynin	Surmontil
phetamines	Dextroamphetamine	Libritabs	Pamelor	Symmetrel
tal	Dextrostat	Librium	Parnate	Taractan
rani	Dihydroergotamine Mesylate	Limbitrol	Paroxetine	Tegretol
buse	Diazepam	Lithium	Paxil	Temazepam
depressant	Diphenhydramine	Lithium Carbonate	Paxipam	Thioridazine
psychotic	Disulfiram	Lithium Citrate Syrup	Pemoline	Thiothixene
achloral	Divalproex	Lithobid	Permitil	Thorazine
ne	Doral	Lithonate	Perphenazine	Tindal
idin	Doriden	Lithotabs	Phenelzine	Tofranil
an	Doxepin	Lorazepam	Phenergan	Tranxene
ityl	Droperidol	Loxapine	Phenobarbital	Tranylcypromine
dryl	Duralith	Loxitane	Phentyoin	Trazodone
tropine	Effexor	Ludiomil	Pimozide	Triavil
option	Elavil	Luminal	Placidyl	Triazolam
par	Epitol	Luvox	Prazepam	Trifluoperazine
iron	Equanil	Maprotiline	Prolixin	Triflupromazine
amazepine	Eskalith	Marplan	Prolixin Depot	Trihexyphenidyl
atrol	Eskalith CR-450	Mellaril	Propofol	Trilafon
pres	Estazolam	Meprobamate	Propranolol	Trimipramine
xa	Ethchlorvynol	Mesoridazine	Prosom	Valium
ral Hydrate	Etrafon	Methamphetamine	Protriptyline	Valproate
rdiazepoxide	Fluoxetine	Methotrimeprazine	Prozac	Valproic Acid
rpromazine	Fluphenazine	Methyl-Phenidate	Quazepam	Venlafaxine
opram	Flurazepam	Midazolam	Quetiapine	Versed
nipramine	Fluvoxamine	Miltown	Remeron	Vesprin
azepam	Gabapentin	Mirtazapine	Reserpine	Vistaril
idine	Gen-Xene	Mitran	Restoril	Vivactil
azepate	Glutethimide	Moban	Risperdal	Wellbutrin
azil	Halazepam	Mocllobemide	Risperidone	Xanax
rothixene	Halcion	Molindone	Ritalin	Zaleplon
apine	Haldol	Nardil	Secobarbital	Zoloft
aril	Haldol Depot	Navane	Seconal	Zolpidem
entin	Haloperidol	Nefazodone	Serax	Zyban
rt	Hydroxyzine	Nembutal	Serentil	Zyprexa

Insert Medication page 72 here

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WHAT PROBLEMS DID YOU TAKE THE MEDICINE FOR?

I. Mood

- Sadness/ depression/ crying

- Manic mood
- Anger or irritability
- Nerves/ anxiety
- Panic
- Suicidal thoughts

II. Physical symptoms

- Low energy
- Poor appetite
- Poor sleep
- Physical pain

III. Cognitive symptoms

- Poor concentration
- Poor memory

IV. Role functioning

- Little or no sexual functioning
- Marital problems
- Not getting along with others
- Poor work performance

V. Other

- Alcohol/ drug problems

WHICH OF THESE ARE REASONS WHY YOU STOPPED TAKING THE MEDICINE?

- The medicine was not helping
- You thought the problem would get better without more medicine
- You couldn't afford to pay for the medicine
- You were too embarrassed to continue taking the medicine
- You wanted to solve the problem without medications
- The medicine caused side-effects that made you stop
- You were afraid that you would get dependent on the medication
- Someone in your personal life pressured you to stop
- Any other reason for stopping

DID YOU EVER HAVE ANY OF THESE STRESSFUL EXPERIENCES?

(CHECK OFF "YES" RESPONSES IN BOXES Ø)

GROUP 1: Traumatic Personal Experiences

- q Combat experience
- q Relief worker in war zone
- q Civilian in war zone
- q Civilian in region of terror
- q Refugee
- q Kidnapped
- q Toxic chemical exposure
- q Automobile accident
- q Other life-threatening accident
- q Natural disaster
- q Man-made disaster
- q Life-threatening illness

GROUP 2: Personal Violence

- q Beaten up as a child by caregiver
- q Beaten up by a spouse or romantic partner
- q Beaten up by someone else
- q Mugged or threatened with a weapon
- q Raped
- q Sexually assaulted
- q Stalked

GROUP 3: Events Affecting Others

- q Unexpected death of a loved one
- q Child's serious illness
- q Traumatic event to loved one
- q When you were a child, witnessed serious physical fights at home
- q Witnessed death or dead body or saw someone seriously hurt
- q Accidentally caused serious injury or death
- q Purposely injured, tortured, or killed someone
- q Saw atrocities

DID YOU HAVE ANY OF THESE REACTIONS?

(CHECK OFF "YES" RESPONSES IN BOXES Ø)

GROUP 1: Traumatic Personal Experiences

- q Trying not to think about it
- q Staying away from reminders of it
- q Being unable to remember parts of it

- q Losing interest in things you used to enjoy
- q Feeling emotionally distant from other people
- q Trouble feeling normal feelings
- q Feeling you have no reason to plan for the future

GROUP 2: Personal Violence

- q Unwanted memories
- q Unpleasant dreams
- q Flashbacks
- q Getting very upset when reminded of it
- q Physical reactions

GROUP 3: Events Affecting Others

- q Sleep problems
- q Irritability
- q Trouble concentrating
- q Being more aware or watchful
- q Being jumpy or easily startled

HOW OFTEN HAVE YOU FELT THIS WAY DURING THE PAST WEEK.....

- Rarely or none of the time
- Some or a little of the time
- Occasionally or a moderate amount of the time
- Most or all of the time

- All of the time
- Most of the time
- Some of the time
- A little of the time

- None of the time
- Within the last 2 weeks
- 2 weeks to less than a month ago
- 1 month to less than 6 months ago
- 6 months to less than 1 year ago
- In last 12 months
- More than a year ago

HOW MANY TIMES DID YOU EVER MAKE A BET OF ANY KIND?

- Never
- 1-10 Times
- 11-50 Times
- 51-100 Times
- 101-500 Times
- 501-1000 Times
- More Than 1000

***DID YOU EVER IN YOUR LIFETIME GO TO SEE ANY OF THESE
PROFESSIONALS FOR PROBLEMS WITH YOUR EMOTIONS OR NERVES OR
YOUR USE OF ALCOHOL OR DRUGS?***

- A. A psychiatrist
- B. General practitioner or family doctor
- C. Any other medical doctor, like a cardiologist, gynecologist or urologist
- D. Psychologist
- E. Social worker
- F. Counselor
- G. Any other mental health professional, such as a psychotherapist or a mental health nurse
- H. A nurse, occupational therapist, or other health professional
- I. A religious or spiritual advisor like a minister, priest, or rabbi
- J. Any other healer, like an herbalist, chiropractor, or spiritualist

IN WHICH OF THESE LOCATIONS DID YOU SEE THE PROFESSIONAL?

- A. Hospital emergency department
- B. Psychiatric outpatient clinic
- C. Drug or alcohol outpatient clinic
- D. Private office
- E. Social service agency or department
- F. Program in jail or prison
- G. Drop-in center or program for people with emotional problems with alcohol or drugs
- H. Church or other religious building

WHICH OF THESE THREE STATEMENTS BEST DESCRIBES WHY YOU DIDN'T WANT TO SEE A PROFESSIONAL?

- 1. I didn't think I had a problem
- 2. I had a problem, but thought I could handle it on my own

3. I thought that I needed help but didn't believe professional treatment would be helpful

WHICH OF THESE WERE THE MAIN THINGS YOU WERE HOPING TO GET FROM TREATMENT?

- A. To help with your emotions (e.g., Sadness, anger)
- B. To control problem behaviors (e.g., Drinking problems, gambling)
- C. To deal with a general body complaints (e.g., Tiredness, headaches)
- D. To help make a life decision (e.g., To get married or change jobs)
- E. To cope with ongoing stress (e.g., Job stress, marital problems)
- F. To cope with recent stressful events (e.g., Divorce, death of a loved one)
- G. To come to terms with your past (e.g., Feelings about your childhood)

DID YOU USE ANY OF THESE THERAPIES IN THE PAST 12 MONTHS

- Acupuncture
- Biofeedback
- Chiropractic
- Energy healing
- Exercise or movement therapy
- Herbal therapy (e.g., St. John's wort, chamomile)
- High dose mega-vitamins
- Homeopathy
- Hypnosis
- Imagery techniques
- Massage therapy
- Prayer or other spiritual practices
- Relaxation or meditation techniques

- Special diets
- Spiritual healing by others

WHAT TYPES OF HERBAL MEDICINES DID YOU USE?

- Chamomile
- Kava
- Lavender
- St. John's wort
- Valerian
- Chasteberry
- Black cohosh

WHAT KIND OF SELF-HELP GROUP DID YOU GO TO IN THE PAST 12 MONTHS?

- A. Groups for people with substance problems (such as Alcoholics Anonymous or Rational Recovery)
- B. Groups for people with emotional problems (such as Grow, the Manic Depressive Association, or Emotions Anonymous)
- C. Groups for people with eating problems
- D. Groups for dealing with the death of a loved one (such as The Compassionate Friends or Widow to Widow)
- E. Groups for people making other life transitions (such as Parents Without Partners or Empty Nesters)
- F. Groups for survivors (such as Adult Children of Alcoholics or Survivors of Childhood Sexual Abuse)
- G. Groups for people with physical disabilities or illnesses (such as Living with Cancer or Living with Aids)
- H. Parent support groups (such as Toughlove or Parents Anonymous)
- I. Groups for the families of people with a physical illness (such as the Candlelighters or Families of Children with Cancer)
- J. Groups for the families of people with emotional or substance problems (such as The National Alliance for the Mentally Ill or Al Anon)

K. Any other self-help group, mutual help group, or support group

WHICH OF THE FOLLOWING STATEMENTS BEST DESCRIBES THE RELATIONSHIP BETWEEN YOUR PARTICIPATION IN THE SELF-HELP GROUP AND YOUR SEEING A PROFESSIONAL?

1. A professional ran the group
2. A professional asked you to attend the group as part of your treatment, but the group was not run by a professional
3. You attended the self-help group at the same time you saw a professional, but the two were not related
4. You attended the self-help group at a different time than when you saw a professional

DID YOU EVER TAKE ANY OF THESE MEDICATIONS?

Acetophenazine	Perphenazine
Centrax	Pimozide
Chlorpromazine	Prazepam
Clorprothixene	Prolixin
Clozapine	Quetiapine
Clozaril	Risperdal
Droperidol	Risperidone
Fluphenazine	Serentil
Haldol	Seroquel
Haloperidol	Stelazine
Inapsine	Taractan
Loxapine	Thioridazine
Loxitane	Thiothixene
Mellaril	Thorazine
Mesoridazine	Tindal
Moban	Trifluoperazine
Molindone	Triflupromazine
Navane	Trilafon
Olanzapine	Vesprin
Orap	Zyprexa
Permitil	

A1.

This is just a general life satisfaction question. R should use their own definition for this question.

A2.

We want to know about all groups in R's neighborhood, informal groups of neighbors getting together for some purpose, as well as formal groups with formal memberships, etc. If R answers in terms of number of times a week, check 1 if 4 or more times a week, and 2 if 1 to 3 times. If R answers in general terms (e.g. a lot, not often, once in a while) ask R to choose the most appropriate response category in A2.

A3.

Neighborhood is a relative term, and each R will have his/her own definition of what neighborhood means, in terms of what he/she thinks of as his/her neighborhood. We don't want to impose any particular definition of neighborhood on R.

This question asks about the frequency of crime in R's neighborhood. If R says he/she does not know, ask for his/her best guess as to how often these things occur. We want to know whether R feels there is a problem of crime in the neighborhood.

A4.

Self-explanatory. Again, if R says he/she does not know, ask for his/her best guess.

Neighborhood is a relative term, and each R will have his/her own definition of what neighborhood means, in terms of what he/she thinks of as his/her neighborhood. We don't want to impose any particular definition of neighborhood on R.

A5.

We want to know about all groups in R's neighborhood, informal groups of neighbors getting together for some purpose, as well as formal groups with formal memberships, etc.

Neighborhood is a relative term, and each R will have his/her own definition of what neighborhood means, in terms of what he/she thinks of as his/her neighborhood. We don't want to impose any particular definition of neighborhood on R.

A5a.

We use the phrase "involved with" rather than "Do you belong to any of these groups" because "belong"

implies membership in a formal group, and we are interested in all types of groups including very informal ones.

A6.

Neighborhood is a relative term, and each R will have his/her own definition of what neighborhood means, in terms of what he/she thinks of as his/her neighborhood. We don't want to impose any particular definition of neighborhood on R.

A6b.

Here we want to find out if R has a store that they can buy grocery items, for example a large chain grocery store or wholesale market. We are interested if R's have the opportunity to purchase items at a reasonable price, we don't want independently owned small stores or party stores, where prices tend to be somewhat higher than chain supermarkets or grocery stores.

A6e.

Check cashing outlet or store where checks can be cashed.

B1.

If R does not mention the denomination, please probe. If R mentions a particular church but does not mention denomination, please probe.

B2.

We want to know if R has attended religious services at a church since R has been an adult, not if R has been in church for weddings, funerals or other ceremonies. We add the phrase "or other place of worship" for Rs who are not Christians.

The "yes" response is for Rs who have attended any religious services since they were 18, even if they attend very rarely. Only those who have never attended church as adults are to be checked "No" and skip to question B16.

B3.

This question asks for R's frequency of attendance in his/her church or place of worship. If R answers in

terms of number of times a week, check 1 if 4 or more times a week, and 2 if 1 to 3 times a week. If R answers in general terms (e.g. “rarely”, “often”) ask R to choose the most appropriate category in B3 responses.

B4.

Here we want to know about the amount of hours spent at R’s church or place of worship on the particular day they go to worship (e.g. Saturday, Sunday). If R responds “a couple of hours”, ask R to estimate or give an average number of hours spent at church.

B5.

Please note that B5 asks whether R is a member of a church, not whether R is an officer of the church.

B6.

This question asks about the participatory activities (beyond attending the regular services) of respondents. We want to know how often you participate in those other activities at your church. This includes things like meetings, social gatherings, fund raising, groups, etc.

B7.

This question ties into question B6 about “other activities”. Now we want to know the amount of time you spend participating in the activities.

B8.

This question asks for R’s frequency of contact with members of his/her church or place of worship. If R asks if it is okay to include e-mail, reply “no, we are interested in only face-to-face contact, writing letters or telephone contact”.

B9.

Note: This is a hypothetical question. We are interested in how many people in R’s church are available to help R. We are interested in R’s subjective judgment of the number.

B10.

Throughout this interview, we are particularly interested in social support – the help people give each other. This question asks about help R gets from the people in their church. Note that this question refers to the frequency of support that R receives. Help in this case refers to varied assistance including material (money, baby sitting, etc.), emotional (counseling etc.), or advice. It is important that R defines help in their own terms. It is important to distinguish people who say they never get help from their church vs. those who simply never need help from their church.

B12.

R should use their own definition of “close”, if R asks say “whatever it means to you”.

B13.

This is a general question designed to assess the extent of R’s satisfaction with the quality of his/her relationships with all people in the network. It may be that R has different levels of satisfaction with different people. If R balks at the question try to get the extent of satisfaction in general with people in the church.

B14.

B14 table asks questions about the support received from people in R’s church or place of worship.

B15.

B15 table asks questions about the negative support received from people in R’s church or place of worship

B17.

Spiritual means: concerned with, or affecting the soul, or relating to God or a higher being. OR If R questions the meaning of spiritual simply reply “whatever it means to you”.

B18.

If R questions the meaning of “Religious”, reply with “whatever it means to you”.

B19.

Spiritual means: concerned with, or affecting the soul, or relating to God or a higher being. OR If R questions the meaning of spiritual simply reply “whatever it means to you”.

C1a-l.

These questions are adapted from an often-used set of questions designed to measure a person's self esteem. R should use his/her own definitions for all of C1. Simply tell us how much you agree or disagree with each statement.

C3.

We are interested to know what R thinks of their position in life. R should use his/her own definitions for "way of life", it should be whatever R thinks it means. It can include any aspect of R's life, (health, finances, family, career, etc.). 1 is the worst possible way of life for R and 10 is the best possible way of life for R. Do not use examples that could persuade R's response.

C4.

We would like to compare where R is now and where R wants to be in a few years. Again do not persuade R with examples, let him/her use their own definitions and ideas.

C5.

Where R wants to be and the likelihood of actually obtaining that is not the same. We want to know if R has set a reasonable goal for themselves and feels they have a good chance of reaching that goal, or if R doesn't believe that they will reach that goal.

C8.

This question asks for R's perception of their physical health currently. If R asks, “what do you mean by physical health” say “whatever it means to you”.

C8a.

This question asks for R's perception of their dental health currently. If R asks, “what do you mean by condition” say “whatever it means to you”.

C8b.

This question asks for R's perception of their mental health currently. If R asks, "what do you mean by mental health" say "whatever it means to you".

C9.

Here R should think about their overall health one year ago, if R doesn't remember ask them to use their best guess as to how their health was one year ago. They should then compare their current health and say whether it is much better now, somewhat better now, about the same, somewhat worse now, or much worse now.

C10.

This series of questions asks whether R has experienced any of the listed health problems. Note that we are only interested in whether a doctor has told R that he/she has had this health problem. We want health problems that have been professionally diagnosed, not problems that people "feel" they have.

The problems a through r (through v for women) are to be read to R one at a time.

C10s,t,u,v are only to be asked of female respondents, males go to C12.

C12.

Same as C10, except we only want to know if R "feels" like they have any of the health problems. R doesn't need to be told by a doctor that they have the problem. We also want to know only if R has experienced the problem within the past 12 months, if R experienced the problem more than 12 months ago, enter "5" and move on to the next problem.

C20.

If R asks "what do you mean by overweight/underweight" reply "whatever it means to you".

C21.

The goal of this question is to get at the "usual source" of health care. "Usual" is defined as the place R tends to go when in need of medical attention. We are specifically interested in knowing if R usually receives medical services from a private doctor, a hospital emergency room or clinic, a public health clinic or some other health care giver.

C23.

This question only asks about government funded health insurance programs. Everyone over 65 is eligible for Medicare. Medicaid is for low income people. It is possible to have both Medicare and Medicaid. Retired military benefits and veterans' medical care are distinct from each other and it is possible to have both.

If R says they have health insurance through their jobs, that information is requested in C24. If R does not receive health coverage through a government program, enter "5" and move to C24.

C23a.

We want to know how many distinct government health insurance programs R is covered by.

C23b.

We want to know if mental health coverage is included in the R's government health insurance program(s). If R is not sure what we mean by "mental health", say we mean like psychological or emotional problems, or problems with their nerves.

C24.

We are interested only in insurance through R's employer. If not, and they are covered by their spouse's or family's employer, then enter whichever applies, "No" or "Not employed", and enter "Yes" in C24c.

C24a.

We want to know how many distinct employee related programs R is covered by.

C24b.

We want to know if mental health coverage is included in R's employer health insurance program. If R is not sure what we mean by "mental health", say we mean like psychological or emotional problems, or problems with their nerves.

C24c.

We are interested only in insurance through R's spouse's/partner's/parents'/guardians' employer.

C24d.

We want to know if mental health coverage is included in R's family's employer health insurance program. If R is not sure what we mean by "mental health", say we mean like psychological or emotional problems, or problems with their nerves.

C25.

We want to know if R is covered by any other health insurance program not mentioned so far. These tend to be purchased.

C26.

Here we want to know how much the R has to pay at the time of the visit. If he/she has to pay 100% but is reimbursed afterward code as "2 – All". If R says they don't pay anything but the doctor bills R for visit at a later date code "4 – R VOL Doctor bills me later".

C26a.

This question refers to reimbursement by ALL sources of health insurance R is covered by..

C27.

We want to know if R has had any of these problems within the past month only. If they say they have had it happen to them but more than a month ago, enter NO.

D1.

This is a "CHECK ALL THAT APPLY" question since it is possible that R may feel he is both working and retired, for example.

The category "unemployed" refers to a person who at the present time is not working for pay and says he/she is "looking for work" or "actively seeking employment".

For R's who say "laid off", probe to get whether it is a temporary lay off or not. Respondents who are on temporary leave of absence from a regular job (e.g. strike, and extended leave) should be treated as "working now".

There is a chance you may find some fortunate respondent who is independently wealthy and doesn't "work" at a job. We consider this person to be "working now", "self-employed", managing his/her own funds. The "working now" sequence should be followed with an explanation that you must ask everyone these questions,

etc.

D2.

This question is in case R doesn't categorize themselves in the working categories we have provided in D1. We ask this question to attempt to catch anyone who really is working, but possibly not in a traditional role.

D4.

The respondent's occupation is the job at which he/she spends the most time or, if he spends an equal amount of time on two jobs it is the one from which he earns the most money.

We want to classify the respondent's occupation according to a series of occupational groups, so very specific information is required. Please observe the following instructions carefully.

Probe for a clear, complete answer. The name of the place at which R actually works is usually an insufficient response to the occupation question (e.g., if R works in a bank he may be the manager, a teller, or the janitor).

Job titles at the lower end of the occupational scale are likely to be less descriptive than they are for professionals. Try to avoid vague job titles which may apply to a wide range of occupations.

We obviously need more specific information than "engineer" here, so that a distinction between skilled, semiskilled, and unskilled workers can be made.

In the case of a factory worker, a useful hint would be "what kind of machine do you operate?" If, for instance, R then says he/she works on an assembly line, we can deduce that he/she is unskilled.

R says he/she is a road construction worker but if: he/she supervises the road crew, he/she is classified as a foreman; he/she operates a bulldozer, he/she is classified as a machine operator; he/she is a common laborer, he/she is classified as such.

Ascertain whether a "Nurse" is a registered nurse or a practical nurse.

The distinction which we have to make between college, high school and elementary school teachers is less obvious, but as important. Suggested probes here are: "What level do you teach?" or "What type of school or college do you teach in?"

D5.

The answers to this question are fitted into an industrial code sometimes vital in determining which code a particular occupation would fit into. For instance, a laborer or a warehouse worker will do quite different kinds of things according to the associated industry type. Please bear the following point in mind:

It is not necessary to find out the name of the company R works at, but we do want to know whether, for

instance, if it is a manufacturing or a selling enterprise and what kind of product or service is manufactured or sold, and, for a business that sells things, whether it sells wholesale, retail, or what. Responses such as “Auto Assembly Plant,” “Retail Grocery Store,” “Steel Mill” or “Insurance Company” are thus quite acceptable but responses such as “oil business,” are not.

For a salesperson, especially, please find out whether he/she is engaged in wholesale or retail trade and what he/she sells.

D6.

Be sure to enter exact number of hours a week that R mentions (e.g. fifteen hours, twenty-five hours, 45 hours).

D8.

This question gets at whether R feels his/her skills and abilities are underutilized on the job.

D10.

This also gets at job satisfaction, but more indirectly. It is also hypothetical, that is, R does not need to have a son or a daughter in order to answer this question. Ask male R's about a “son” and female R's about a “daughter”.

D11a_cb.

This is one way in which race discrimination may be manifested in the work place — by channeling Caribbean people to certain types of inferior jobs. It is possible, of course, that R may feel Caribbeans tend to get certain kinds of jobs that are different but not “worse”.

D11b_cb.

This is one way in which race discrimination may be manifested in the work place — by channeling Caribbean people to certain types of inferior jobs. It is possible, of course, that R may feel Caribbeans tend to get certain kinds of jobs that are different but not “worse”.

D11.

This is one way in which race discrimination may be manifested in the work place — by channeling Black

people to certain types of inferior jobs. It is possible, of course, that R may feel Blacks tend to get certain kinds of jobs that are different but not “worse”.

D12.

This question is asked of all Rs, regardless of their answer in D11. It is possible that R feels he/she has a job that Black people tend to get, even though he/she doesn't feel this happens generally at his/her work place.

D13_cb.

A direct question on whether R perceives race discrimination at his/her work place. Please note that this question asks about how “Caribbean people” are treated at his/her work place, not how R is treated.

D13.

A direct question on whether R perceives race discrimination at his/her work place. Please note that this question asks about how “Black people” are treated at his/her work place, not how R is treated.

D15.

If R is confused about this question, ask “Is there a group of people you work with?”

D23.

The respondent's occupation is the job at which he/she spends the most time or, if he spends an equal amount of time on two jobs it is the one from which he earns the most money.

We want to classify the respondent's occupation according to a series of occupational groups, so very specific information is required. Please observe the following instructions carefully.

Probe for a clear, complete answer. The name of the place at which R actually works is usually an insufficient response to the occupation question (e.g., if R works in a bank he may be the manager, a teller, or the janitor).

Job titles at the lower end of the occupational scale are likely to be less descriptive than they are for professionals. Try to avoid vague job titles which may apply to a wide range of occupations.

We obviously need more specific information than “engineer” here, so that a distinction between skilled, semiskilled, and unskilled workers can be made.

In the case of a factory worker, a useful hint would be “what kind of machine do you operate?” If, for

instance, R then says he/she works on an assembly line, we can deduce that he/she is unskilled.

R says he/she is a road construction worker but if: he/she supervises the road crew, he/she is classified as a foreman; he/she operates a bulldozer, he/she is classified as a machine operator; he/she is a common laborer, he/she is classified as such.

Ascertain whether a “Nurse” is a registered nurse or a practical nurse.

The distinction which we have to make between college, high school and elementary school teachers is less obvious, but as important. Suggested probes here are: “What level do you teach?” or “What type of school or college do you teach in?”

D24.

The answers to this question are fitted into an industrial code sometimes vital in determining which code a particular occupation would fit into. For instance, a laborer or a warehouse worker will do quite different kinds of things according to the associated industry type. Please bear the following point in mind:

It is not necessary to find out the name of the company R works at, but we do want to know whether, for instance, if it is a manufacturing or a selling enterprise and what kind of product or service is manufactured or sold, and, for a business that sells things, whether it sells wholesale, retail, or what. Responses such as “Auto Assembly Plant,” “Retail Grocery Store,” “Steel Mill” or “Insurance Company” are thus quite acceptable but responses such as “oil business,” are not.

For a salesperson, especially, please find out whether he/she is engaged in wholesale or retail trade and what he/she sells.

D25.

Be sure to enter exact number of hours a week that R mentions (e.g. fifteen hours, twenty-five hours, 45 hours).

D26.

This question gets at whether R feels his/her skills and abilities are underutilized on the job.

D28.

This also gets at job satisfaction, but more indirectly. It is also hypothetical, that is, R does not need to have a son or a daughter in order to answer this question. Ask male R’s about a “son” and female R’s about a “daughter”.

D29a_cb.

This is one way in which race discrimination may be manifested in the work place — by channeling Caribbean people to certain types of inferior jobs. It is possible, of course, that R may feel Caribbeans tend to get certain kinds of jobs that are different but not “worse”.

D29b_cb.

This is one way in which race discrimination may be manifested in the work place — by channeling Caribbean people to certain types of inferior jobs. It is possible, of course, that R may feel Caribbeans tend to get certain kinds of jobs that are different but not “worse”.

D29.

This is one way in which race discrimination may be manifested in the work place — by channeling Black people to certain types of inferior jobs. It is possible, of course, that R may feel Blacks tend to get certain kinds of jobs that are different but not “worse”.

D30.

This question is asked of all Rs, regardless of their answer in D29. It is possible that R feels he/she has a job that Black people tend to get, even though he/she doesn't feel this happens generally at his/her work place.

D31_cb.

A direct question on whether R perceives race discrimination at his/her work place. Please note that this question asks about how “Caribbean people” are treated at his/her work place, not how R is treated.

D31.

A direct question on whether R perceives race discrimination at his/her work place. Please note that this question asks about how “Black people” are treated at his/her work place, not how R is treated.

D33.

If R is confused about this question, ask “Is there a group of people you work with?”

E1.

By family we mean extended family. That is children, parents, grandparents, cousins, grandchildren, aunts, uncles and so on. These questions are interested in helpfulness of family – the degree and frequency of help. It is important to distinguish people who say they never get help from their family vs. those who simply never need help from their family.

E2.

This question addresses the helpfulness of the Respondent towards their family. (See E1 Q by Q for further details.)

E3.

We are interested in how often R has any kind of contact with his/her relatives who live outside of his/her household. Please note that we are asking how often R has some contact, not with how many. If R says he/she has contact with some family member(s) nearly every day but never has contact with some others, response 1 should be checked. If R asks if it is okay to include e-mail, reply “no, we are interested in only face-to-face contact, writing letters or telephone contact”.

E4

Note: This is a hypothetical question. We would like to know the number of family members who would help you out if you needed help. R's are to use their own definition of “help out”.

E4a.

Rs are to use their own definition of “close”.

E5.

Rs are to use their own definition of “close”.

E8.

We are interested in how often R has any kind of contact with his/her friends who live outside of his/her household. Please note that we are asking how often R has some contact, not with how many. If R says he/she has contact with some friends nearly every day but never has contact with some others, response 1 should be checked. If R asks if it is okay to include e-mail, reply “ no, we are interested in only face-to-face

contact, writing letters or telephone contact”.

E9.

This question is interested in helpfulness of friends. It is important to distinguish people who say they never get help from their friends vs. those who simply never need help from their friends.

E10.

This question is interested in helpfulness of you towards your friends. It is important to distinguish people who say they never help their friends vs. those whose friends simply never need help.

E11.

Rs are to use their own definition of “close”.

E12.

Rs are to use their own definitions for “treated just like a relative”.

E13.

The main issue in this question will be to identify unmarried R’s who are involved in relationships. Enter “Married” if R says he/she is married. Enter “Partner” if R says he/she is living with a partner or uses the term “common law marriage”.

E16.

This means that R is seeing a person on a steady basis and considers their relationship to be of a romantic nature.

SC20.

The remaining questions in this section are the most important questions in the survey. Read them slowly. Use feedback to emphasize the importance of careful thought.

SC25a.

This question differs from SC25 in that it asks about a more serious type of irritability -- one involving arguing, shouting, or hitting.

SC31.

These questions ask about the respondent's childhood experiences. If the respondent reports that he or she experienced some of these problems in childhood, adolescence, or as a teenager, code "yes." The problems do not have to have begun in early childhood for a "yes" response.

Code NO if the respondent never attended school.

SC32.

These questions ask about the respondent's childhood experiences. If the respondent reports that he or she experienced some of these problems in childhood, adolescence, or as a teenager, code "yes." The problems do not have to have begun in early childhood for a "yes" response.

For this and the following questions (SC33, SC34), "childhood" refers to whatever the respondent considers his or her childhood. It may be the reference period, "between the ages of 6 and 10," as stated in question SC31, or the respondent may consider their childhood the time when they were in their adolescent or teen years. Any of these frames of reference is acceptable for this question.

SC33.

These questions ask about the respondent's childhood experiences. If the respondent reports that he or she experienced some of these problems in childhood, adolescence, or as a teenager, code "yes." The problems do not have to have begun in early childhood for a "yes" response.

All children do these things sometimes. It is important to emphasize "frequently" and to probe a response of "sometimes" by repeating the question and emphasizing the word "frequently."

SC35.

This question differs from SC34 in that it asks about experiences during adulthood. Clarify this if the respondent is confused about how this differs from the preceding question.

DP24.

This question defines what we mean by "a period." The phrase "a period" or "this period" is used repeatedly in

the remainder of the D24 and D26 series of questions. All these questions ask the respondent to focus on experiences that occurred during a particular worst period of depression. It may be necessary, if the respondent seems confused; to remind him or her periodically that "this period" refers to the period of being (sad/and/discouraged/and/uninterested) and some other problems lasting (several days/two weeks) or longer.

DP29a.

What we are looking for here is a physiological cause of the depression, such as medication or alcohol causing depression. An example of physical illness causing depression would be thyroid disease (code "yes"). If illness or injury to the respondent result in the respondent's feeling sad or discouraged because, for example, he or she had to stay in the hospital, or an injury prevents him or her from carrying out their usual activities, code "no.

PD13a.

The worries must be frequent for this to be a positive answer. The interviewer should emphasize the word often when reading the question.

SO9.

If the respondent cannot read, read the a-o list. The instrument will skip to SO10 after the second "yes" response.

SO10a.

If the respondent asks for a definition of a panic attack: A panic attack is a sudden attack of extreme fear or anxiety.

SO14a.

Be sure to record the respondent's answer accurately and completely. This response is critical to the diagnosis because it informs the researcher about whether or not there was a real potential danger in this situation. Note that this question requires both an open and closed response.

AG4d.

If the respondent asks for a definition of a panic attack: A panic attack is a sudden attack of extreme fear or anxiety.

AG8a.

If the respondent asks for a definition of a panic attack: A panic attack is a sudden attack of extreme fear or anxiety.

AG11.

If the respondent cannot read, read the a-k list. The instrument will skip to AG12 after the first YES response.

GA1.

Be sure to record diffuse worries (EVERYTHING, NOTHING IN PARTICULAR) before probing for specific worries. It is important for us to know when diffuse worries are reported.

GA2.

"One specific thing" refers to a worry about a particular life problem, not about diffuse worries. Therefore, a respondent who reported worrying about everything would be coded as having multiple worries even though only one response category is recorded in G1.

GA36.

The feelings described in a-g include tense and wound up, frightened, restless, panicked, worried, frequency of feeling relaxed, fear of awful occurrence.

SU3.

If the respondent volunteers "never," code "LESS THAN ONCE A MONTH."

SU28.

It may be necessary to arrow up to SU19 to remind the respondent of the problems listed.

SU88.

The definition of an "opportunity to use" is that someone either offered you alcohol or drugs or you were present when others were using and you could have used if you wanted to. Do not include times when a

health care provider may have offered you free samples.

PT2

A peacekeeper is a person who works for an international organization, a government, or a military organization to supervise and enforce a truce between hostile groups.

PT7

Some respondents respond by saying that they think everyone is exposed to such substances because of pollution, global warming, destruction of the ozone layer, etc. These responses should be coded “no”. Other respondents report that they think they might have been exposed, but they are not sure. These responses should be coded “no”. “yes” responses require the respondent to have been told by an official source that there was a definite exposure.

PT8.

“Involved” can include being a pedestrian or bicyclist who was partly responsible. However, code “no” if the respondent was merely a witness, an observer, or a person who arrived after the accident and provided assistance. People who were witnesses will be coded in PT21/49, PT23/51 or PT27/55.

PT10.

“Involved” can include being present at the time of the disaster even if the respondent was not injured. However, code “no” if the respondent was merely an observer or relief worker who arrived after the disaster. These experiences will be coded elsewhere.

PT18.

Sexually molested means that a stranger, or someone you knew, including family members and friends, touched the sexual parts of your body or forced you to touch the sexual parts of their body – against your will or without your consent.

PT20.

Unexpected death does not include situations such as an elderly person dying or a person with a known heart condition suddenly experiencing a fatal heart attack.

PT22.

The examples are intended to provide a context to help the respondent define "extremely traumatic." If the respondent asks whether a particular event counts, the rule should be to tell the respondent that anything that he or she considers extremely traumatic counts.

PT24.

This question is asking about specific incidents. Broad philosophical responses, for example, a response such as "*my failure to donate money to charity probably means poor children are starving to death somewhere*" should be coded "no".

PT28.

These questions ask respondents to tell about an experience they do not want to mention specifically. We refer to this as the respondent's "private event," and we do not ask the respondent to tell us what the event was. Note that the phrase "you didn't report" refers to reporting the event during the course of the interview, not reporting the event to the police or other authorities.

PT30.

Some of the traumatic events asked about here overlap. It is consequently important to include the parenthetical phrase "other than what you have already told me about" in cases where previous events have been reported. If reports are given of events previously mentioned, code the new mention "NO." For example, a respondent who reports in PT30 (RELIEF WORKER IN WAR ZONE) being a Red Cross worker in Bosnia during their civil war might well mention the same experience in response to PT31 (CIVILIAN IN WAR ZONE). If so, code the repeat mention at PT31 "no". This same issue can exist for other events (e.g., PT21/49 and PT25/53).

Code as a separate event if events occupy distinct periods of time, even if there is some overlap of the time periods.

PT35

Some respondents respond by saying that they think everyone is exposed to such substances because of pollution, global warming, destruction of the ozone layer, etc. These responses should be coded "no". Other respondents report that they think they might have been exposed, but they are not sure. These responses should be coded "no". "yes" responses require the respondent to have been told by an official source that there was a definite exposure.

PT36.

“Involved” can include being a pedestrian or bicyclist who was partly responsible. However, code “no” if the respondent was merely a witness, an observer, or a person who arrived after the accident and provided assistance. People who were witnesses will be coded in PT21/49, PT23/51 or PT27/55.

PT38.

“Involved” can include being present at the time of the disaster even if the respondent was not injured. However, code “no” if the respondent was merely an observer or relief worker who arrived after the disaster. These experiences will be coded elsewhere.

PT39.

Like PT38, the interviewer should have a clear understanding that natural disasters and man-made disasters are recorded separately. If the respondent mentions toxic chemical exposure, do not record here. It should be recorded in PT35.

PT46.

Sexually molested means that a stranger, or someone you knew, including family members and friends, touched the sexual parts of your body or forced you to touch the sexual parts of their body – against your will or without your consent.

PT48.

Unexpected death does not include situations such as an elderly person dying or a person with a known heart condition suddenly experiencing a fatal heart attack.

PT50.

The examples are intended to provide a context to help the respondent define "extremely traumatic." If the respondent asks whether a particular event counts, the rule should be to tell the respondent that anything that he or she considers extremely traumatic counts.

The event should be dated from the time the respondent first learned about the event.

PT52.

This question is asking about specific incidents. Broad philosophical responses, for example, a response such

as “*my failure to donate money to charity probably means poor children are starving to death somewhere*” should be coded “no”.

PT55a.

Take care to have the respondent report NEW events here, not to elaborate on events already reported.

PT55b.

The answer to this question will usually be obvious to the interviewer based on the description in PT55a and can be coded directly without asking the question when this is the case.

PT55c.

If the event occurred to the respondent, the interviewer should normally ask how old the respondent was when the event happened. An exception is when the event only becomes traumatic at a later date. An example is the discovery, when the respondent is 40 years of age, that everyone in the town where the respondent grew up was exposed to potentially fatal toxic chemicals in the lake where they all swam. In an instance of this sort, the interviewer should ask how old the respondent was when he or she first learned that the water was contaminated.

Events indicating trauma that occurred to others (e.g., learning that one's daughter was raped) should always be dated from the time the respondent first learned about the events.

PT57.

These questions ask respondents to tell about an experience they do not want to mention specifically. We refer to this as the respondent's “private event,” and we do not ask the respondent to tell us what the event was. Note that the phrase “you didn't report” refers to reporting the event during the course of the interview, not reporting the event to the police or other authorities.

PT62

This question contains many distinct concepts that are important to the question. If the respondent has difficulty answering, repeat the question, being sure to read it slowly.

PT64.

In this question, the respondent is asked to identify the event that caused the most problems. If necessary, the interviewers can review the list of events the respondent has endorsed. Or, if necessary, the interviewer can repeat the list of PTSD reactions from PT62 by scrolling back to PT62. The “worst event” is recorded, as well as the respondent's age at the time, and which occurrence it was. If the respondent doesn't know which event caused the most problems, the most recent event is selected.

When the respondent has two or more events that caused problems, and no one event caused more problems than others, we want the respondent to tell us about the most recent of the events that caused the largest number of problems. That is why we use the phrase "of these very upsetting events" when probing following a "don't know" response.

PT67.

The interviewer needs to decide which version of the question to ask depending on whether the experience was ongoing (e.g., repeated abuse by a parent for a period of months when the respondent was a child) or a one-time occurrence (e.g., an automobile accident). In cases of one-time situations that have duration, such as being a combat soldier in a war, the second version of the question should be used (“Were you terrified or very frightened at the time?”).

When we ask questions about reactions to the event, interviewers have the option to refer to the experience by name (e.g. "the accident") or refer to it generically as "the event" or "this experience" as a fill for "WORST EVENT". The interviewer should choose the option bearing in mind that people who are being asked about extremely stressful events such as rape may not want to have the word "rape" repeated over and over again. Referring to it as "this event" would be more appropriate. However, it might be necessary to occasionally refer to the event or experience by name in the course of the questioning to avoid possible confusion. Judgment is needed as to how often this will be necessary depending on whether the respondent appears confused or not by the generic language.

PT68.

Interviewers are given the option here, and in later questions in this section, of referring to the event as "the event" or "this experience" or "it" or the event by name. This flexibility is given because some of the events may be emotionally charged. Interviewers should use judgment here to select the term that works best for the particular event being assessed.

PT70.

This question asks whether the respondent ever had psychological amnesia for some important part of the event. If he or she was unconscious due to a head injury, the amnesia does not count here. If the respondent volunteers that he or she was "knocked out" or unconscious, code "no".

PT269.

If the respondent's event is "some other event," it is best to use the respondent's description of the event, rather than the phrase "some other event" when reading this question.

TB6.

If R says "don't know" probe: " Could you give me your best estimate".

TB7.

If R says "sometimes" or "it depends" enter that as a "yes" response.

EA1.

This question asks about the respondent's self-image, *regardless of actual weight*. Concern about being too thin/skinny or not having muscles does not count. This must be concern about being overweight, including concerns about only part of one's body, such as concern about having fat hips.

EA2.

"Purposefully" means that we do not want to count loss of weight due to illness. Note that the unit of measurement is recorded in the following item.

EA3.

Height is recorded in feet and inches.

EA6.

This question is intended to capture fear of weight gain, despite the respondent's being thin, and regardless of whether or not the respondent actually did gain any weight.

EA9.

The missed menstrual periods must have occurred around the time that the respondent was losing weight or was at the low weight. Do not count periods missed at other times.

PR5.

If more than one such operation, ask for the age at the first operation.

PR6.

If stopped, but she does not know if it will be permanent, code stopped temporarily.

PR13.

Count as ‘yes’ if the respondent volunteers that symptoms were experienced during the first day(s) of her periods.

PR14.

The respondent may volunteer that she didn’t have a period every month. That is fine and she should still answer the question as it’s written.

PR15.

At this checkpoint, women who have experienced frequent and severe problems for half of any year or less (6 months or less) are skipped out of the section.

PR16.

This question is intended to measure how much of the week prior to her period the respondent is affected by the change in her mood.

PS1.

Read this introduction slowly, as it is an important set-up for the questions to come.

PS1a.

These questions are long and should be read slowly.

Note that visions seen or voices heard during dreams or half-asleep or under the influence of alcohol or drugs

are excluded. If the respondent volunteers that visions were seen or voices were heard exclusively while having a high fever, code "no". During periods of grieving, following the death of someone close, an individual may see a brief vision of the deceased. If the respondent only reports this type of vision, code "no".

PS1b.

These questions are long and should be read slowly.

Note that visions seen or voices heard during dreams or half-asleep or under the influence of alcohol or drugs are excluded. If the respondent volunteers that visions were seen or voices were heard exclusively while having a high fever, code "no". During periods of grieving, following the death of someone close, an individual may see a brief vision of the deceased. If the respondent only reports this type of vision, code "no".

PS1c.

These questions are long and should be read slowly.

Note that visions seen or voices heard during dreams or half-asleep or under the influence of alcohol or drugs are excluded. If the respondent volunteers that visions were seen or voices were heard exclusively while having a high fever, code "no". During periods of grieving, following the death of someone close, an individual may see a brief vision of the deceased. If the respondent only reports this type of vision, code "no".

Many people believe that such things are possible, that perhaps there are spacemen who could do these things and that science will someday prove this to be true. We want to discriminate these beliefs, or uncertainties regarding whether this is true, from actual personal experiences. If the respondent volunteers that there was a time in his or her life when it occurred to him that such things were possible, but never had any actual personal experiences in which he believed this was being done to him, code "no".

If a respondent gives a metaphorical response to this question, such as, "My husband is a very dominating man who tries to control my thoughts," code "no".

PS1d.

These questions are long and should be read slowly.

Note that visions seen or voices heard during dreams or half-asleep or under the influence of alcohol or drugs are excluded. If the respondent volunteers that visions were seen or voices were heard exclusively while having a high fever, code "no". During periods of grieving, following the death of someone close, an individual may see a brief vision of the deceased. If the respondent only reports this type of vision, code "no".

If a respondent gives a metaphorical response to this question, such as, "My husband is a very dominating man who tries to control my thoughts," code "no".

PS1e.

These questions are long and should be read slowly.

Note that visions seen or voices heard during dreams or half-asleep or under the influence of alcohol or drugs are excluded. If the respondent volunteers that visions were seen or voices were heard exclusively while having a high fever, code “no”. During periods of grieving, following the death of someone close, an individual may see a brief vision of the deceased. If the respondent only reports this type of vision, code “no”.

PS1f.

These questions are long and should be read slowly.

Note that visions seen or voices heard during dreams or half-asleep or under the influence of alcohol or drugs are excluded. If the respondent volunteers that visions were seen or voices were heard exclusively while having a high fever, code “no”. During periods of grieving, following the death of someone close, an individual may see a brief vision of the deceased. If the respondent only reports this type of vision, code “no”.

If the respondent volunteers the description of a plausible story in which an actual plot occurred, code “no”. If you are in doubt as to the plausibility, code “yes”.

PS9.

Hospitalized means hospitalized overnight.

FH1.

If subject asks about deceased siblings, explain that they should be included if they had the same mother and father as R. Half siblings and adopted siblings should not be included, only include full siblings.

FH2.

There are many reasons R may not know something about a blood relative: R may have been adopted; a relative may be estranged from the family, etc. These examples may be used if helpful.

AD1b.

Code ‘yes’ even if the respondent says that the things he or she didn’t pay attention to or did inaccurately really weren’t important.

AD1f.

This refers to subtle disturbances like other peoples' conversations or people walking or working quietly in the vicinity.

AD1g.

Examples would include doing homework, watching a television program or movie, doing an art project, writing a letter, or following verbal or written instructions.

AD30a.

Would you say you had this problem often during that period of 6 months or more?

AD30c.

This symptom refers to the almost limitless ability of these children to keep active. They often seem as though they were 'driven by a motor'.

AD30f.

Would you say you had this problem often during that period of 6 months or more?

AD30i.

Emphasize abruptly. This is not meant to include welcome or somewhat anticipated interruptions (as when a person enters a room and politely joins in a conversation).

OD1d.

Evading directions or procrastinating should be coded 'yes'.

OD1f.

It doesn't count if the respondent was truly taken advantage of. Record 'yes' if the respondent believes that his or her feelings were not reasonable given the situation.

OD1j.

It doesn't count if the respondent was truly treated in an offensive way. Record 'yes' if the respondent believes that his or her feelings were not reasonable given the situation.

OD1k.

This doesn't include being annoyed by younger siblings or being nagged by parents or teachers. It should be a reaction felt to others on a more universal level.

CD32.

Informal, e.g. getting kicked out of class, and formal measures should be included here.

CD39b.

"Altogether" means that the respondent should add up all the separate times.

SA1b.

If the respondent reports that the person was injured and he or she worried about them, code 'NO'. We want to know if the respondent worried when there was no reason to worry.

SA1h.

We are asking about actual symptoms here. If the respondent reports lying about having symptoms in an attempt to prevent the parent from going out, code "no".

SA1i.

"Near you" means in the same room.

SA11d.

If the person did leave and the respondent worried only after that, code "no".

SR12.

Sessions that last less than 30 minutes should be excluded. The goal here is to discriminate between a real therapy session and a professional merely giving a few encouraging words of support or just listening to the respondent's mental health concerns.

SR13.

An informal recommendation to take medicine is not enough. The doctor must either write a prescription or give the medicine to the patient.

SR110.

Money spent by the respondent for the treatment of a child or spouse or someone else does not count. It has to be treatment for the respondent. If the respondent volunteers that the money was spent on couples therapy or family therapy in which he or she was a participant, all this money should be counted.

F1.

This first series of questions (F1 to F3) is designed to get people to focus on what they feel was a significant and serious stressful event in their lives. It is important to emphasize that we want them to focus on one problem, not many. That is why we sequence these questions in such a way that, as soon as R says "yes" he/she skips the remaining questions and goes immediately to F5 where R states what the problem was. Our interest in a one problem focus is also reflected in the use of the words "a time" in the questions. Please emphasize "a time".

As indicated, questions F1 to F3 (and F4) are the key to this whole section.

F2.

This first series of questions (F1 to F3) is designed to get people to focus on what they feel was a significant and serious stressful event in their lives. It is important to emphasize that we want them to focus on one problem, not many. That is why we sequence these questions in such a way that, as soon as R says "yes" he/she skips the remaining questions and goes immediately to F5 where R states what the problem was. Our interest in a one problem focus is also reflected in the use of the words "a time" in the questions. Please emphasize "a time".

As indicated, questions F1 to F3 (and F4) are the key to this whole section.

F3.

This first series of questions (F1 to F3) is designed to get people to focus on what they feel was a significant

and serious stressful event in their lives. It is important to emphasize that we want them to focus on one problem, not many. That is why we sequence these questions in such a way that, as soon as R says “yes” he/she skips the remaining questions and goes immediately to F5 where R states what the problem was. Our interest in a one problem focus is also reflected in the use of the words “a time” in the questions. Please emphasize “a time”.

As indicated, questions F1 to F3 (and F4) are the key to this whole section.

These questions still refer to very stressful experiences, although probably less stressful than those elicited by the “nervous breakdown” question. The questions suggest that we are concerned with serious problems by the interference with activities (couldn’t get going-F3).

F4.

This question attempts to help focus R on a serious personal problem, although less stressful than ones that can cause so much stress that their life is affected significantly. It is important to emphasize that we want them to focus on one serious problem, not many. It is also important to try to get as many R’s who arrive at F4 to think of a real personal problem in their life.

If R says he/she had a problem, this question will call upon your sensitivity and tact. Some Rs may be hesitant to answer because of the personal nature of the problem. However, it is important that we get as much information as decently possible for classification of the stressful life event in data analysis. In the application we have included specific probes for you to use when responses are hesitant or incomplete. It may also be helpful to again remind R of the nature of the study, and our interests in getting a national (not individual-personal) picture of the kinds of problems people are experiencing.

If they still cannot answer or refuse, they will skip out of this section and go to Section G.

As indicated, questions F1 to F3 (and F4) are the key to this whole section.

F5.

Rs who answer this question will be those Rs who said “yes” to one of the first three questions in this section. Responses are therefore likely to be very varied. This question will call upon your sensitivity and tact. Some Rs may be hesitant to answer because of the personal nature of the problem. However, it is important that we get as much information as decently possible for classification of the stressful life event in data analysis. In the application we have included specific probes for you to use when responses are hesitant or incomplete. It may also be helpful to again remind R of the nature of the study, and our interests in getting a national (not individual-personal) picture of the kinds of problems people are experiencing.

F6a.

We’d like the approximate time the stressful experience happened – e.g., “about five years ago”. Answers that are very indefinite with respect to time should be probed (e.g., “When I was married”, “some time ago”, etc.). If R says it happened several times, get the last time it happened.

F6b.

This question attempts to get at the duration of the problem, that is, how long did it go on.

F6c.

This question attempts to get at the duration of the problem, that is, how long did it go on.

F7a.

This is what we call the ‘informal helper matrix’ and is designed to get at the extent that R used family, friends and neighbors to cope with the stressful event. The matrix is really a set of 5 questions. Interviewer should instruct R to turn to page 29 in RB for the list of people who R may have talked to. As soon as R tells you they talked to a person, ask them the follow-up questions for that person.

F7b.

This is what we call the ‘informal helper matrix’ and is designed to get at the extent that R used family, friends and neighbors to cope with the stressful event. The matrix is really a set of 5 questions. Interviewer should instruct R to turn to page 29 in RB for the list of people who R may have talked to. As soon as R tells you they talked to a person, ask them the follow-up questions for that person.

Note that in F7b (SEX) is asked only if person is Response Category 8 (Other Relative) and 9 (Friend). The other categories in the list are gender specific.

F7c.

This is what we call the ‘informal helper matrix’ and is designed to get at the extent that R used family, friends and neighbors to cope with the stressful event. The matrix is really a set of 5 questions. Interviewer should instruct R to turn to page 29 in RB for the list of people who R may have talked to. As soon as R tells you they talked to a person, ask them the follow-up questions for that person.

F8a.e

A Chiropractor is a person who practices manipulation of the spinal column and other body structures.

F8a.h

By self-help groups we mean groups organized and run by people who get together on the basis of a common

experience or goal to mutually help or support one another. (Groups organized and led by doctors, psychologists, social workers, or other professionals do not qualify as self-help groups.)

G1.

We would like to get the term R uses to refer to members of his or her own race.

G2.

This question attempts to get at whether R's identification as Black is more, less, or equally important as his/her identification as American.

G3a.

In this question we want to see how close R feels to Black people in general. We indicate in the question that we mean "close" in terms of ideas and feelings about things, but do not define "close" beyond that. R should use his/her own definition of closeness.

G3b.

This question asks for R's closeness to different ethnic or minority groups in this country. Please stress ideas and feelings about things. If R asks for a definition of "close" say "by close, we mean how close you feel to them in terms of ideas and feeling about things". Do not define "close" beyond that. R should use his/her own definition of closeness.

G3c.

This question asks for R's closeness to different ethnic or minority groups in this country. Please stress ideas and feelings about things. If R asks for a definition of "close" say "by close, we mean how close you feel to them in terms of ideas and feeling about things". Do not define "close" beyond that. R should use his/her own definition of closeness.

G3d.

This question asks for R's closeness to different ethnic or minority groups in this country. Please stress ideas and feelings about things. If R asks for a definition of "close" say "by close, we mean how close you feel to them in terms of ideas and feeling about things". Do not define "close" beyond that. R should use his/her own definition of closeness.

G3e.

This question asks for R's closeness to different ethnic or minority groups in this country. Please stress ideas and feelings about things. If R asks for a definition of "close" say "by close, we mean how close you feel to them in terms of ideas and feeling about things". Do not define "close" beyond that. R should use his/her own definition of closeness.

G3f.

This question asks for R's closeness to different ethnic or minority groups in this country. Please stress ideas and feelings about things. If R asks for a definition of "close" say "by close, we mean how close you feel to them in terms of ideas and feeling about things". Do not define "close" beyond that. R should use his/her own definition of closeness.

G3g.

This question asks for R's closeness to different ethnic or minority groups in this country. Please stress ideas and feelings about things. If R asks for a definition of "close" say "by close, we mean how close you feel to them in terms of ideas and feeling about things". Do not define "close" beyond that. R should use his/her own definition of closeness.

G4a.

In this question we want to see if R divides Black people into some he/she feels close to and identifies with, and some he/she rejects and does not identify with. We indicate in the question that we mean "close" in terms of ideas and feelings about things, but do not define "close" beyond that for R. R should use his/her own definition of closeness.

It is important here to note that R does not have to actually belong to these groups. We just want to know if R feels close to them in terms of ideas and values they represent (whether or not they are similar). Read the groups to R one at a time.

G4b.

In this question we want to see if R divides Black people into some he/she feels close to and identifies with, and some he/she rejects and does not identify with. We indicate in the question that we mean "close" in terms of ideas and feelings about things, but do not define "close" beyond that for R. R should use his/her own definition of closeness.

It is important here to note that R does not have to actually belong to these groups. We just want to know if R feels close to them in terms of ideas and values they represent (whether or not they are similar). Read the groups to R one at a time.

G4c.

In this question we want to see if R divides Black people into some he/she feels close to and identifies with, and some he/she rejects and does not identify with. We indicate in the question that we mean “close” in terms of ideas and feelings about things, but do not define “close” beyond that for R. R should use his/her own definition of closeness.

It is important here to note that R does not have to actually belong to these groups. We just want to know if R feels close to them in terms of ideas and values they represent (whether or not they are similar). Read the groups to R one at a time.

G4d.

In this question we want to see if R divides Black people into some he/she feels close to and identifies with, and some he/she rejects and does not identify with. We indicate in the question that we mean “close” in terms of ideas and feelings about things, but do not define “close” beyond that for R. R should use his/her own definition of closeness.

It is important here to note that R does not have to actually belong to these groups. We just want to know if R feels close to them in terms of ideas and values they represent (whether or not they are similar). Read the groups to R one at a time.

G4e.

In this question we want to see if R divides Black people into some he/she feels close to and identifies with, and some he/she rejects and does not identify with. We indicate in the question that we mean “close” in terms of ideas and feelings about things, but do not define “close” beyond that for R. R should use his/her own definition of closeness.

It is important here to note that R does not have to actually belong to these groups. We just want to know if R feels close to them in terms of ideas and values they represent (whether or not they are similar). Read the groups to R one at a time.

G4f.

In this question we want to see if R divides Black people into some he/she feels close to and identifies with, and some he/she rejects and does not identify with. We indicate in the question that we mean “close” in terms of ideas and feelings about things, but do not define “close” beyond that for R. R should use his/her own definition of closeness.

It is important here to note that R does not have to actually belong to these groups. We just want to know if R feels close to them in terms of ideas and values they represent (whether or not they are similar). Read the groups to R one at a time.

G4g.

In this question we want to see if R divides Black people into some he/she feels close to and identifies with, and some he/she rejects and does not identify with. We indicate in the question that we mean “close” in terms of ideas and feelings about things, but do not define “close” beyond that for R. R should use his/her own definition of closeness.

It is important here to note that R does not have to actually belong to these groups. We just want to know if R feels close to them in terms of ideas and values they represent (whether or not they are similar). Read the groups to R one at a time.

G4h.

In this question we want to see if R divides Black people into some he/she feels close to and identifies with, and some he/she rejects and does not identify with. We indicate in the question that we mean “close” in terms of ideas and feelings about things, but do not define “close” beyond that for R. R should use his/her own definition of closeness.

It is important here to note that R does not have to actually belong to these groups. We just want to know if R feels close to them in terms of ideas and values they represent (whether or not they are similar). Read the groups to R one at a time.

G5.

The objective is to determine how true R feels each of these words is in describing Black people. In their total, the responses to this question should give a picture of the positive and negative images that R holds of Black people.

G5g.

Here R should answer in terms of him/herself. One measure of R’s identification with Black people is the extent to which the quality he/she views him/herself compared to the quality he/she views as characteristic of Black people.

G5h.

Here R should answer in terms of him/herself. One measure of R’s identification with Black people is the extent to which the quality he/she views him/herself compared to the quality he/she views as characteristic of Black people.

G5_cb.

This series of questions is identical to G5a-f except that it refers to Caribbean people instead of Black/African American people.

The objective is to determine how true R feels each of these words is in describing people from the Caribbean area. In their total, the responses to this question should give a picture of the positive and negative images that R holds of West Indian/Haitian people.

G7.

R may need to be reassured that there is no right or wrong with this question. It is just their subjective assessment of how their skin tone compares to other Black people.

G9.

R may need to be reassured that there is no right or wrong with this question. It is just their subjective assessment of how their spouse's skin tone compares to other Black people.

G10.

In this series of questions, stress SHADE of skin color.

G11.

This is an attempt to get at R's perception of common fate with Black people generally.

G11_wh.

This is an attempt to get at R's perception of common fate with White people generally.

G13a.

We want the R to tell us what they think was the main reason they experienced the previous treatment. If R tells you "my age and my race", probe "which one do you think was the main one?"

G13b.

We want the R to tell us what they think was the main reason they experienced the previous treatment. If R tells you “my age and my race”, probe “which one do you think was the main one?”

G13c.

We want the R to tell us what they think was the main reason they experienced the previous treatment. If R tells you “my age and my race”, probe “which one do you think was the main one?”

G13d.

We want the R to tell us what they think was the main reason they experienced the previous treatment. If R tells you “my age and my race”, probe “which one do you think was the main one?”

G13e.

We want the R to tell us what they think was the main reason they experienced the previous treatment. If R tells you “my age and my race”, probe “which one do you think was the main one?”

G13f.

We want the R to tell us what they think was the main reason they experienced the previous treatment. If R tells you “my age and my race”, probe “which one do you think was the main one?”

G13g.

We want the R to tell us what they think was the main reason they experienced the previous treatment. If R tells you “my age and my race”, probe “which one do you think was the main one?”

G13h.

We want the R to tell us what they think was the main reason they experienced the previous treatment. If R tells you “my age and my race”, probe “which one do you think was the main one?”

G13i.

We want the R to tell us what they think was the main reason they experienced the previous treatment. If R

tells you “my age and my race”, probe “which one do you think was the main one?”

G18.

We are interested in R’s daily interactions with people and how often the things listed happen to R.

G20.

We want the R to tell us what they think was the main reason they experienced the previous treatment. If R tells you “my age and my race”, probe “which one do you think was the main one?”

H2.

If not within the United States enter the full name of the country R was born.

H3.

If R asks what you mean by “while you were growing up”, it is the first 16 or so years of R’s life. If R mentions more than one place, probe for place lived most between ages 6-16.

H3a.

The definition of these sizes is up to R; do not help R decide whether the place R grew up was a large city or town, etc.

H5.

Here we are concerned with the adult male who was mostly responsible for raising R. If R says “other”, probe to find out exactly what R’s relationship with that person was, or how that person became R’s primary male caregiver.

H6.

Here we are concerned with the adult female who was mostly responsible for raising R. If R says “other”, probe to find out exactly what R’s relationship with that person was, or how that person became R’s primary female caregiver.

H7.

We mean years of all education completed, grades of school or years of college, not just high school “grades”. Also, someone studying part-time may have taken 4 years to complete the first 2 years of college, that is considered 2 years of college completed.

H8.

We want detailed information on job R’s “father/man who raised R” had when R was growing up. See the detailed instructions for questions D4-D5.

H9.

We want detailed information on the industry for job R’s “father/man who raised R” had when R was growing up. See the detailed instructions for questions D4-D5.

H10.

We mean years of all education completed, grades of school or years of college, not just high school “grades”. Also, someone studying part-time may have taken 4 years to complete the first 2 years of college, that is considered 2 years of college completed.

H11a.

We want detailed information on job R’s “mother/woman who raised R” had when R was growing up. See the detailed instructions for questions D4-D5.

H11b.

We want detailed information on job R’s “mother/woman who raised R” had when R was growing up. See the detailed instructions for questions D4-D5.

H13.

We mean years of all education completed, grades of school or years of college, not just high school “grades”. Please follow sequences carefully. In H13, numbers over 12 refer only to college or university education, not to other types of schooling. Other schooling such as beauty school, etc., should be recorded in H13g. and H13h. In H13f., write down all degrees R mentions.

H13d.

If R went to several colleges probe: “which one was the main college you attended?”.

H13f.

In H13f., write down all degrees R mentions.

H13g.

Other schooling such as beauty school, etc.

H13h.

Other schooling such as beauty school, etc., should be recorded in H13h.

H14.

Any kind of armed forces military service such as army, navy, marines, or air force.

H14a.

Some Rs may have been in the military service at separate periods of their lives. In such instances, please enter the first year they entered and the last year they were ever in.

H14b.

Some Rs may have been in the military service at separate periods of their lives. In such instances, please enter the first year they entered and the last year they were ever in.

H16.

We mean years of all education completed, grades of school or years of college, not just high school “grades”. Please follow sequences carefully. In H13, numbers over 12 refer only to college or university education, not to other types of schooling.

Please note that these questions are asked of all Rs who are married or who have a partner (as indicated in

E13).

H22.

These questions are designed to obtain the main ethnic background R considers him/herself. Do not press for an answer if R appears sensitive about (his/her) ethnic origin.

H23.

These questions assess R's feelings of closeness in attitudes, values, feelings, etc. to others who share the same or similar ethnic background. If R asks what we mean by "ideas and feelings about things", respond with the standard "whatever it means to you".

H23a_cb.

This question is to obtain R's first (or only) mentioned ethnic background. Do not press for an answer if R appears sensitive about (his/her) ethnic origin.

H23b_cb.

This question is to obtain R's second mentioned ethnic background. Do not press for an answer if R appears sensitive about (his/her) ethnic origin.

H23c_cb1.

This question is designed to obtain R's main ethnic background. Do not press for an answer if R appears sensitive about (his/her) ethnic origin.

H24.

This question is designed to obtain R's all racial backgrounds R considers him/herself.

Probe once delicately if R appears sensitive about his/her race.

H24b.

This question is designed to obtain the main racial backgrounds R considers him/herself. Probe once delicately if R appears sensitive about his/her race.

H25.

This question is designed to obtain R's biological father's racial background. Probe once delicately if R appears sensitive.

H26.

This question is designed to obtain R's biological mother's racial background. Probe once delicately if R appears sensitive.

H35.

This question is aimed at finding out how the R thinks of him/herself in regards to political issues only. Do not probe the R with examples of liberalism or conservatism, let the R make that decision on their own based on what they know about social and economic issues.

H37.

This question is aimed at finding out how the R thinks of him/herself in regards to political issues only. Do not probe the R with examples of liberalism or conservatism, let the R make that decision on their own based on what they know about social and economic issues.

H39.

In this question "financially" may be a difficult word for some respondents. You may indicate that by financially we mean the money R has to live on.

H43.

Here we only want R's individual annual income. This should include salaries, profits, wages, interest, bonuses, tips, social security, dividends, rent received, alimony received, child support received, unemployment compensation, welfare, inheritance and so on. This amount should also be before taxes for the previous calendar year.

H44.

R will be asked this question only if they refuse or don't know in H43. Income information is an important component for measuring the quality of people's lives. The income categories are designed in broad ranges so that respondents will not have to name a specific figure. Here R does not have to know or disclose their exact income they can simply give the category that their income falls into.

H45.

Here we are interested in the income of the entire household unit. That is, income from all members living in R's household from all sources. This should include salaries, profits, wages, interest, bonuses, tips, social security, dividends, rent received, alimony received, child support received, unemployment compensation, welfare, inheritance and so on. This amount should also be before taxes for the previous calendar year.

H46.

R will be asked this question only if they refuse or don't know in H45. Income information is an important component for measuring the quality of people's lives. The income categories are designed in broad ranges so that respondents will not have to name a specific figure. Here R does not have to know or disclose their entire household's exact income they can simply give the category that the household income falls into.

H47.

Please emphasize "including yourself" when you read this question to R.

H49.

Welfare Questions: Do not count food stamps, SSI, or public housing assistance as public assistance.

H49a.

Welfare Questions: Do not count food stamps, SSI, or public housing assistance as public assistance.

H49b.

Welfare Questions: Do not count food stamps, SSI, or public housing assistance as public assistance.

H49c.

Welfare Questions: Do not count food stamps, SSI, or public housing assistance as public assistance.

H50.

Welfare Questions: Do not count food stamps, SSI, or public housing assistance as public assistance.

H50a.

Welfare Questions: Do not count food stamps, SSI, or public housing assistance as public assistance.

H52.

1. OWN HOME OR BUYING IT:

- a. If R is an immediate family member of the HH and the family owns the HU, then we count it as owning/buying (e.g., R is studying and living at parent's home). If R is not an immediate family member of the HH, they may be renting rooms from the owner, in which case PAYING RENT should be entered.
- b. If R (or R's family) is buying the home by making payments on a mortgage, land contract, or deed of trust, enter OWN HOME OR BUYING IT.
- c. If R "both owns and rents" (e.g., owns trailer but rents lot, or owns a condo but pays monthly fees for services), enter OWN HOME OR BUYING IT.

2. PAYING RENT: If R or their family pays an amount which includes room and board or other services, enter PAYING RENT.

3. NEITHER OWNS NOR RENTS: Some examples are:

- a. janitors, maids, farm laborers, etc., who get living quarters as part of their pay;
- b. people who live in houses or rooms provided rent-free as a gift from someone;
- c. military or government employees living in government provided housing;
- d. people who have sold their house but have not yet moved at the time of the interview;
- e. people who pay no rent because a government housing or welfare program pays all of the rent, but the dwelling must cost nothing, not just have reduced rent.

H52a.

We want an estimate of what the sale price would be if the house were sold today, but not under forced-sale conditions. Include the value of the land/lot on which the home sits (if this also is owned by the R or R's family; it usually is).

For farmers or people with a home business, we need to separate the value of the living quarters from the value of the farm/business. For farmers, this means you should include the value of the lot/yard the home sits on, but not the buildings, equipment, or farmed land. For home businesses, ask R to exclude the value of the

business property. If R cannot separate these amounts, make a note to that effect.

H53.

Definition: a loan of property is money against the equity in the home, that is, the home itself is used as collateral. Include only mortgage/loan on this main residence.

Mortgages, land contracts, deeds of trust, and home equity loans all get a YES answer here. However, include only loans of money secured by the home (i.e., borrowed against its equity). If in doubt, collect all details.

H54.

Get the amount still owed on the principal (i.e., how much of the original amount borrowed is still owed). The monthly payment amount times the number of remaining payments does not give us the principal since payments include interest, and sometimes property taxes and insurance. For farmers and others whose living quarters and business property are mortgaged together, we'd like the portion of the principal that is just for the house (i.e., living quarters), excluding the farmland, rooms or buildings, equipment, etc. used for the farm or business. We realize this is difficult for some R's, but ask them to estimate the fraction or percentage of the total and record both the fraction and the total.

H55.

We want to know if this dwelling unit is part of a low-income housing project or subdivision where the local, state or federal government owns or subsidizes the properties to keep housing costs down. Do not include "student housing" (i.e., dormitory or family housing owned by a state university or college). Our focus here is government housing assistance for low-income families.

H56.

"Lower Rent" here means a government program is paying only part of the rent, either to the landlord or to the family. We just want government rent assistance, not that from church or charity. Government help with heating costs only doesn't go here. If the government helps with rent and rent includes heat, enter "yes" here.

H61a.

Here we want to know the number of different times R has gone to jail. Even if the time spent in jail was only a few hours, which would be considered 1 time. If R says they don't know ask them to give his/her best estimate, or guess.

H61b.

Here we want to know how much time altogether in R's life he/she has spent in jail. Ask R to add up the time they spent in jail on all the different occasions. That is, if they were in jail 3 different times, each time for 1 year, they spent 3 years total in jail. If R says they don't know ask them to give his/her best estimate, or guess.

H61c a

Here we want to know the first time that R spent one month or more in a jail or prison. If R volunteers that they never spent one month or more in a jail or prison enter 13 and they will be skipped to H62.

H62.

These questions are to find out if there is someone who is a member of the household's immediate family, but is not currently living in the household but would be living in the household if not for the circumstances of college, military etc.

H64.

This question is trying to find out if there is someone who was once a member of the household but who is now homeless.

J1b.

Access available to R for e-mail is not limited to their home computer. If R says they use it at the library or at work or school, enter 'yes'.

J1c.

Access available to R for the internet is not limited to their home computer. If R says they use it at the library or at work or school, enter 'yes'.

J4.

This is the sequence of questions, which will help us determine if R's family is eligible for the multi-generational study.

J5.

We want the number of brothers and the number of sisters you had while growing up, separately, for example 2 brothers 1 sister. Please include half, step, or adopted brothers and sisters if you grew up with them.

J5a.

Here we want to know in what order you were born, first, second, third, and so on.

J6a.

This is the sequence of questions, which will help us determine if R's family is eligible for the multi-generational study.

For each question asked, you should record the number of living relations (great-grandparents, grandparents, parents, children, etc.) on the appropriate line.

NSAL Adult Disorders, Pharmaco, Family History, Services			
<u>Page Number</u>	<u>Question Number</u>	<u>Mental Disorder</u>	<u>Administered to Whites</u>
51-74	DP1-DP88	Depression	X
75-86	M1-M54	Mania	X
87-102	PD1-PD66	Panic Disorder	X
103-113	SO1-SO40	Social Phobia	X
114-124	AG1-AG39	Agoraphobia	X
125-139	GA1-GA51b	Generalized Anxiety Disorder	X
140-146	SD0-SD29	Suicidality	
147-166	SU1-SU120b	Alcohol and Other Substance Abuse and Dependence	
167-175	PH1-PH175	Pharmacoepidemiology	
176-178	PEA40-PEA83	Personality Disorders	
179-210	PT1-PT281	Post-Traumatic Stress Disorder	
211-212	NSD1-NSD2	30-Day Symptoms	
213	TB1	Tobacco Use	
214-226	EA1-EA43	Eating Disorders: Anorexia and Bulimia	
227-230	PR1-PR19a	Pre-Menstrual Dysphoric Disorder	
231-233	O1-O17	Obsessive-Compulsive Disorder	
234-240	PS1-PS10	Psychosis Screen	
241-242	GM1-GM6	Gambling	
243-246	FH1-FH39	Family History	X
247-261	AD1-AD51	Attention-Deficit/Hyperactivity Disorder	
262-268	OD1-OD27	Oppositional Defiant Disorder	
269-275	CD1-CD40	Conduct Disorder	
276-287	SA1-SA50b	Separation Anxiety	
288-323	SR1-SR135	Services	



Collaborative Psychiatric Epidemiology Surveys

NLAAS



Collaborative Psychiatric Epidemiology Surveys

NLAAS Income Imputation Memo

May 8, 2007

A. Overview

- All NLAAS respondents were asked to identify their income ranges from 6 categories. We took the midpoint value for the income range that the respondent chooses. The number of missing responses in each categories are:

Table 1: Mean of non-missing and imputed household's income by income category

Income Category	Missing responses	Mean non-missing	Mean after imputation
Own earned income(FN2INTR1, FN2INTR2)	376	\$21,191.94	\$2,1869.83
Spouse's earned income (FN5) ¹	419	\$13,755.44	\$1,3944.37
Earned income of others in the household (FN7)	648	\$13,468.28	\$1,1288.01
Social Security income (FN9)	448	\$3,844.94	\$3,461.233
Government assistance (FN10)	450	\$1,569.68	\$1,408.084
Other income (investments, alimony, etc.) (FN11)	564	\$2,915.39	\$2,557.032
Household income	1,281	\$59,056.44	\$54,528.56

B. Imputation Process

STEP 1: CONVERT RESPONSES OF POST-TAX INCOME TO PRE-TAX INCOME

- For respondent's own earned income and spouse's earned income, we convert the post-tax income to pre-tax income by multiplying the reported amount by 1.2.

STEP 2: LOGICAL IMPUTE MISSING RESPONSES

- For the earned income of others in the household, social security income, government assistance and other income (investments, alimony, etc.), we set the missing value to 0.

STEP 3: IMPUTE MISSING RESPONSES USING HOTDECK

- We used hotdeck imputation method (Schafer 1989) in STATA to impute the missing values for the respondent's own earned income and spouse's earned income. We tabulated missing data patterns by sub-ethnicity, gender, age category, education category, region, household composition, and employment status. Missing income values are replaced stochastically matching on the above variables. The approximate Bayesian bootstrap method of Rubin and Schenker (1986) was used in selecting the replacement values from the matched complete data

STEP 4: COMBINE THE HOUSEHOLD INCOME

- The generated household income variable is the sum of the respondent's own earned income and spouse's earned income, earned income of others in the household, social security income, government assistance, and other income (investments, alimony, etc.)

¹ The Spouse income is set as zero if the respondent is not married.

REFERENCES

Schafer, J.L. (1989). "Evaluating imputation in the decennial census". Joint Statistical Agreement 88-02, U.S. Bureau of the Census and Harvard University, 16 pages.

Rubin, D.B. and Schenker, N. (1986). Multiple imputation for interval estimation from simple random samples with ignorable nonresponse. *Journal of the American Statistical Association*, 81, 366-374.

NLAAS

RESPONDENT WORKBOOK

ENGLISH VERSION

SID _____

**WHICH PROBLEMS DID YOU HAVE
MOST OF THE DAY NEARLY EVERY DAY?**

(CHECK OFF “YES” RESPONSES IN BOXES Ö)

- q Sad, empty, or depressed
- q So sad that nothing could cheer you up
- q Discouraged about your life
- q Hopeless about the future
- q Lost interest in almost all things
- q Nothing was fun
- q Much smaller appetite than usual
- q Much larger appetite than usual
- q Gain weight without trying to
- q Lost weight without trying to
- q A lot more trouble than usual falling asleep
- q Slept a lot more than usual
- q Slept much less than usual
- q Tired or low in energy
- q A lot more energy than usual
- q Talked or moved more slowly than is normal for you
- q Anyone else noticed that you were talking or moving slowly
- q So restless or jittery that you paced up and down

**WHICH PROBLEMS DID YOU HAVE
MOST OF THE DAY NEARLY EVERY DAY?**

(CHECK OFF "YES" RESPONSES IN BOXES Ö)

- q Anyone else noticed that you were restless
- q Thoughts came much more slowly than usual
- q Thoughts seemed to jump from one thing to another
- q A lot more trouble concentrating than is normal for you
- q Unable to make up your mind about things
- q Lost self-confidence
- q Not as good as other people
- q Totally worthless
- q Guilty
- q Irritable, grouchy, or in a bad mood
- q Nervous or anxious
- q Sudden attacks of intense fear or panic
- q Thought a lot about death
- q Thought it would be better if you were dead
- q Thought about committing suicide
- q Made a suicide plan
- q Made a suicide attempt
- q Could not cope with everyday responsibilities
- q Wanted to be alone rather than spend time with friends or relatives
- q Less talkative than usual
- q Often in tears

WHICH STATEMENT IN EACH SERIES COMES CLOSEST TO YOUR EXPERIENCE?

(CIRCLE THE NUMBER OF THE STATEMENT THAT COMES CLOSEST TO YOUR EXPERIENCE)

SERIES 1: PROBLEMS FALLING ASLEEP

1. You never took longer than 30 minutes to fall asleep.
2. You took at least 30 minutes to fall asleep, less than half the time.
3. You took at least 30 minutes to fall asleep, more than half the time.
4. You took more than 60 minutes to fall asleep, more than half the time.

SERIES 2: WAKING UP AT NIGHT

1. You did not wake up at night.
2. You had a restless, light sleep with few brief awakenings each night.
3. You woke up at least once a night, but you got back to sleep easily.
4. You woke up more than once a night and stayed awake for 20 minutes or more, more than half the time.

SERIES 3: WAKING UP TOO EARLY

1. Most of the time, you woke up no more than 30 minutes before you needed to get up.
2. More than half the time, you woke up more than 30 minutes before you needed to get up.
3. You almost always woke up at least one hour or so before you needed to, but you went back to sleep eventually.
4. You woke up at least one hour before you needed to and couldn't get back to sleep.

SERIES 4: THE AMOUNT OF SLEEP YOU GOT EACH NIGHT

1. You slept no longer than 7-8 hours/night, without napping during the day.
2. You slept no longer than 10 hours in a 24-hour period including naps.
3. You slept no longer than 12 hours in a 24-hour period including naps.
4. You slept longer than 12 hours in a 24-hour period including naps.

WHICH STATEMENT IN EACH SERIES COMES CLOSEST TO YOUR EXPERIENCE?

(CIRCLE THE NUMBER OF THE STATEMENT THAT COMES CLOSEST TO YOUR EXPERIENCE)

SERIES 5: SADNESS

1. You did not feel sad.
2. You felt sad less than half the time.
3. You felt sad more than half the time.
4. You felt sad nearly all the time.

SERIES 6: CONCENTRATING AND MAKING DECISIONS

1. There was no change in your usual capacity to concentrate or make decisions.
2. You occasionally felt indecisive or found that your attention wandered.
3. Most of the time, you struggled to focus your attention or to make decisions.
4. You couldn't concentrate well enough to read or you couldn't make even minor decisions.

SERIES 7: FEELING DOWN ON YOURSELF

1. You saw yourself as equally worthwhile and deserving as other people.
2. You were more self-blaming than usual.
3. You largely believed that you caused problems for others.
4. You thought almost constantly about major and minor defects in yourself.

SERIES 8: INTEREST IN YOUR DAILY ACTIVITIES

1. There was no change from usual in how interested you were in other people or activities.
2. You noticed that you were less interested in people or activities.
3. You found you had interest in only one or two of your formerly pursued activities.
4. You had virtually no interest in formerly pursued activities.

SERIES 9: ENERGY

1. There was no change in your usual level of activity.
2. You got tired more easily than usual.
3. You had to make a big effort to start or finish your usual daily activities (for example, shopping, homework, cooking, or going to work).
4. You really couldn't carry out most of your usual daily activities because you just didn't have the energy.

DID YOU EVER STRONGLY FEAR . . .

(CHECK OFF "YES" RESPONSES IN BOXES Ö)

q Meeting new people

- q Talking to people in authority
- q Speaking up in a meeting or class
- q Going to parties or other social gatherings
- q Acting, performing, or giving a talk in front of an audience
- q Taking an important exam or interviewing for a job
- q Working while someone watches
- q Entering a room when others are already present
- q Talking with people you don't know very well
- q Expressing disagreement to people you don't know very well
- q Writing or eating or drinking while someone watches
- q Urinating in a public bathroom or using a bathroom away from home
- q Being in a dating situation
- q Any other social or performance situation where you could be the center of attention or where something embarrassing might happen

DID YOU EVER STRONGLY FEAR . . .

(CHECK OFF “YES” RESPONSES IN BOXES Ö)

- q Being home alone
- q Being in crowds
- q Traveling away from home
- q Traveling alone or being alone away from home
- q Using public transportation
- q Driving a car

- q Standing in a line in a public place
- q Being in a department store, shopping mall, or supermarket
- q Being in a movie theater, auditorium, lecture hall, or church
- q Being in a restaurant or any other public place
- q Being in a wide, open field or street

EXAMPLES OF COMMONLY MENTIONED REASONS FOR BEING ANXIOUS:

(CIRCLE ALL THAT APPLY)

DIFFUSE WORRIES, SUCH AS ...

- Everything
- Nothing in particular

PERSONAL PROBLEMS, SUCH AS ...

- Finances
- Success at school or work
- Social life
- Love life
- Relationships at school or work
- Relationships with family
- Physical appearance
- Physical health
- Mental health
- Substance use

· Other personal problems (Specify) _____

EXAMPLES OF COMMONLY MENTIONED REASONS FOR BEING ANXIOUS:

(CIRCLE ALL THAT APPLY)

PHOBIC AND OBSESSIVE-COMPULSIVE SITUATIONS ...

- Social phobias (e.g., meeting people after moving to a new town)
- Agoraphobia (e.g., leaving home alone after a divorce)
- Specific phobias (e.g., fears of bugs, heights, or closed spaces)
- Obsessions (e.g., worry about germs)
- Compulsions (e.g., repetitive hand washing)

NETWORK PROBLEMS, SUCH AS ...

- Being away from home or apart from loved ones
- The health or welfare of loved ones — first mention
- The health or welfare of loved ones — second mention
- The health or welfare of loved ones — third mention

SOCIETAL PROBLEMS, SUCH AS ...

- Crime/violence
- The economy
- The environment (e.g. global warming, pollution)
- Moral decline of society (e.g. commercialism, decline of the family)
- War/revolution
- Other societal problems (Specify) _____

WHAT PROBLEMS DID YOU TAKE THE MEDICINE FOR?

(CIRCLE ALL THAT APPLY)

I. MOOD

- Sadness/ depression/ crying
- Manic mood
- Anger or irritability
- Nerves/ anxiety
- Panic
- Suicidal thoughts

II. PHYSICAL SYMPTOMS

- Low energy
- Poor appetite
- Poor sleep
- Physical pain

III. COGNITIVE SYMPTOMS

- Poor concentration
- Poor memory

IV. ROLE FUNCTIONING

- Little or no sexual functioning
- Marital problems
- Not getting along with others
- Poor work performance

V. OTHER

- Alcohol/ drug problems
- Other (Specify) _____

WHICH OF THESE ARE REASONS WHY YOU STOPPED TAKING THE MEDICINE?

(CHECK OFF “YES” RESPONSES IN BOXES Ö)

- q The medicine was not helping
- q You thought the problem would get better without more medicine
- q You couldn't afford to pay for the medicine
- q You were too embarrassed to continue taking the medicine
- q You wanted to solve the problem without medications
- q The medicine caused side-effects that made you stop
- q You were afraid that you would get dependent on the medication
- q Someone in your personal life pressured you to stop
- q Number of doses per day was not convenient
- q Medicine interacted with another medicine
- q Worsened another medical condition (Ex. Diabetes)
- q *Any other reason for stopping (Specify)* _____

DID YOU EVER HAVE ANY OF THESE STRESSFUL EXPERIENCES?

(CHECK OFF “YES” RESPONSES IN BOXES Ø)

GROUP 1: TRAUMATIC PERSONAL EXPERIENCES

- q Combat experience
- q Relief worker in war zone
- q Civilian in war zone
- q Civilian in region of terror
- q Refugee
- q Kidnapped
- q Toxic chemical exposure
- q Automobile accident
- q Other life-threatening accident
- q Natural disaster
- q Man-made disaster
- q Life-threatening illness

GROUP 2: PERSONAL VIOLENCE

- q Beaten up as a child by caregiver
- q Beaten up by a spouse or romantic partner
- q Beaten up by someone else
- q Mugged or threatened with a weapon
- q Raped
- q Sexually assaulted
- q Stalked

GROUP 3: EVENTS AFFECTING OTHERS

- q Unexpected death of a loved one
- q Child's serious illness
- q Traumatic event to loved one
- q Witnessed serious physical fights at home
- q Witnessed death or dead body or saw someone seriously hurt
- q Accidentally caused serious injury or death
- q Purposely injured, tortured, or killed someone
- q Saw atrocities
- q Any other traumatic or life-threatening event

DID YOU HAVE ANY OF THESE REACTIONS?

(CHECK OFF “YES” RESPONSES IN BOXES Ø)

GROUP 1: TRAUMATIC PERSONAL EXPERIENCES

- q Trying not to think about it
- q Staying away from reminders of it
- q Being unable to remember parts of it
- q Losing interest in things you used to enjoy
- q Feeling emotionally distant from other people
- q Trouble feeling normal feelings
- q Feeling you have no reason to plan for the future

GROUP 2: PERSONAL VIOLENCE

- q Unwanted memories
- q Unpleasant dreams
- q Flashbacks
- q Getting very upset when reminded of it
- q Physical reactions

GROUP 3: EVENTS AFFECTING OTHERS

- q Sleep problems
- q Irritability
- q Trouble concentrating
- q Being more alert or watchful
- q Being jumpy or easily startled

WHO DID THIS TO YOU?

(CIRCLE ALL THAT APPLY)

1. Spouse or romantic partner
2. Parent / guardian
3. Step-relative
4. Other relative
5. Someone else you knew
6. Stranger

HEALTH RATING SCALE

***MARK AND LABEL THE NUMBER YOU WOULD
USE TO DESCRIBE...***

Worst Possible
Health

Perfect Health



NLAAS

RESPONDENT BOOKLET

WHAT LANGUAGE DO YOU SPEAK?

- Spanish only
- Mostly Spanish, some English
- Spanish and English about the same
- Mostly English, some Spanish
- English only

***HOW MUCH HAVE YOUR ACTIVITIES BEEN
LIMITED BY HEALTH PROBLEMS
IN THE PAST THREE MONTHS?***

100 Excellent functioning in all areas of life..... (e.g., superior performance at work and excellent personal relationships)

- 90 Good functioning in all areas of life..... (e.g., no problems at work or in personal life)
- 80 Slight difficulty (e.g., temporarily falling behind in work or school, minor argument with friend or relative)
- 70 Some difficulty..... (e.g., some work or school problems, but still generally doing well; or some interpersonal problems, but still having meaningful relationships)
- 60 Moderate difficulty..... (e.g., inadequate work or school performance or ongoing conflicts with people in your personal life)
- 50 Serious impairment in one area..... (e.g., can't keep a job or has no friends)
- 40 Serious impairment in more than one area.... (e.g., unable to work and has no friends and has conflicts with family)

- 30 Unable to function in most areas..... (e.g., no job, no friends, stays in bed most days)
- 20 Difficulty with basic needs..... (e.g., needs help with bathing or dressing or preparing meals; cannot be left alone for long periods)
- 10 Unable to meet basic needs..... (e.g., requires constant supervision or nursing home care)
- 0 Unconscious..... (e.g., in coma or on a life support machine)

***WAS THERE EVER A TIME IN YOUR LIFE WHEN
YOU HAD A STRONG FEAR OF . . .***

GROUP 1: ANIMALS

- Bugs
- Snakes or dogs
- Any other animals

GROUP 2: NATURAL ENVIRONMENT

- Still water, like a swimming pool or a lake
- Storms
- Thunder or lightning

GROUP 3: MEDICAL SETTINGS

- Going to the dentist
- Going to the doctor
- Getting a shot or injection
- Seeing blood
- Seeing injury
- Being in a hospital or doctor's office

GROUP 4: CLOSED SPACES

- Caves
- Tunnels
- Closets
- Elevators

GROUP 5: HIGH PLACES

- Roofs
- Balconies
- Bridges
- High staircases

GROUP 6: FLYING

- Flying
- Airplanes

***WAS THERE EVER A TIME IN YOUR LIFE
WHEN YOU FELT VERY AFRAID OR REALLY
REALLY SHY WITH PEOPLE LIKE . . .***

- Meeting new people
- Going to parties
- Going on a date
- Using a public bathroom
- Giving a speech
- Speaking in class

***WAS THERE EVER A TIME IN YOUR LIFE WHEN YOU
FELT VERY UNCOMFORTABLE OR AFRAID OF . . .***

- Being in crowds
- Going to public places
- Traveling by yourself
- Traveling away from home

**WHICH PROBLEMS DID YOU HAVE
MOST OF THE DAY NEARLY EVERY DAY?**

(CHECK OFF "YES" RESPONSES IN BOXES Ø)

- q Sad, empty, or depressed
- q So sad that nothing could cheer you up
- q Discouraged about your life
- q Hopeless about the future
- q Lost interest in almost all things
- q Nothing was fun
- q Much smaller appetite than usual
- q Much larger appetite than usual
- q Gain weight without trying to
- q Lost weight without trying to
- q A lot more trouble than usual falling asleep
- q Slept a lot more than usual
- q Slept much less than usual
- q Tired or low in energy
- q A lot more energy than usual
- q Talked or moved more slowly than is normal for you
- q Anyone else noticed that you were talking or moving slowly
- q So restless or jittery that you paced up and down

(CHECK OFF "YES" RESPONSES IN BOXES Ø)

- q Anyone else noticed that you were restless
- q Thoughts came much more slowly than usual

- q Thoughts seemed to jump from one thing to another
- q A lot more trouble concentrating than is normal for you
- q Unable to make up your mind about things
- q Lost self-confidence
- q Not as good as other people
- q Totally worthless
- q Guilty
- q Irritable, grouchy, or in a bad mood
- q Nervous or anxious
- q Sudden attacks of intense fear or panic
- q Thought a lot about death
- q Thought it would be better if you were dead
- q Thought about committing suicide
- q Made a suicide plan
- q Made a suicide attempt
- q Could not cope with everyday responsibilities
- q Wanted to be alone rather than spend time with friends or relatives
- q Less talkative than usual
- q Often in tears

WHICH STATEMENT IN EACH SERIES COMES CLOSEST TO YOUR EXPERIENCE?

(CIRCLE THE NUMBER OF THE STATEMENT THAT COMES CLOSEST TO YOUR EXPERIENCE)

SERIES 1: PROBLEMS FALLING ASLEEP

1. You never took longer than 30 minutes to fall asleep.
2. You took at least 30 minutes to fall asleep, less than half the time.
3. You took at least 30 minutes to fall asleep, more than half the time.
4. You took more than 60 minutes to fall asleep, more than half the time.

SERIES 2: WAKING UP AT NIGHT

1. You did not wake up at night.

2. You had a restless, light sleep with few brief awakenings each night.
3. You woke up at least once a night, but you got back to sleep easily.
4. You woke up more than once a night and stayed awake for 20 minutes or more, more than half the time.

SERIES 3: WAKING UP TOO EARLY

1. Most of the time, you woke up no more than 30 minutes before you needed to get up.
2. More than half the time, you woke up more than 30 minutes before you needed to get up.
3. You almost always woke up at least one hour or so before you needed to, but you went back to sleep eventually.
4. You woke up at least one hour before you needed to and couldn't get back to sleep.

SERIES 4: THE AMOUNT OF SLEEP YOU GOT EACH NIGHT

1. You slept no longer than 7-8 hours/night, without napping during the day.
2. You slept no longer than 10 hours in a 24-hour period including naps.
3. You slept no longer than 12 hours in a 24-hour period including naps.
4. You slept longer than 12 hours in a 24-hour period including naps.

*(CIRCLE THE NUMBER OF THE STATEMENT
THAT COMES CLOSEST TO YOUR EXPERIENCE)*

SERIES 5: SADNESS

1. You did not feel sad.
2. You felt sad less than half the time.
3. You felt sad more than half the time.
4. You felt sad nearly all the time.

SERIES 6: CONCENTRATING AND MAKING DECISIONS

1. There was no change in your usual capacity to concentrate or make decisions.
2. You occasionally felt indecisive or found that your attention wandered.
3. Most of the time, you struggled to focus your attention or to make decisions.
4. You couldn't concentrate well enough to read or you couldn't make even minor decisions.

SERIES 7: FEELING DOWN ON YOURSELF

1. You saw yourself as equally worthwhile and deserving as other people.
2. You were more self-blaming than usual.
3. You largely believed that you caused problems for others.
4. You thought almost constantly about major and minor defects in yourself.

SERIES 8: INTEREST IN YOUR DAILY ACTIVITIES

1. There was no change from usual in how interested you were in other people or activities.
2. You noticed that you were less interested in people or activities.
3. You found you had interest in only one or two of your formerly pursued activities.
4. You had virtually no interest in formerly pursued activities.

SERIES 9: ENERGY

1. There was no change in your usual level of activity.
2. You got tired more easily than usual.
3. You had to make a big effort to start or finish your usual daily activities (for example, shopping, homework, cooking, or going to work).
4. You really couldn't carry out most of your usual daily activities because you just didn't have the energy.

INTERFERENCE SCALE



DID YOU EVER STRONGLY FEAR . . .

(CHECK OFF "YES" RESPONSES IN BOXES Ø)

- q Meeting new people
- q Talking to people in authority
- q Speaking up in a meeting or class
- q Going to parties or other social gatherings
- q Acting, performing, or giving a talk in front of an audience
- q Taking an important exam or interviewing for a job
- q Working while someone watches
- q Entering a room when others are already present
- q Talking with people you don't know very well
- q Expressing disagreement to people you don't know very well
- q Writing or eating or drinking while someone watches
- q Urinating in a public bathroom or using a bathroom away from home
- q Being in a dating situation
- q Any other social or performance situation where you could be the center of attention or where something embarrassing might happen

***DID YOU EVER HAVE 2 OR MORE OF
THE FOLLOWING REACTIONS?***

- Heart pounding or racing
- Sweating
- Trembling
- Feeling sick to your stomach
- Having a dry mouth
- Having chills or hot flashes
- Feeling numbness or tingling sensations
- Having trouble breathing normally
- Feeling like you were choking
- Having pain or discomfort in your chest
- Feeling dizzy or faint
- Afraid that you might die
- Fear of losing control, going crazy, or passing out
- Feeling like you were distant from the situation “not really there,” or like you were watching yourself in a movie
- Feeling that things around you were unreal or like a dream

DID YOU EVER STRONGLY FEAR . . .

- Being home alone
- Being in crowds
- Traveling away from home
- Traveling alone or being alone away from home

- Using public transportation
- Driving a car
- Standing in a line in a public place
- Being in a department store, shopping mall, or supermarket
- Being in a movie theater, auditorium, lecture hall, or church
- Being in a restaurant or any other public place
- Being in a wide, open field or street

DID YOU HAVE 1 OR MORE OF THE FOLLOWING REACTIONS?

- Having trouble breathing normally
- Feeling like you were choking
- Having pain or discomfort in your chest
- Feeling sick to your stomach
- Feeling dizzy or faint
- Fear of losing control, going crazy, or passing out
- Afraid that you might die
- Having chills or hot flashes
- Feeling numbness or tingling sensations
- Feeling like you were “not really there,” like you were watching a movie of yourself
- Feeling that things around you were not real or like a dream

EXAMPLES OF COMMONLY MENTIONED

REASONS FOR BEING ANXIOUS

DIFFUSE WORRIES, SUCH AS . . .

- Everything
- Nothing in particular

PERSONAL PROBLEMS, SUCH AS . . .

- Finances
- Success at school or work
- Social life
- Love life
- Relationships at school or work
- Relationships with family
- Physical appearance
- Physical health
- Mental health
- Substance use
- Other personal problems
(Specify) _____

PHOBIC AND OBSESSIVE-COMPULSIVE SITUATIONS . . .

- Social phobias (e.g., meeting people after moving to a new town)
- Agoraphobia (e.g., leaving home alone after a divorce)
- Specific phobias (e.g., fears of bugs, heights, or closed spaces)
- Obsessions (e.g., worry about germs)
- Compulsions (e.g., repetitive hand washing)

NETWORK PROBLEMS, SUCH AS . . .

- Being away from home or apart from loved ones
- The health or welfare of loved ones — first mention
- The health or welfare of loved ones — second mention
- The health or welfare of loved ones — third mention

SOCIAL PROBLEMS, SUCH AS . . .

- Crime/violence
- The economy
- The environment (e.g., global warming, pollution)
- Moral decline of society (e.g., commercialism, decline of the family)
- War/revolution
- Other societal problems (Specify) _____

***DID ANY OF THESE 3 EXPERIENCES
EVER HAPPEN TO YOU?***

- A. You seriously thought about committing suicide
- B. You made a plan for committing suicide
- C. You attempted suicide

***WHICH OF THESE 3 STATEMENTS BEST
DESCRIBES YOUR SITUATION?***

1. I made a serious attempt to kill myself and it was only luck that I did not succeed.
2. I tried to kill myself, but knew that the method was not foolproof.

3. My attempt was a cry for help. I did not intend to die.

WHAT METHOD DID YOU USE?

- A. Gun
- B. Razor, knife or other sharp instrument
- C. Overdose of prescription medications
- D. Overdose of over-the-counter medications
- E. Overdose of other drug (e.g. heroin, crack, alcohol)
- F. Poisoning (e.g. carbon monoxide, rat poison)
- G. Hanging, strangulation, suffocation
- H. Drowning
- I. Jumping from high places
- J. Motor vehicle crash
- K. Other (please describe) _____

DID YOU EVER IN YOUR LIFE TALK TO ANY OF THESE PROFESSIONALS?

- A. Psychiatrist
- B. General practitioner or family doctor
- C. Any other medical doctor, like a cardiologist or (women: gynecologist/ men: urologist)
- D. Psychologist
- E. Social worker
- F. Counselor
- G. Any other mental health professional, such as a psychotherapist or a mental health nurse
- H. A nurse, occupational therapist, or other health professional

- I. A religious or spiritual advisor like a minister, priest, pastor or rabbi
- J. Any other healer, like an herbalist, chiropractor, doctor of oriental medicine, or spiritualist
- M. Other (Specify) _____

***WHICH OF THE FOLLOWING TYPES OF
PROFESSIONALS GAVE YOU A PRESCRIPTION OR
MEDICINE FOR YOUR EMOTIONS, NERVES,
OR MENTAL HEALTH OR SUBSTANCE USE?***

- A. Psychiatrist
- B. General practitioner or family doctor
- C. Any other medical doctor, like a cardiologist or (women: gynecologist/ men: urologist)
- D. Psychologist
- G. Any other mental health professional, such as a psychotherapist or a mental health nurse
- H. A nurse, occupational therapist, or other health professional
- I. Any other healer, like an herbalist, doctor of oriental medicine
- M. Other (Specify) _____

***IN WHICH OF THESE LOCATIONS DID YOU
SEE THE PROFESSIONAL?***

- A. Hospital emergency department
- B. Psychiatric outpatient clinic
- C. Drug or alcohol outpatient clinic
- D. Private office
- E. Social service agency or department
- F. Program in jail or prison
- G. Drop-in center or program for people with emotional problems with alcohol or drugs
- H. Church or other religious building

**WHICH OF THESE THREE STATEMENTS
BEST DESCRIBES WHY YOU DIDN'T WANT
TO SEE A PROFESSIONAL?**

1. I didn't think I had a problem.
2. I had a problem, but thought I could handle it on my own.
3. I thought that I needed help but didn't believe professional treatment would be helpful.

***WHICH OF THESE WERE THE MAIN THINGS YOU
WERE HOPING TO GET FROM TREATMENT?***

- A. To help with your emotions (e.g., sadness, anger)
- B. To control problem behaviors (e.g., drinking problems, gambling)
- C. To deal with general body complaints (e.g., tiredness, headaches)
- D. To help make a life decision (e.g., to get married or change jobs)
- E. To cope with ongoing stress (e.g., job stress, marital problems)
- F. To cope with recent stressful events (e.g., divorce, death of a loved one)
- G. To come to terms with your past (e.g., feelings about your childhood)

***DID YOU USE ANY OF THESE THERAPIES
IN THE PAST 12 MONTHS?***

- Acupuncture

- Biofeedback
- Chiropractic
- Energy healing
- Exercise or movement therapy
- Herbal therapy (e.g., St. John's Wort, Chamomile)
- High dose mega-vitamins
- Homeopathy
- Hypnosis
- Imagery techniques
- Massage therapy
- Prayer or other spiritual practices
- Relaxation or meditation techniques
- Special diets
- Spiritual healing by others
- Any other non-traditional remedy or therapy
(Specify) _____

WHAT TYPES OF HERBAL MEDICINES DID YOU USE?

- Chamomile
- Kava
- Lavender
- St. John's Wort
- Valerian
- Chasteberry
- Black Cohosh
- Other (Specify) _____

***WHAT KIND OF SELF-HELP GROUP DID YOU
GO TO IN THE PAST 12 MONTHS?***

- A. Groups for people with substance problems (such as Alcoholics Anonymous or Rational Recovery)
- B. Groups for people with emotional problems (such as Grow, The Manic Depressive Association, or Emotions Anonymous)
- C. Groups for people with eating problems
- D. Groups for dealing with the death of a loved one (such as The Compassionate Friends or Widow to Widow)
- E. Groups for people making other life transitions (such as Parents Without Partners or Empty Nesters)
- F. Groups for survivors (such as Adult Children of Alcoholics or Survivors of Childhood Sexual Abuse)
- G. Groups for people with physical disabilities or illnesses (such as Living with Cancer or Living with AIDS)
- H. Parent support groups (such as Tough Love or Parents Anonymous)
- I. Groups for the families of people with a physical illness (such as the Candlelighters or Families of Children with Cancer)
- J. Groups for the families of people with emotional or substance problems (such as the National Alliance for the Mentally Ill or Al Anon)
- K. Any other self-help group, mutual help group, or support group (Specify)

***WHICH OF THE FOLLOWING STATEMENTS
BEST DESCRIBES THE RELATIONSHIP BETWEEN
YOUR PARTICIPATION IN THE SELF-HELP GROUP
AND YOUR SEEING A PROFESSIONAL?***

- 1. A professional ran the group

2. A professional asked me to attend the group as part of my treatment, but the group was not run by a professional
3. You attended the self-help group at the same time you saw a professional, but the two were not related
4. You attended the self-help group at a different time than when you saw a professional

***IN THE PAST 12 MONTHS, DID YOU TAKE ANY OF
THE FOLLOWING TYPES OF PRESCRIPTION
MEDICATIONS UNDER THE SUPERVISION OF
A DOCTOR, FOR YOUR EMOTIONS OR NERVES
OR YOUR USE OF ALCOHOL OR DRUGS?***

- Sleeping pills or other sedatives, (such as Ambien or Sonata)
- Anti-depressant medications, (such as Prozac or Zoloft)
- Tranquilizers, (such as Xanax/Tafil or Ativan)
- Amphetamines or other stimulants, (such as Ritalin or Dextroamphetamine)
- Anti-psychotic medications, (such as Haldol/Haloperidol or Risperdal)

DID YOU TAKE ANY OF THE FOLLOWING MEDICINES?

Acetophenazine
Adapin
Adderall
Alprazolam
Amantadine
Ambien
Amitriptyline
Amobarbital
Amoxapine
Amphetamines
Amytal
Anafranil
Antabuse
Antidepressant
Antipsychotic
Aquachloral
Artane
Asendin
Ativan
Aventyl
Benadryl
Benztropine
Bupropion
Buspar
Buspirone
Carbamazepine
Carbatrol
Catapres
Celexa
Chloral Hydrate
Chlordiazepoxide
Chlorpromazine
Citalopram
Clomipramine
Clonazepam
Clonidine
Clorazepate
Clorazil
Clorprothixene
Clozapine
Clozaril
Cogentin
Cylert
Dalmane
Depacon
Depakene
Depakote
Desipramine
Desoxyn
Desoxyn Gradumet
Desyrel
Dexedrine
Dextroamphetamine

Dextrostat
Dihydroergotamine Mesylate
Diazepam
Diphenhydramine
Disulfiram
Divalproex
Doral
Doriden
Doxepin
Droperidol
Duralith
Effexor
Elavil
Epitol
Equanil
Eskalith
Eskalith CR-450
Estazolam
Ethchlorvynol
Etrafon
Fluoxetine
Fluphenazine
Flurazepam
Fluvoxamine
Gabapentin
Gen-Xene
Glutethimide
Halazepam
Halcion
Haldol
Haldol Depot
Haloperidol
Hydroxyzine
Imipramine
Inapsine
Inderal
Isocarboxazid
Janimine
Klonopin
Lamictal
Lamotrigine
Librax
Libritabs
Librium
Limbitrol
Lithium
Lithium Carbonate
Lithium Citrate Syrup
Lithobid
Lithonate
Lithotabs
Lorazepam
Loxapine
Loxitane
Ludiomil

Luminal
Luvox
Maprotiline
Marplan
Mellaril
Meprobamate
Mesoridazine
Methamphetamine
Methotripteneprazine
Methyl-Phenidate
Midazolam
Miltown
Mirtazapine
Mitran
Moban
Moclobemide
Molindone
Nardil
Navane
Nefazodone
Nembutal
Neuramate
Neurontin
Norpramine
Nortriptyline
Obetrol
Olanzapine
Orap
Oxazepam
Oxybutynin
Pamelor
Parnate
Paroxetine
Paxil
Paxipam
Pemoline
Permitil
Perphenazine
Phenelzine
Phenergan
Phenobarbital
Phenytoin
Pimozide
Placidyl
Prazepam
Prolixin
Prolixin Depot
Propofol
Propranolol
Prosom
Protriptyline
Prozac
Quazepam
Quetiapine
Remeron

Reserpine
Restoril
Risperdal
Risperidone
Ritalin
Secobarbital
Seconal
Serax
Serentil
Seroquel
Sertraline
Serzone
Sinequan
Sodium Pentobarbital
Sodium Valproate
Sonata
Stelazine
Surmontil
Symmetrel
Taractan
Tegretol
Temazepam
Thioridazine
Thiothixene
Thorazine
Tindal
Tofranil
Tranxene
Tranylcypromine
Trazodone
Triavil
Triazolam
Trifluoperazine
Triflupromazine
Trihexyphenidyl
Trilafon
Trimipramine
Valium
Valproate
Valproic Acid
Venlafaxine
Versed
Vesprin
Vistaril
Vivactil
Wellbutrin
Xanax
Zaleplon
Zoloft
Zolpidem
Zyban
Zyprexa

WHAT PROBLEMS DID YOU TAKE THE MEDICINE FOR?

I. MOOD

- Sadness/ depression/ crying
- Manic mood
- Anger or irritability
- Nerves/ anxiety
- Panic
- Suicidal thoughts

II. PHYSICAL SYMPTOMS

- Low energy
- Poor appetite
- Poor sleep
- Physical pain

III. COGNITIVE SYMPTOMS

- Poor concentration
- Poor memory

IV. ROLE FUNCTIONING

- Little or no sexual functioning
- Marital problems
- Not getting along with others
- Poor work performance

V. OTHER

- Alcohol/ drug problems
- Other (Specify) _____

WHICH OF THESE ARE REASONS WHY YOU STOPPED TAKING THE MEDICINE?

- The medicine was not helping
- You thought the problem would get better without more medicine
- You couldn't afford to pay for the medicine

- You were too embarrassed to continue taking the medicine
- You wanted to solve the problem without medications
- The medicine caused side-effects that made you stop
- You were afraid that you would get dependent on the medication
- Someone in your personal life pressured you to stop
- Number of doses per day was not convenient
- Medicine interacted with another medicine
- Worsened another medical condition (Ex. Diabetes)
- Any other reason for stopping (Specify) _____

WHAT ARE YOUR MAIN ETHNIC ORIGINS?

North and Central America

1. BELIZE
2. CANADA
3. COSTA RICA
4. EL SALVADOR
5. GUATAMALA
6. HONDURAS
7. MEXICO
8. NICARAGUA
9. PANAMA
10. UNITED STATES

South America

11. ARGENTINA
12. BOLIVIA
13. BRAZIL
14. CHILE
15. COLOMBIA
16. ECUADOR
17. FALKLAND ISLAND
18. GUYANA
19. PARAGUAY
20. PERU
21. SURINAME
22. URUGUAY
23. VENEZUELA

Africa

24. ALGERIA
25. ANGOLA
26. BENIN
27. BOTSWANA
28. BURKINA FASO
29. CAMEROON

- 30. CENTRAL AFRICAN REPUBLIC
- 31. CHAD
- 32. CONGO
- 33. COMOROS
- 34. DJIBOUTI
- 35. IVORY COAST
- 36. EGYPT
- 37. EQUATORIAL GUINEA
- 38. ERITREA
- 39. ETHIOPIA
- 40. GABON
- 41. GHANA
- 42. GUINEA
- 43. GUINEA BISSAU
- 44. KENYA
- 45. LESOTHO
- 46. LIBERIA
- 47. LIBYA
- 48. MADAGASCAR
- 49. GAMBIA
- 50. MALI
- 51. MAURITANIA
- 52. MOROCCO
- 53. MOZAMBIQUE
- 54. NAMIBIA
- 55. NIGER
- 56. NIGERIA
- 57. REP. OF THE CONGO
- 58. REUNION
- 59. RWANDA
- 60. SENEGAL
- 61. SIERRA LEONE
- 62. SOMALIA
- 63. SOUTH AFRICA
- 64. SUDAN
- 65. SWAZILAND
- 66. TANZANIA
- 67. TOGO
- 68. TUNISIA
- 69. UGANDA
- 70. WESTERN SAHARA
- 71. ZAMBIA
- 72. ZIMBABWE
- 73. MALAWI
- 74. SAO TOME AND PRINCIPE
- 75. WALLIS AND FATUNA

Europe

- 76. ALBANIA
- 77. AUSTRIA
- 78. BELGIUM
- 79. BOSNIA AND HERZEGOVINA
- 80. BULGARIA
- 81. CROATIA
- 82. CYPRUS
- 83. CZECH REPUBLIC
- 84. DENMARK
- 85. ESTONIA
- 86. ENGLAND
- 87. FINLAND
- 88. FRANCE
- 89. GERMANY
- 90. GIBRALTAR
- 91. GREECE
- 92. GREENLAND
- 93. HUNGARY
- 94. ICELAND
- 95. IRELAND
- 96. ITALY
- 97. LATVIA
- 98. LITHUANIA

- 99. LUXEMBOURG
- 100. MONACO
- 101. MACEDONIA
- 102. NETHERLANDS
- 103. NEW CALEDONIA
- 104. NORWAY
- 105. POLAND
- 106. PORTUGAL
- 107. ROMANIA
- 108. SERBIA
- 109. SCOTLAND
- 110. SLOVAKIA
- 111. SLOVENIA
- 112. SPAIN
- 113. SWEDEN
- 114. SWITZERLAND
- 115. TURKEY
- 116. MONTENEGRO
- 117. MALTA
- 118. ISLE OF MAN
- 119. ANDORRA
- 120. FAROE ISLAND
- 121. LIECHTENSTEIN

Asia

- 122. AFGHANISTAN
- 123. BANGLADESH
- 124. BHUTAN
- 125. BRUNEI
- 126. BURMA/ MYANMAR
- 127. CAMBODIA
- 128. CHINA
- 129. FEDERATED STATES OF MICRONESIA
- 130. GUAM
- 131. HONG KONG
- 132. INDIA
- 133. INDONESIA
- 134. JAPAN
- 135. LAOS
- 136. MALAYSIA
- 137. MONGOLIA
- 138. NEPAL
- 139. NORTH KOREA
- 140. PAKISTAN
- 141. PHILIPPINES
- 142. SINGAPORE
- 143. SOUTH KOREA
- 144. SRI LANKA
- 145. TAIWAN
- 146. THAILAND
- 147. VIETNAM

Commonwealth of Independent States (RUSSIA)

- 148. ARMENIA
- 149. AZERBAIJAN
- 150. BELARUS
- 151. GEORGIA
- 152. KAZAKHSTAN
- 153. KYRGYZSTAN
- 154. MOLDOVA
- 155. RUSSIA
- 156. TAJIKISTAN
- 157. TURKMENISTAN
- 158. UKRAINE
- 159. UZBEKISTAN

Middle East

- 160. GAZA STRIP

- 161. IRAN
- 162. IRAQ
- 163. ISRAEL
- 164. JORDAN
- 165. KUWAIT
- 166. LEBANON
- 167. OMAN
- 168. QATAR
- 169. SAUDI ARABIA
- 170. SYRIA
- 171. UNITED ARAB EMIRATES
- 172. WEST BANK
- 173. YEMAN
- 174. BAHRAIN

Islands

- 175. ANGUILLA
- 176. ANTIGUA AND BARBUDA
- 177. ARUBA
- 178. BARBADOS
- 179. CAYMAN ISLANDS
- 180. CUBA
- 181. DOMINICA
- 182. DOMINICAN REPUBLIC
- 183. GRENADA
- 184. HAITI
- 185. JAMAICA
- 186. MARIE GALANTE
- 187. MARTINIQUE
- 188. MONSERRAT
- 189. NETHERLAND ANTILLES
- 190. PUERTO RICO
- 191. ST. BARTHELEMY

- 192. ST. KITTS AND NEVIS
- 193. ST. LUCIA
- 194. ST. MARTIN
- 195. ST. VINCENT AND THE GRENADINES
- 196. THE BAHAMAS
- 197. TRINIDAD & TOBAGO
- 198. VIRGIN ISLANDS (BRITISH)
- 199. VIRGIN ISLANDS (U.S.)
- 200. AMERICAN SAMOA ISLANDS
- 201. AUSTRALIA
- 202. CAPE VERDE
- 203. COOK ISLAND
- 204. FIJI
- 205. FRENCH POLYNESIA
- 206. JERSEY
- 207. KIRIBATI
- 208. MALDIVES
- 209. MARSHALL ISLANDS
- 210. MAYOTTE
- 211. MICRONESIA
- 212. NEW CALEDONIA
- 213. NEW ZEALAND
- 214. PALAU
- 215. PAUPA NEW GUINEA
- 216. SAMOA ISLANDS
- 217. SAN MARINO
- 218. SEYCHELLES
- 219. SOLOMON ISLANDS
- 220. TONGA
- 221. TUVALU
- 222. VANUATU

ALCOHOL EQUIVALENTS

HARD LIQUOR

1 mixed drink	=	1 drink
1 shot glass	=	1 drink
½ pint	=	6 drinks
1 pint	=	12 drinks
1 fifth	=	20 drinks
1 quart or liter	=	24 drinks

WINE

1 glass	=	1 drink
1 bottle	=	6 drinks
1 "wine cooler"	=	1 drink
1 gallon	=	30 drinks

BEER OR ALE

1 12 oz bottle	=	1 drink
1 12 oz can	=	1 drink
1 40 oz bottle	=	3 drinks
1 six pack	=	6 drinks
1 pitcher	=	5 drinks
1 case	=	24 drinks

COCAINE

Powder	Free base	Paste
Crack	Coca leaves	

SEDATIVES AND TRANQUILIZERS

(SLEEPING PILLS, "DOWNERS," "NERVE PILLS"), SUCH AS . . .

Amobarbital	Dalmane	Limbitrol	Paxipam	Sk-Lygen
Amytal	Deprol	Mebaral	Pentobarbital	Sopor
Ativan	Diazepam	Meprobamate	Phenobarbital	Tranxene
Barbiturate	Dorden	Methaqualone	Placidyl	Tuinal
Buticap	Durax	Menrium	Restoril	Valium

Butisol	Equanil	Miltown	Secobarbital	Xanax
Centrax	Halcion	Nembutal	Seconal	
Chloral Hydrate	Librium	Noludar	Serax	

STIMULANTS

(AMPHETAMINES, "UPPERS," "SPEED," "ICE," "CRANK"), SUCH AS . . .

Benzedrine ("bennies")	Ecstasy	Paxipam	Ritalin	Tepanil
Biphetamine	Eskatrol	Pentobarbital	Sanorex	Tranxene
Cylert	Fastin	Phenobarbital	Secobarbital	Tuinal
Desoxyn	Ionamin	Plegine	Seconal	Valium
Dexamyl	Mazanor	Placidyl	Serax	Voranil
Dexedrine ("dexies")	Methamphetamine	Pondomin	Sk-Lygen	Xanax
Dextroamphetamine	Methedrine	Preludin	Sopor	
Didrex	Obedrin-LA	Restoril	Tenuate	

ANALGESICS (PAINKILLERS), SUCH AS . . .

Anileridine	Levo-Dromoran	Stadol
Buprenex	Methadone	Talacen
Codeine	Morphine	Talwin
Darvon	Percodan	Talwin NX
Demerol	Phenaphen with codeine	Tylenol with codeine
Dilaudid	Propoxyphene	Wygesic
Dolene	SK-65	

OTHER DRUGS, SUCH AS . . .

Heroin	Glue	Peyote
Opium	LSD (acid, white lightning)	

***DID YOU EVER HAVE ANY OF THESE
STRESSFUL EXPERIENCES?***

(CHECK OFF "YES" RESPONSES IN BOXES Ö)

GROUP 1: TRAUMATIC PERSONAL EXPERIENCES

- q Combat experience
- q Relief worker in war zone
- q Civilian in war zone
- q Civilian in region of terror
- q Refugee
- q Kidnapped
- q Toxic chemical exposure
- q Automobile accident
- q Other life-threatening accident
- q Natural disaster
- q Man-made disaster
- q Life-threatening illness

GROUP 2: PERSONAL VIOLENCE

- q Beaten up as a child by caregiver
- q Beaten up by a spouse or romantic partner
- q Beaten up by someone else
- q Mugged or threatened with a weapon
- q Raped
- q Sexually assaulted
- q Stalked

GROUP 3: EVENTS AFFECTING OTHERS

- q Unexpected death of a loved one
- q Child's serious illness
- q Traumatic event to loved one
- q Witnessed serious physical fights at home
- q Witnessed death or dead body or saw someone seriously hurt
- q Accidentally caused serious injury or death
- q Purposely injured, tortured, or killed someone
- q Saw atrocities
- q Any other traumatic or life-threatening event

DID YOU HAVE ANY OF THESE REACTIONS?

(CHECK OFF "YES" RESPONSES IN BOXES Ö)

GROUP 1: TRAUMATIC PERSONAL EXPERIENCES

- q Trying not to think about it
- q Staying away from reminders of it
- q Being unable to remember parts of it
- q Losing interest in things you used to enjoy

- q Feeling emotionally distant from other people
- q Trouble feeling normal feelings
- q Feeling you have no reason to plan for the future

GROUP 2: PERSONAL VIOLENCE

- q Unwanted memories
- q Unpleasant dreams
- q Flashbacks
- q Getting very upset when reminded of it
- q Physical reactions

GROUP 3: EVENTS AFFECTING OTHERS

- q Sleep problems
- q Irritability
- q Trouble concentrating
- q Being more alert or watchful
- q Being jumpy or easily startled

WHO DID THIS TO YOU?

(CIRCLE ALL THAT APPLY)

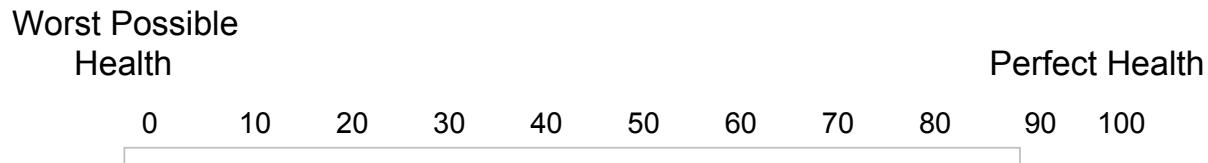
1. Spouse or romantic partner
2. Parent / guardian
3. Step-relative
4. Other relative
5. Someone else you knew
6. Stranger

HOW MUCH DIFFICULTY DID YOU HAVE . . . ?

- None
- Mild difficulty
- Moderate difficulty
- Severe difficulty

HEALTH RATING SCALE

***MARK AND LABEL THE NUMBER YOU WOULD
USE TO DESCRIBE...***



DID YOU EVER TAKE ANY OF THESE MEDICATIONS?

Acetophenazine	Perphenazine
Centrax	Pimozide
Chlorpromazine	Prazepam
Clorprothixene	Prolixin
Clozapine	Quetiapine
Clozaril	Risperdal
Droperidol	Risperidone
Fluphenazine	Serentil
Haldol	Seroquel
Haloperidol	Stelazine

Inapsine	Taractan
Loxapine	Thioridazine
Loxitane	Thiothixene
Mellaril	Thorazine
Mesoridazine	Tindal
Moban	Trifluoperazine
Molindone	Triflupromazine
Navane	Trilafon
Olanzapine	Vesprin
Orap	Zyprexa
Permitil	

***WHAT LANGUAGE DID YOU SPEAK AT HOME
WHEN YOU WERE GROWING UP?***

- Spanish only
 - Mostly Spanish, some English
 - Spanish and English
 - Mostly English, some Spanish
 - English only
 - Other (Specify) _____
-

***WHAT LANGUAGE DID YOU SPEAK AT HOME
WHEN YOU WERE GROWING UP?***

- (Chinese, Tagalog, Vietnamese/ other Asian language) only
- Mostly (Chinese, Tagalog, Vietnamese/ other Asian language), some English
- (Chinese, Tagalog, Vietnamese/ other Asian language) and English
- Mostly English, some (Chinese, Tagalog, Vietnamese/ other Asian language)

- English only

LANGUAGE PREFERENCE

- Other language all the time
- Other language most of the time
- Other language and English equally
- English most of the time
- English all the time

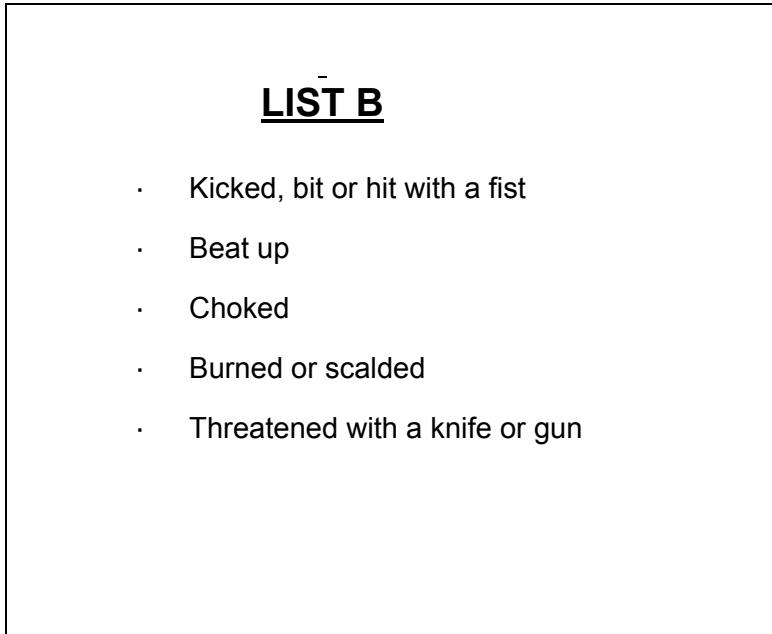
WHICH LETTER REPRESENTS YOUR INCOME OR EARNINGS IN THE PAST 12 MONTHS FROM EACH OF THE FOLLOWING SOURCES?

A.	Less than \$0 (Loss)	S.	\$16,000 - \$16,999
B.	\$0 (none)	T.	\$17,000 - \$17,999
C.	\$1 - \$999	U.	\$18,000 - \$18,999
D.	\$1,000 - \$1,999	V.	\$19,000 - \$19,999
E.	\$2,000 - \$2,999	W.	\$20,000 - \$24,999
F.	\$3,000 - \$3,999	X.	\$25,000 - \$29,999
G.	\$4,000 - \$4,999	Y.	\$30,000 - \$34,999
H.	\$5,000 - \$5,999	Z.	\$35,000 - \$39,999
I.	\$6,000 - \$6,999	AA.	\$40,000 - \$44,999
J.	\$7,000 - \$7,999	BB.	\$45,000 - \$49,999
K.	\$8,000 - \$8,999	CC.	\$50,000 - \$74,999
L.	\$9,000 - \$9,999	DD.	\$75,000 - \$99,999
M.	\$10,000 - \$10,999	EE.	\$100,000 - \$149,000
N.	\$11,000 - \$11,999	FF.	\$150,000 - \$199,999
O.	\$12,000 - \$12,999	GG.	\$200,000 - \$299,999
P.	\$13,000 - \$13,999	HH.	\$300,000 - \$499,999
Q.	\$14,000 - \$14,999	II.	\$500,000 - \$999,999
R.	\$15,000 - \$15,999	JJ.	\$1,000,000 or more



LIST A

- Pushed, grabbed or shoved
- Threw something
- Slapped or hit



LIST B

- Kicked, bit or hit with a fist
- Beat up
- Choked
- Burned or scalded
- Threatened with a knife or gun



LIST A

- Pushed, grabbed or shoved

- Threw something
- Slapped, hit or spanked

LIST B

- Kicked, bit or hit with a fist
- Beat up
- Choked
- Burned or scalded
- Threatened with a knife or gun

WHICH OF THE FOLLOWING BEST DESCRIBES YOURSELF?

- A. Heterosexual -- primarily attracted to members of the opposite sex
- B. Homosexual, Lesbian, Gay -- primarily attracted to members of your own sex
- C. Bisexual -- attracted to both men and women
- D. Something else
- E. Not sure

DURING THE PAST 12 MONTHS, HOW OFTEN

***DID YOU OR YOUR SEXUAL PARTNERS WEAR
A CONDOM (“RUBBER”) WHILE HAVING SEX?***

- Always
- Most of the time
- Sometimes
- Rarely
- Never



10
9
8
7
6
5
4
3
2
1



10
9
8
7
6
5

4
3
2

1

WHAT IS THE NUMBER TO THE RIGHT OF THE RUNG WHERE YOU THINK YOU WOULD STAND IF YOU WERE STILL IN YOUR COUNTRY OF ORIGIN?

10

9

8

7

6

5

4

3

2

1



IN YOUR DAY-TO-DAY LIFE, HOW OFTEN HAVE ANY OF THE FOLLOWING THINGS HAPPENED TO YOU?

- Almost everyday
- At least once a week
- A few times a month
- A few times a year
- Less than once a year

***WHAT DO YOU THINK WAS THE MAIN
REASON FOR THIS/THESE EXPERIENCE(S)?
WOULD YOU SAY . . . ?***

- Your ancestry or national origin or ethnicity
- Your gender or sex
- Your race
- Your age
- Your height
- Your skin color
- Your sexual orientation
- Your weight
- Your income or educational level
- Other (Specify) _____

***IS YOUR (SPOUSE/PARTNER) OF HISPANIC OR
LATINO DESCENT OR ORIGIN? WHICH ONE?***

- Not Spanish/Hispanic
- Mexican
- Mexican American
- Chicano
- Puerto Rican
- Cuban
- Other Spanish (Specify) _____

***WHICH OF THE FOLLOWING BEST DESCRIBES
YOUR (SPOUSE'S) RACE:***

- White / Caucasian
- African / African American / Black
- American Indian
- Alaskan Native
- Asian Indian
- Chinese
- Filipino
- Japanese
- Korean
- Vietnamese
- Other Asian
(Specify) _____
- Native Hawaiian
- Pacific Islander
- Guamanian or Chamorro
- Samoan
- Mestizo
- Criollo
- Mulatto
- Latin Black
- Caribbean

· Other
(Specify) _____

HOW COMFORTABLE ARE YOU WITH YOUR SEXUALITY?

- Very comfortable
- Somewhat comfortable
- Neither comfortable nor uncomfortable
- Somewhat uncomfortable
- Very uncomfortable
- Not sure

THINKING BACK ON THE LAST 12 MONTHS, HAVE YOUR SEXUAL EXPERIENCES BEEN WITH . . . ?

- Females only
- Mostly females
- About equal number of males and females
- Mostly males
- All males
- I have not been sexually active

HOW WOULD YOU RATE THE OVERALL

QUALITY OF SERVICES YOU RECEIVED?

- Poor
 - Fair
 - Neutral
 - Very good
 - Excellent
-

DID THE (PROFESSIONAL) HELP YOU ACCEPT YOU AND MAKE YOU FEEL UNDERSTOOD?

- A lot
- Some
- A little
- Not at all

DURING THE LAST 30 DAYS, ABOUT HOW OFTEN DID YOU . . .

- All the time
- Most of the time
- Some of the time

- A little of the time
- None of the time

***WAS YOUR MOVE OR THAT OF
YOUR FAMILY TO THE U.S.:***

- Carefully planned
 - Somewhat planned
 - Poorly planned
 - Not planned at all
-

***HOW DO YOU FEEL ABOUT THE ECONOMIC
OPPORTUNITY YOU HAVE HAD IN THE U.S.?***

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied

***HOW MANY PEOPLE HAVE YOU HAD
SEXUAL INTERCOURSE WITH
IN THE PAST 12 MONTHS?***

LI2.

This question is used to determine the language in which the interview will be administered for Respondents reporting that they speak both Spanish and English. Respondents who answer "Spanish only" or "Spanish (some English)" will be interviewed in Spanish, while the Respondents who answer "English only" or "English (some Spanish)" will be interviewed in English. However, Respondents who answer "Spanish and English about the same" will be assigned at random to either the Spanish or the English version of the interview. This random assignment is part of a language sub-study. You will be prompted to switch the language of the interview to Spanish or English depending on the language each individual Respondent is randomized to. Once the language toggle has occurred, it is very important that you do not switch back to the other language at any point in the interview. It may also be necessary at this point to change the RB you have given the Respondent if it does not correspond to the language you have been instructed to interview the Respondent in.

LI3.

Latino Respondents will be randomly assigned to the English or the Spanish version of the instrument when they state that they speak both languages. All other Respondents who have reported speaking more than one language will be able to choose the language in which they prefer to be interviewed.

SC10.4d

A "learning disability" is a disorder in one or more of the basic psychological processes. This disorder is involved in understanding and using language spoken or written and may manifest itself in an imperfect ability to listen, think, speak, read, spell, or do mathematical calculations. The term includes such conditions as perceptual handicaps, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. The term does not include children who have problems that are primarily the result of visual, hearing, or motor disabilities, or mental retardation, emotional disturbance, or of environmental, cultural, or economic disadvantage.

SC19.

This is a critical question. We need the Respondents to understand that careful reporting is necessary. If they give a response that indicates unwillingness to engage in careful reporting at this time (e.g., “I don’t know how careful I can be today; I’m pretty tired”), reschedule the interview for a better time.

SC20.

The remaining questions in this section are the most important questions in the survey. Read them slowly. Emphasize the importance of thinking carefully before responding to the questions.

SC25a.

This question differs from SC25, which asks about irritability, in that it asks about a more serious type of irritability – one involving arguing, shouting, or hitting.

SC27.

Since it is possible that many Respondents may be afraid of some of the things listed in this series of questions, it is important to read the question slowly and emphasize “a lot more afraid than most people,” since we are interested in *excessive* fear and avoidance of these situations.

SC31.

Code “NO” if the Respondent never attended school.

SC33.

All children do these things sometimes. It is important to emphasize “frequently” and to probe a response of “sometimes” by repeating the question and emphasizing the word “frequently.”

SC34.

This question asks about childhood experiences, when the Respondent was more than five years old [but less than 18 years old].

SC35.

This question asks about experiences during adulthood. If the Respondent is 18 years old, s/he should answer about these experiences since turning 18. If s/he has not had these experiences, code “no.”

SCS2.

These questions ask about whether or not the Respondent ever went to see a professional on the list. The next questions focus on other types of services that may have ever been used by the Respondent for problems with their emotions, nerves, or mental health. For each service endorsed by the Respondent, a list of follow-up questions similar to the previous series is asked. If the Respondent states having seen any

of the professionals on the list for any reason other than for emotional problems, code “NO.”

SCS2f.

A counselor is one of the professionals listed in question SC2. By counselor we refer to a professional, other than the ones already mentioned, who gives advice about problems with emotions, nerves, or mental health.

SCS3.

In SCS3 series we are referring to the first time the Respondent went to see the professional only for problems with their emotions, nerves, or mental health.

SCS6.

It is important to emphasize “for problems with your emotions, nerves, or mental health.” If the Respondent states having used any of these services for any reason other than for emotional problems, code “NO.”

SCS6a.

A “chat room” is an area on the Internet where two or more people can have a typed conversation in real time. In a chat room, the messages you type are shown instantly to every other member of the room.

Messages typed by other people are shown immediately to you. Remember that these services must have been used for problems with the Respondents' emotions, nerves or mental health. If the Respondent states having used any of these services for any reason other than for emotional problems, a "NO" response should be coded.

SCS6b. ...

By "self-help group" we refer to a group consisting of people who have personal experience of a similar issue or life situation, either directly or through their family or friends. Sharing experiences enables them to pool practical information and ways of coping. If the Respondent has gone to a self-help group for any reason other than for emotional problems, code "NO."

SCS6c.

By "hotline" we refer to a telephone line that gives quick and direct access to a source of information or help about different topics. Remember that the Hotline must have been used for problems with emotions, nerves, or mental health.

SCS6d.

Sessions with duration of less than 30 minutes should be excluded. The goal here is to discriminate between a real therapy session and a professional merely giving a few encouraging words of support or listening to the Respondent's mental health concerns. If the Respondent has gone to a counseling or therapy session for any reason other than for emotional problems, code "NO."

SCS10.

An informal recommendation to take medicine is not enough. The doctor must either write a prescription or give the medicine to the patient.

SCS10a.

It is important to code all the professionals the Respondent mentions.

D24.

This question defines what we mean by “a period.” The phrase “a period” or “this period” is used repeatedly in the remainder of the D24 and D26 series of questions. All these questions ask the Respondent to focus on experiences that occurred during a particular worst period of depression. It may be necessary, if the Respondent seems confused, to remind him or her periodically that “this period” refers to the period of feeling (sad/and/discouraged/and/uninterested/or/that life had no meaning) and experiencing some other problems lasting (several days/two weeks) or longer. D24 and D26 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

D24f.

If Respondent says, “nothing good ever happened”, probe: During that period of (several days/ two weeks) did you feel like nothing was fun?

D29a.

At D29a, we are assessing whether there was a physiological cause for the depression, such as medication or alcohol causing depression. An example of physical illness causing depression would be thyroid disease (code “yes”). If illness or injury to the Respondent result in the Respondent’s feeling sad or discouraged because, for example, s/he had to stay in the hospital, or an injury prevents him or her from carrying out their usual activities, code “no.”

IR4.

This is a complex sentence. Read carefully and slowly. Emphasize “just about every month.”

IR7.

The information needed to determine whether to ask about several days or two weeks comes from questions IR2 and IR4.

IR8.

IR8 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

IR8m.

By “harming someone else” we mean that the intended harm could be psychological (e.g., embarrassing someone) or physical.

IR21a.1.

This question defines what we mean by “an episode.” The phrase “an episode” or “an episode like this” is used repeatedly in this section. It may be necessary, if the Respondent seems confused, to remind the Respondent periodically that “an episode like this” refers to an episode of being irritable with some other problems lasting (several days/two weeks) or longer.

IR71.1

Close relatives should be defined as whatever it means to the Respondent.

PD1a-p.

PD1 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PD1a.

PD1 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PD1b.

PD1 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PD1c.

PD1 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PD1d.

PD1 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PD1e.

PD1 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PD1f.

PD1 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PD1g.

PD1 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PD1h.

PD1 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PD1i.

PD1 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PD1j.

PD1 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PD1k.

PD1 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PD1l.

PD1 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PD1m.

PD1 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PD1n.

PD1 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PD1o.

PD1 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PD1p.

PD1 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PD4.

The phrase “entire lifetime” should be emphasized in order to obtain a number of panic attacks that is as accurate as possible.

PD8.

Note that this question is extensive and complicated. Be sure to read it slowly, since we are assessing if the panic attacks occurred (1) “out of the blue”; (2) due to an excessive fear; or (3) when the Respondent was in real danger.

PD13a.

The worries must be frequent for this to be a positive answer. The interviewer should emphasize the word often when reading the question.

SO1a.

The SO1 series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SO1b.

The SO1 series are symptom questions. Please remember that if a Respondent replies “do not know” to

one of these items, the interviewer should not probe and just record a “no” response.

SO1c.

The SO1 series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SO1d.

The SO1 series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SO1e.

The SO1 series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SO1f.

The SO1 series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SO1g.

The SO1 series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SO1h.

The SO1 series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SO1i.

The SO1 series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SO1j.

The SO1 series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SO1k.

The SO1 series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SO11.

The SO1 series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SO1m.

The SO1 series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SO1n.

The SO1 series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SO9.

If the Respondent cannot read, read the a-o list. The instrument will skip to SO10 after the second “yes” response. SO9 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SO10.

If the Respondent asks for a definition of a panic attack: A panic attack is a sudden attack of extreme fear

or anxiety.

SO10a.

If the Respondent asks for a definition of a panic attack: A panic attack is a sudden attack of extreme fear or anxiety.

SO14a.

Be sure to record the Respondent's answer accurately and completely. This response is critical to the diagnosis because it informs the researcher about whether or not there was a real potential danger in this situation. Note that this question has two response categories: REAL DANGER or OTHER. The interviewer must record which one was the most feared as well as record verbatim what the Respondent describes as the exact nature of the real danger or other situation.

AG4d.

If the Respondent asks for a definition of a panic attack: A panic attack is a sudden attack of extreme fear or anxiety.

AG8a.

If the Respondent asks for a definition of a panic attack: A panic attack is a sudden attack of extreme fear

or anxiety.

AG9a.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

AG9b.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

AG9c.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

AG9d.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

AG11a.

If the Respondent cannot read, read the a-k list. The instrument will skip to AG13 after the first YES response. AG11 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

AG11b.

If the Respondent cannot read, read the a-k list. The instrument will skip to AG13 after the first YES response. AG11 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

AG11c.

If the Respondent cannot read, read the a-k list. The instrument will skip to AG13 after the first YES response. AG11 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

AG11d.

If the Respondent cannot read, read the a-k list. The instrument will skip to AG13 after the first YES response. AG11 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

AG11e.

If the Respondent cannot read, read the a-k list. The instrument will skip to AG13 after the first YES response. AG11 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

AG11f.

If the Respondent cannot read, read the a-k list. The instrument will skip to AG13 after the first YES response. AG11 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

AG11g.

If the Respondent cannot read, read the a-k list. The instrument will skip to AG13 after the first YES response. AG11 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

AG11h.

If the Respondent cannot read, read the a-k list. The instrument will skip to AG13 after the first YES response. AG11 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

AG11i.

If the Respondent cannot read, read the a-k list. The instrument will skip to AG13 after the first YES response. AG11 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

AG11j.

If the Respondent cannot read, read the a-k list. The instrument will skip to AG13 after the first YES response. AG11 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

AG11k.

If the Respondent cannot read, read the a-k list. The instrument will skip to AG13 after the first YES response. AG11 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G1.

Be sure to record diffuse worries (EVERYTHING, NOTHING IN PARTICULAR) before probing for specific worries. It is important for us to know when diffuse worries are reported.

G9a.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G9b.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G9c.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G9d.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G9e.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G9f.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G10a.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G10b.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G10c.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G10d.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G10e.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G13a.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G13b.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G13c.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G13d.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G13e.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G13f.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G13g.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G13h.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G13i.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G13j.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G13k.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G13l.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G13m.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G13n.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G13o.

G9 and G10 series are symptom questions, please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

G36a.

The feelings described in a-g include tense and wound up, frightened, restless, panicked, worried, frequency of feeling relaxed, and fear of awful occurrence.

G36b.

The feelings described in a-g include tense and wound up, frightened, restless, panicked, worried, frequency of feeling relaxed, and fear of awful occurrence.

G36c.

The feelings described in a-g include tense and wound up, frightened, restless, panicked, worried, frequency of feeling relaxed, and fear of awful occurrence.

G36d.

The feelings described in a-g include tense and wound up, frightened, restless, panicked, worried, frequency of feeling relaxed, and fear of awful occurrence.

G36e.

The feelings described in a-g include tense and wound up, frightened, restless, panicked, worried, frequency of feeling relaxed, and fear of awful occurrence.

G36f.

The feelings described in a-g include tense and wound up, frightened, restless, panicked, worried, frequency of feeling relaxed, and fear of awful occurrence.

G36g.

The feelings described in a-g include tense and wound up, frightened, restless, panicked, worried, frequency of feeling relaxed, and fear of awful occurrence.

IED25a.

This series are symptom questions. Please remember that if a Respondent replies "do not know" to one of these items, the interviewer should not probe and just record a "no" response.

IED25b.

This series are symptom questions. Please remember that if a Respondent replies "do not know" to one of these items, the interviewer should not probe and just record a "no" response.

IED25c.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

IED25d.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

IED25e.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

IED25f.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

IED25g.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

IED25h.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SRU1.

The intent of the question is to evaluate whether the Respondent recognizes s/he has any of these problems. It is important to read this question slowly and to emphasize whether the Respondent thought s/he had any of these problems even once in the past year. If the Respondent says s/he had thought so, but does not believe to have the problem now, code “Yes.”

SRU2.

This question emphasizes if any other person, that is, someone other than the Respondent, thought the Respondent had any of these problems even once in the past year. If so, code “Yes,” even if the Respondent did not believe s/he had a problem.

SRU2b.

This is an open-ended question that allows the Respondent to state the exact nature of the problem s/he thought or some other person thought s/he had in the past year. The question fills according to what the Respondent answered earlier. Be sure to record the answer verbatim, accurately and completely.

SRU2c.

This probes even further to evaluate what the Respondent perceived was the cause of the problem, as well as to explore how others may have perceived the Respondent's problem. The answer provided by the Respondent should be recorded verbatim.

SRU3.

This question assesses the Respondent's lifetime perceived need for mental health services. Be sure to emphasize the time period for this question.

SRU3a.

This question assesses the Respondent's perceived need for mental health services during the past year. Be sure to emphasize the time period for this question.

SRU4.

This question assesses, from someone else's perspective, the Respondent's lifetime perceived need for mental health services. Be sure to emphasize the time period for this question.

SRU4a.

This question assesses, from someone else's perspective, the Respondent's perceived need for mental

health services during the past year. Be sure to emphasize the time period for this question.

SR12.

Sessions lasting fewer than 30 minutes should be excluded. The goal here is to discriminate between a real therapy session and a professional merely giving a few encouraging words of support listening to the Respondent's mental health concerns.

SR13.

An informal recommendation to take medicine is not enough. The doctor must either write a prescription or give the medicine to the patient.

SR23.

If the Respondent answers that s/he saw more than one psychiatrist, ask about the one s/he was most satisfied with. This question will be repeated for every type of professional the Respondent said s/he saw for emotional problems.

SR24.

If the Respondent answers that s/he saw more than one psychiatrist, ask about the one s/he saw the most. This question will be repeated for every type of professional the Respondent said s/he saw for emotional

problems.

SR24a.

If the Respondent answers that s/he saw more than one psychiatrist, ask about the one s/he saw the most. This question will be repeated for every type of professional the Respondent said s/he saw for emotional problems.

SR24b.

If the Respondent answers that s/he saw more than one psychiatrist, ask about the one s/he saw the most. This question will be repeated for every type of professional the Respondent said s/he saw for emotional problems. In this question, “feeling accepted and understood” is defined according to what is most meaningful to the Respondent.

SR97.

If a Respondent asks if this includes going to confession or talking to a member of the clergy, please respond yes.

SR110.

Money spent by the Respondent for the treatment of a child, spouse or someone else does not count. It

needs to be treatment for the Respondent. If the Respondent volunteers that the money was spent on couples therapy or family therapy in which s/he was a participant, all this money should be counted.

SR116o.

Some questions from the SR116 series, the SR120 series and the SR126 series are geared toward finding out if ethnic or racial issues or difficulty with the English language deterred the Respondent from seeking help. These questions are relevant to the possible experiences of Latinos and Asian Americans, and may contribute to the Respondent's sense of feeling understood.

SR116p.

Some questions from the SR116 series, the SR120 series and the SR126 series are geared toward finding out if ethnic or racial issues or difficulty with the English language deterred the Respondent from seeking help. These questions are relevant to the possible experiences of Latinos and Asian Americans, and may contribute to the Respondent's sense of feeling understood.

SR116q.

Some questions from the SR116 series, the SR120 series and the SR126 series are geared toward finding out if ethnic or racial issues or difficulty with the English language deterred the Respondent from seeking help. These questions are relevant to the possible experiences of Latinos and Asian Americans, and may contribute to the Respondent's sense of feeling understood.

SR120p.

Some questions from the SR116 series, the SR120 series and the SR126 series are geared toward finding out if ethnic or racial issues or difficulty with the English language deterred the Respondent from seeking help. These questions are relevant to the possible experiences of Latinos and Asian Americans, and may contribute to the Respondent's sense of feeling understood.

SR120q.

Some questions from the SR116 series, the SR120 series and the SR126 series are geared toward finding out if ethnic or racial issues or difficulty with the English language deterred the Respondent from seeking help. These questions are relevant to the possible experiences of Latinos and Asian Americans, and may contribute to the Respondent's sense of feeling understood.

SR120r.

Some questions from the SR116 series, the SR120 series and the SR126 series are geared toward finding out if ethnic or racial issues or difficulty with the English language deterred the Respondent from seeking help. These questions are relevant to the possible experiences of Latinos and Asian Americans, and may contribute to the Respondent's sense of feeling understood.

SR126p.

Some questions from the SR116 series, the SR120 series and the SR126 series are geared toward finding out if ethnic or racial issues or difficulty with the English language deterred the Respondent from seeking help. These questions are relevant to the possible experiences of Latinos and Asian Americans, and may contribute to the Respondent's sense of feeling understood.

SR126r.

Some questions from the SR116 series, the SR120 series and the SR126 series are geared toward finding out if ethnic or racial issues or difficulty with the English language deterred the Respondent from seeking help. These questions are relevant to the possible experiences of Latinos and Asian Americans, and may contribute to the Respondent's sense of feeling understood.

SR126s.

Some questions from the SR116 series, the SR120 series and the SR126 series are geared toward finding out if ethnic or racial issues or difficulty with the English language deterred the Respondent from seeking help. These questions are relevant to the possible experiences of Latinos and Asian Americans, and may contribute to the Respondent's sense of feeling understood.

SR126t.

Some questions from the SR116 series, the SR120 series and the SR126 series are geared toward finding out if ethnic or racial issues or difficulty with the English language deterred the Respondent from seeking help. These questions are relevant to the possible experiences of Latinos and Asian Americans, and may contribute to the Respondent's sense of feeling understood.

PH1.

Oral contraceptives, if they are prescribed, are to be included in this question. If the respondent says s/he was taking someone else's prescription medication, this counts. In this section we do not refer to spiritual medicine, guidance or beliefs. We only refer to psychotropic (acting on the mind; mood altering) medications.

PH15.

If the Respondent insinuates that the medicine was prescribed by a doctor (when it really was another person's "recommendation" (e.g. the nurse practitioner's), the interviewer should code "1" ("WITH SUPERVISION"). Then PH15.1 will appear and the interviewer can record exactly who wrote the prescription.

DM1.2.

If the Respondent does not seem to understand the question, the interviewer may probe, "What country did your ancestors come from?"

DM1.5.

Before accepting a refusal or "don't know" as an answer, probe by asking, "Which one would you say best describes your race?" Answer options in the RB include White/Caucasian, African/African American/Black, American Indian, Alaskan Native, Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, Other Asian, Native Hawaiian, Pacific Islander, Guamanian or Chamorro, Samoan, Mestizo, Criollo, Mulato, Latin Black, Caribbean, Other, Don't Know and Refused.

DM1.5d.

The Respondent's ideas and feelings may be closer to other people of the same descent in some aspects and not in others. The question is intended to get a general sense of how close the Respondent feels to other people of his/her same racial and ethnic background.

DM1.5g.

By “citizen of the United States” we mean a native-born, foreign-born, or naturalized person. The 14th Amendment of the U.S. Constitution guarantees citizenship at birth to almost all individuals born in the United States or in U.S. jurisdiction. Certain individuals born outside of the United States are born citizens because their parents are U.S. citizens. Some people gain citizenship through naturalization, which is the process by which U.S. citizenship is conferred upon a foreign citizen or national after he or she fulfills the requirements established by Congress in the Immigration and Nationality Act (INA). Respondents who meet any of these requirements are considered “citizens.”

DM1.12.

If the Respondent says there was more than 1 male head of household before s/he was 17, emphasize “most of the time before you were 17.”

DM1.13.

If the Respondent says there was more than 1 female head of household before s/he was 17, emphasize “most of the time before you were 17.”

DM1.14.

Translating the amount of education (for example, the Respondent says s/he finished high school) into years of school is acceptable. However, if the Respondent finished his or her education in another country, it is important to probe how many years of school were completed as the years of education vary among countries.

SU3.

If the Respondent volunteers “never,” code “6: DID NOT DRINK IN THE PAST 12 MONTHS.”

SU12a.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SU12b.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SU12c.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SU12d.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SU19a.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SU19b.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SU19c.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SU19d.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SU19e.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SU19f.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SU19g.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SU19h.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SU19i.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SU19j.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

SU28.

It may be necessary to scroll up to SU19 to remind the Respondent of the problems listed.

SU87.

The definition of an “opportunity to use” is that someone either offered you alcohol or drugs or you were present when others were using and you could have used if you wanted to. Do not include times when a health care provider may have offered you free samples.

SU88.

The alcohol or drugs or you were present when others were using and you could have used if you wanted to. Do not include times when a health care provider may have offered you free samples.

PT2.

A peacekeeper is a person who works for an international organization, a government, or a military organization to supervise and enforce a truce between hostile groups.

PT7.

Some Respondents respond by saying that they think everyone is exposed to such substances because of pollution, global warming, destruction of the ozone layer, etc. These responses should be coded “No.”

Other Respondents report that they think they might have been exposed, but they are not sure. These responses should be coded “No.” A “Yes” response requires the Respondent to have been told by an official source that there was a definite exposure.

PT8.

“Involved” can include being a pedestrian or bicyclist who was partly responsible. However, code “No” if the Respondent was merely a witness, an observer, or a person who arrived after the accident and provided assistance. People who were witnesses will be coded in PT21/49, or PT23/51.

PT10.

“Involved” can include being present at the time of the disaster even if the Respondent was not injured. However, code “No” if the Respondent was merely an observer or relief worker who arrived after the disaster. These experiences will be coded elsewhere.

PT18.

Sexually molested means that a stranger, or someone you knew, including family members and friends, touched the sexual parts of your body or forced you to touch the sexual parts of their body – against your will or without your consent.

PT20.

Unexpected death does not include situations such as an elderly person dying or a person with a known heart condition suddenly experiencing a fatal heart attack.

PT21.

This can include being a witness or an observer of a traumatic event that the son or daughter was in, or arriving after the event. If the Respondent was “involved” in the event, do not record here. Respondents who were involved will be coded elsewhere.

PT22.

The examples are intended to provide a context to help the Respondent define “extremely traumatic.” If the Respondent asks whether a particular event counts, the rule should be to tell the Respondent that anything that s/he considers extremely traumatic counts.

PT23.

This can include being a witness or an observer of a traumatic event, or arriving after the event and providing assistance. If the Respondent was “involved” in the event, do not record here. Respondents who were involved will be coded elsewhere.

PT24.

This question is asking about specific incidents. Broad philosophical responses, for example, a response such as “my failure to donate money to charity probably means poor children are starving to death somewhere” should be coded “No.”

PT28.

These questions ask Respondents to tell about an experience they do not want to mention specifically. We refer to this as the Respondent’s “private event,” and we do not ask the Respondent to tell us what the event was. Note that the phrase “you didn’t report” refers to reporting the event during the course of the interview, not reporting the event to the police or other authorities.

PT30.

Some of the traumatic events asked about here overlap. It is consequently important to include the parenthetical phrase “other than what you have already told me about” in cases where previous events have been reported. If reports are given of events previously mentioned, code the new mention “NO.” For example, a Respondent who reports in PT30 (RELIEF WORKER IN WAR ZONE) being a Red Cross worker in Bosnia during their civil war might well mention the same experience in response to PT31 (CIVILIAN IN WAR ZONE). If so, code the repeat mention at PT31 “No.” This same issue can exist for other events (e.g., PT21/49 and PT25/53).

Code as a separate event if events occupy distinct periods of time, even if there is some overlap of the time periods.

PT35.

Some Respondents respond by saying that they think everyone is exposed to such substances because of pollution, global warming, destruction of the ozone layer, etc. These responses should be coded “No.” Other Respondents report that they think they might have been exposed, but they are not sure. These responses should be coded “No.” A “Yes” response requires the Respondent to have been told by an

official source that there was a definite exposure.

PT36.

“Involved” can include being a pedestrian or bicyclist who was partly responsible. However, code “No” if the Respondent was merely a witness, an observer, or a person who arrived after the accident and provided assistance. People who were witnesses will be coded in PT21/49, or PT23/51.

PT38.

“Involved” can include being present at the time of the disaster even if the Respondent was not injured. However, code “No” if the Respondent was merely an observer or relief worker who arrived after the disaster. These experiences will be coded elsewhere.

Some Respondents may not listen closely to this question, and may mention a man-made disaster. Note that this will be recorded in the next question.

PT39.

Like PT38, the interviewer should have a clear understanding that natural disasters and man-made disasters are recorded separately. If the Respondent mentions toxic chemical exposure, do not record here. It should be recorded in PT35.

PT41.

The definition of “badly beaten up” is whatever it means to the Respondent.

PT46.

Sexually molested means that a stranger, or someone you knew, including family members and friends, touched the sexual parts of your body or forced you to touch the sexual parts of their body – against your will or without your consent.

PT48.

Unexpected death does not include situations such as an elderly person dying or a person with a known heart condition suddenly experiencing a fatal heart attack.

PT49.

This can include being a witness or an observer of a traumatic event that the son or daughter was in, or arriving after the event. If the Respondent was “involved” in the event, do not record here. Respondents who were involved will be coded elsewhere.

PT50.

The examples are intended to provide a context to help the Respondent define “extremely traumatic.” If

the Respondent asks whether a particular event counts, the rule should be to tell the Respondent that anything that s/he considers extremely traumatic counts. The event should be dated from the time the Respondent first learned about the event.

PT51.

This can include being a witness or an observer of a traumatic event, or arriving after the event and providing assistance. If the Respondent was “involved” in the event, do not record here. Respondents who were involved will be coded elsewhere.

PT52.

This question is asking about specific incidents. Broad philosophical responses, for example, a response such as “my failure to donate money to charity probably means poor children are starving to death somewhere” should be coded “No.”

PT55.

This refers to any events not previously mentioned.

PT55a.

Make sure to have the Respondent report NEW events here, not to elaborate on events already reported.

Be sure to record the event verbatim.

PT55b.

The answer to this question will usually be obvious to the interviewer based on the description in PT55a and can be coded directly without asking the question when this is the case.

PT55c.

If the event occurred to the Respondent, the interviewer should normally ask how old the Respondent was when the event happened. An exception is when the event only becomes traumatic at a later date. An example is the discovery, when the Respondent is 40 years of age, that everyone in the town where the Respondent grew up was exposed to potentially fatal toxic chemicals in the lake where they all swam. In an instance of this sort, the interviewer should ask how old the Respondent was when s/he first learned that the water was contaminated.

Events indicating trauma that occurred to others (e.g., learning that one's daughter was raped) should always be dated from the time the Respondent first learned about the events.

PT57.

These questions ask Respondents to tell about an experience they do not want to mention specifically. We refer to this as the Respondent's "private event," and we do not ask the Respondent to tell us what the event was. Note that the phrase "you didn't report" refers to reporting the event during the course of the interview, not reporting the event to the police or other authorities.

PT62.

This question contains many distinct concepts that are important to the question. If the Respondent has difficulty answering, repeat the question, being sure to read it slowly.

PT64.

In this question, the Respondent is asked to identify the event that caused the most problems. If necessary, the interviewers can review the list of events the Respondent endorsed or repeat the list of PTSD reactions from PT62 by scrolling back to PT62. The “worst event” is the one to be recorded. If the Respondent doesn’t know which event caused the most problems, the most recent event is selected.

When the Respondent has two or more events that caused problems, and no one event caused more problems than others, we want the Respondent to tell us about the most recent of the events that caused the largest number of problems. That is why we use the phrase “of these very upsetting events” when probing following a “don’t know” response.

PT64a.

The Respondent's age at the time of the “worst event” is recorded. If the Respondent doesn't know which event caused the most problems, the most recent event is selected and the Respondent's age at the time of the most recent event is recorded.

PT64b.

The “worst event” is to be described in terms of which occurrence it was (assuming that the Respondent has experienced the event more than once). If the Respondent doesn't know which event caused the most problems, the most recent event is selected.

PT67.

The interviewer needs to decide which version of the question to ask depending on whether the experience was ongoing (e.g., repeated abuse by a parent for a period of months when the Respondent was a child) or a one-time occurrence (e.g., an automobile accident). In cases of one-time situations that have duration, such as being a combat soldier in a war, the second version of the question should be used (“Were you terrified or very frightened at the time?”).

When we ask questions about reactions to the event, interviewers have the option to refer to the experience by name (e.g. “the accident”) or refer to it generically as “the event” or “this experience” as a fill for “WORST EVENT.” The interviewer should choose the option bearing in mind that people who are being asked about extremely stressful events such as rape may not want to have the word “rape” repeated over and over again. Referring to it as “this event” would be more appropriate. However, it might be necessary to occasionally refer to the event or experience by name in the course of the questioning to avoid possible confusion. Judgment is needed as to how often this will be necessary depending on whether the Respondent appears confused by the generic language.

PT68.

Interviewers are given the option here, and in later questions in this section, of referring to the event as “the event” or “this experience” or “it” or the event by name. This flexibility is given because some of the events may be emotionally charged. Interviewers should use judgment here to select the term that works best for the particular event being assessed.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PT69.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PT70.

This question asks whether the Respondent ever had psychological amnesia for some important part of the event. If s/he was unconscious due to a head injury, the amnesia does not count here. If the Respondent volunteers that s/he was “knocked out” or “unconscious,” code “No.”

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PT71.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PT72.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PT73.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PT74.

This series are symptom questions. Please remember that if a Respondent replies "do not know" to one of these items, the interviewer should not probe and just record a "no" response.

PT86.

This series are symptom questions. Please remember that if a Respondent replies "do not know" to one of these items, the interviewer should not probe and just record a "no" response.

PT87.

This series are symptom questions. Please remember that if a Respondent replies "do not know" to one of these items, the interviewer should not probe and just record a "no" response.

PT88.

This series are symptom questions. Please remember that if a Respondent replies "do not know" to one of these items, the interviewer should not probe and just record a "no" response.

PT89.

This series are symptom questions. Please remember that if a Respondent replies "do not know" to one of these items, the interviewer should not probe and just record a "no" response.

PT90.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PT118.

If the Respondent wants to discuss a different event (e.g., one with more significance) the interviewer can say, “For this study, we ask all of our Respondents about one totally random event. It is often not the event our Respondents might have chosen to tell us more about. But it's very important that we follow this standard procedure in all of our interviews. Thank you for telling me that this was not your most upsetting event. I will make a note of that.”

PT119.

If the Respondent wants to discuss a different event (e.g., one with more significance) the interviewer can say, “For this study, we ask all of our Respondents about one totally random event. It is often not the event our Respondents might have chosen to tell us more about. But it's very important that we follow this standard procedure in all of our interviews. Thank you for telling me that this was not your most upsetting event. I will make a note of that.”

PT120.

If the Respondent wants to discuss a different event (e.g., one with more significance) the interviewer can say, “For this study, we ask all of our Respondents about one totally random event. It is often not the event our Respondents might have chosen to tell us more about. But it's very important that we follow this standard procedure in all of our interviews. Thank you for telling me that this was not your most upsetting event. I will make a note of that.”

PT121a.

This checkpoint is designed to deal with the question of whether any of the reported events are “linked” to the random event – that is, it asks if the other events were a part of the same experience or caused by the other event. If the events appear to have no relationship to each other, the interviewer does not have to ask the suggested probe. For example, being beaten up as a child and being in a hurricane that destroyed your house are not linked events. However, being in combat and being seriously harmed or imprisoned can be linked events.

PT125a.

This question is intended to identify the person that the Respondent saw being killed in PT125. Record the specific number of people in a category (e.g., R’s child, R’s friend, etc.) only if volunteered by the Respondent. Do not probe to obtain information on the number of people in a category that died.

PT126.

The death asked about in this question should be associated with the event. If the Respondent was a refugee, and an 89 year old grandmother back at home died of a heart attack, the interviewer should code “No.”

PT126a.

This question is intended to identify the person that the Respondent said had died unexpectedly in PT126. Record the specific number of people in a category (e.g., R’s child, R’s friend, etc.) only if volunteered by the Respondent. Do not probe to obtain information on the number of people in a category that died suddenly.

PT127a.

This question is intended to identify the person that the Respondent said was seriously harmed or imprisoned in PT127. Record the specific number of people in a category (e.g., R's child, R's friend, etc.) only if volunteered by the Respondent. Do not probe to obtain information on the number of people in a category that was seriously harmed or imprisoned.

PT129.

If the Respondent was a refugee, record the country s/he fled from, not the country where s/he obtained asylum.

PT148a.

This question is intended to identify the person the Respondent said was killed in PT148. Record the specific number of people in a category (e.g., R's child, R's friend, etc.) only if volunteered by the Respondent. Do not probe to obtain information on the number of people in a category that were killed.

PT149a.

This question is intended to identify the person the Respondent said was seriously injured in PT149. Record the specific number of people in a category (e.g., R's child, R's friend, etc.) only if volunteered by the Respondent. Do not probe to obtain information on the number of people in a category that were seriously injured.

PT156a.

This question is intended to identify the person the Respondent said died during the random event. Record the specific number of people in a category (e.g., R's child, R's friend, etc.) only if volunteered by the Respondent. Do not probe to obtain information on the number of people in a category that died.

PT157a.

This question is intended to identify the person the Respondent said died during the random event. Record the specific number of people in a category (e.g., R's child, R's friend, etc.) only if volunteered by the Respondent. Do not probe to obtain information on the number of people in a category that died.

PT158a.

This question is intended to identify the person the Respondent said was seriously injured. Record the specific number of people in a category (e.g., R's child, R's friend, etc.) only if volunteered by the Respondent. Do not probe to obtain information on the number of people in a category the Respondent reported was seriously injured.

PT208.

This series are symptom questions. Please remember that if a Respondent replies "do not know" to one of these items, the interviewer should not probe and just record a "no" response.

PT209.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PT210.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PT211.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PT212.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PT213.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PT214.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PT222.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PT223.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PT224.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PT225.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PT226.

This series are symptom questions. Please remember that if a Respondent replies "do not know" to one of these items, the interviewer should not probe and just record a "no" response.

PT233.

This series are symptom questions. Please remember that if a Respondent replies "do not know" to one of these items, the interviewer should not probe and just record a "no" response.

PT234.

This series are symptom questions. Please remember that if a Respondent replies "do not know" to one of these items, the interviewer should not probe and just record a "no" response.

PT235.

This series are symptom questions. Please remember that if a Respondent replies "do not know" to one of these items, the interviewer should not probe and just record a "no" response.

PT236.

This series are symptom questions. Please remember that if a Respondent replies "do not know" to one of these items, the interviewer should not probe and just record a "no" response.

PT237.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

PT269.

If the Respondent’s event is “some other event,” it is best to use the Respondent’s description of the event, rather than the phrase “some other event” when reading this question.

N5a.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

N5b.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

N5c.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

N5d.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

N5e.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

N5f.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

N5g.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

N5h.

This series are symptom questions. Please remember that if a Respondent replies “do not know” to one of these items, the interviewer should not probe and just record a “no” response.

CC1c.

If Respondent says “migraines” the code should be “yes.”

CC1e.

If Respondent mentions any allergies the code should be “yes.”

CC11.

COPD stands for Chronic Obstructive Pulmonary Disease.

CC1r.

HIV stands for Human Immuno-Deficiency Virus. AIDS stands for Acquired Immuno-Deficiency Syndrome.

CC9.

If the Respondent says that this is not the condition s/he would like to talk about the interviewer can say, “For this study we ask all of our Respondents about one totally random chosen condition. It may not be the condition you would choose to tell us about, but it’s very important that we follow this standard procedure in all our interviews. Thank you for telling me that this is not the condition you are most concerned about, I will make a note of that.”

CC13b.

The questions included in this series ask the Respondent to focus on either severe or frequent symptoms that may have interfered with his/her life. It is important to emphasize the phrase “that have interfered with your life.” If the Respondent states that s/he suffers from severe stomach pain but it has not interfered with his/her life, code “NO.”

CC13c.

The questions included in this series ask the Respondent to focus on either severe or frequent symptoms that may have interfered with his/her life. It is important to emphasize the phrase “that have interfered with your life.” If the Respondent states that s/he suffers from severe stomach pain but it has not interfered with his/her life, code “NO.”

CC13d.

The questions included in this series ask the Respondent to focus on either severe or frequent symptoms that may have interfered with his/her life. It is important to emphasize the phrase “that have interfered with your life.” If the Respondent states that s/he suffers from severe stomach pain but it has not interfered with his/her life, code “NO.”

CC13e.

The questions included in this series ask the Respondent to focus on either severe or frequent symptoms that may have interfered with his/her life. It is important to emphasize the phrase “that have interfered with your life.” If the Respondent states that s/he suffers from severe stomach pain but it has not interfered with his/her life, code “NO.”

CC13f.

The questions included in this series ask the Respondent to focus on either severe or frequent symptoms that may have interfered with his/her life. It is important to emphasize the phrase “that have interfered with your life.” If the Respondent states that s/he suffers from severe stomach pain but it has not interfered with his/her life, code “NO.”

CC13g.

The questions included in this series ask the Respondent to focus on either severe or frequent symptoms that may have interfered with his/her life. It is important to emphasize the phrase “that have interfered with your life.” If the Respondent states that s/he suffers from severe stomach pain but it has not interfered with his/her life, code “NO.”

CC13h.

The questions included in this series ask the Respondent to focus on either severe or frequent symptoms that may have interfered with his/her life. It is important to emphasize the phrase “that have interfered with your life.” If the Respondent states that s/he suffers from severe stomach pain but it has not interfered with his/her life, code “NO.”

CC13i.

The questions included in this series ask the Respondent to focus on either severe or frequent symptoms that may have interfered with his/her life. It is important to emphasize the phrase “that have interfered with your life.” If the Respondent states that s/he suffers from severe stomach pain but it has not interfered with his/her life, code “NO.”

CC13j.

The questions included in this series ask the Respondent to focus on either severe or frequent symptoms that may have interfered with his/her life. It is important to emphasize the phrase “that have interfered with your life.” If the Respondent states that s/he suffers from severe stomach pain but it has not interfered with his/her life, code “NO.”

CC13k.

The questions included in this series ask the Respondent to focus on either severe or frequent symptoms that may have interfered with his/her life. It is important to emphasize the phrase “that have interfered with your life.” If the Respondent states that s/he suffers from severe stomach pain but it has not interfered with his/her life, code “NO.”

CC13l.

The questions included in this series ask the Respondent to focus on either severe or frequent symptoms that may have interfered with his/her life. It is important to emphasize the phrase “that have interfered with your life.” If the Respondent states that s/he suffers from severe stomach pain but it has not interfered with his/her life, code “NO.”

CC13m.

The questions included in this series ask the Respondent to focus on either severe or frequent symptoms that may have interfered with his/her life. It is important to emphasize the phrase “that have interfered with your life.” If the Respondent states that s/he suffers from severe stomach pain but it has not interfered with his/her life, code “NO.”

CC13n.

The questions included in this series ask the Respondent to focus on either severe or frequent symptoms that may have interfered with his/her life. It is important to emphasize the phrase “that have interfered with your life.” If the Respondent states that s/he suffers from severe stomach pain but it has not interfered with his/her life, code “NO.”

CC13o.

The questions included in this series ask the Respondent to focus on either severe or frequent symptoms that may have interfered with his/her life. It is important to emphasize the phrase “that have interfered with your life.” If the Respondent states that s/he suffers from severe stomach pain but it has not interfered with his/her life, code “NO.”

CC15b.

This includes both face-to-face office visits and discussions over the telephone.

CC15c.

This includes both face-to-face office visits and discussions over the telephone.

CC15d.

This includes both face-to-face office visits and discussions over the telephone.

CC15e.

This includes both face-to-face office visits and discussions over the telephone.

CC15f.

This includes both face-to-face office visits and discussions over the telephone.

CC15g.

This includes both face-to-face office visits and discussions over the telephone.

CC15h.

This includes both face-to-face office visits and discussions over the telephone.

CC15i.

This includes both face-to-face office visits and discussions over the telephone.

CC15j.

This includes both face-to-face office visits and discussions over the telephone.

CC15k.

This includes both face-to-face office visits and discussions over the telephone.

CC15l.

This includes both face-to-face office visits and discussions over the telephone.

CC15m.

This includes both face-to-face office visits and discussions over the telephone.

CC15n.

This includes both face-to-face office visits and discussions over the telephone.

CC15o.

This includes both face-to-face office visits and discussions over the telephone.

CC28.1.

The definition of medically unexplained chronic pain has a few components, so be sure to read it slowly. To code “Yes” for this question, first, the pain must have occurred for at least six months and second, it must have severely disrupted the Respondent’s daily activities or greatly affected the Respondent emotionally.

CC50.3.

This also includes Health Maintenance Organization plans as well as the traditional Medicare plan.

CC50.14.

A Health Maintenance Organization typically provides health care through a network of physicians, hospitals and other health care providers. There is no coverage for care received from non-network providers, except for emergencies or when authorized by the plan. HMO members select a primary care

physician to coordinate their care, including referrals to specialists and hospitals. Members pay a flat co-payment for services received, rather than a percentage of the total cost. HMO members do not have to meet a deductible for coverage to begin.

FD27a.

It is important to emphasize the time frame in which these symptoms happen. Be sure to highlight the distinction between symptoms experienced in the last 30 days and those experienced in the last two weeks when asking this question.

EA1.

This question is about the Respondent's self-image, regardless of actual weight. Concern about being too thin/skinny or not having muscles does not count. R must be concerned about being overweight, including concerns about only part of one's body, such as having fat hips.

EA2.

"Purposefully" means that we do not want to count loss of weight due to illness. Note that the unit of measurement is recorded in the following item and can be coded in pounds or kilograms.

EA6.

This question is intended to capture fear of weight gain, despite the Respondent being thin, and regardless of whether or not the Respondent actually did gain any weight.

EA9.

The missed menstrual periods must have occurred around the time that the Respondent was losing weight or was at the low weight. Do not count periods missed at other times.

AT2.

The list AT2a-2o describes various physiological and behavioral experiences related to nervous attacks. After four “yes” responses the Respondent qualifies for follow-up questions.

AT2a.

The list AT2a-2o describes various physiological and behavioral experiences related to nervous attacks. After four “yes” responses the Respondent qualifies for follow-up questions.

AT4.

By doctor we mean a professional with an MD degree, which includes psychiatrists as well as medical practitioners. Be sure to record the Respondent’s answer verbatim.

AT10.

The AT10a-AT10m series lists various possible factors that the Respondent may identify as precipitating the nervous attacks. If there are multiple precipitating factors, be sure to record all of them.

AT10a.

The AT10a-AT10m series lists various possible factors that the Respondent may identify as precipitating the nervous attacks. If there are multiple precipitating factors, be sure to record all of them.

AT10m.

This last item of the series is open-ended to allow the Respondent to describe any other situation not previously mentioned. Take care in recording this response accurately and completely.

PR5a.

If more than one such operation, ask for the age at the first operation.

PR6.

If stopped, but she does not know if it will be permanent, code “stopped temporarily.”

PR13.

Count as “yes” if the Respondent volunteers that symptoms were experienced during the first day(s) of her periods.

PR14.

The Respondent may volunteer that she did not have a period every month. That is fine and she should still answer the question as it is written.

PR16.

This question is intended to measure how much the Respondent is affected by the change in her mood during the week prior to her period.

PS1.

Read this introduction slowly, as it is an important set-up for the questions to come. PS1a-PS1f series of questions include asking the Respondent if they have seen a vision, heard voices, experienced mind control or mind take-over, or experienced strange communications. These questions are long and should be read slowly. Note that visions seen or voices heard during dreams while half-asleep, or under the influence of alcohol or drugs are excluded. If the Respondent volunteers that visions were seen or voices were heard exclusively while having a high fever, code “no.” During periods of grieving, following the death of someone close, an individual may see a brief vision of the deceased. If the Respondent only reports this type of vision, code “no.”

PS1a.

This question is long and should be read slowly.

Note that visions seen during dreams while half-asleep, or under the influence of alcohol or drugs are excluded. If the Respondent volunteers that visions were seen exclusively while having a high fever, code “no.” During periods of grieving, following the death of someone close, an individual may see a brief vision of the deceased. If the Respondent only reports this type of vision, code “no.”

PS1b.

This question is long and should be read slowly.

Note that voices heard during dreams while half-asleep, or under the influence of alcohol or drugs are excluded. If the Respondent volunteers that voices were heard exclusively while having a high fever, code “no.” During periods of grieving, following the death of someone close, an individual may briefly hear the deceased’s voice. If the Respondent only reports this type of voice, code “no.”

PS1c.

Many people believe that such things are possible, that perhaps there are spacemen who could do these things and that science will someday prove this to be true. We want to discriminate these beliefs, or uncertainties regarding whether this is true, from actual personal experiences. If the Respondent volunteers that there was a time in his or her life when it occurred to him that such things were possible, but never had any actual personal experiences in which he believed this was happening to him/her, code “no.”

PS1d.

If a Respondent gives a metaphorical response to this question, such as, “My husband is a very dominating man who tries to control my thoughts,” code “no.”

PS1f.

If the Respondent volunteers the description of a plausible story in which an actual plot occurred, code "no." If you are in doubt as to the plausibility, code "yes."

PS9.

Hospitalized means hospitalized overnight.

EM1.

An employee in a family business is only considered employed if he/she is part owner of the business, or is compensated as an employee in some way. Just being a spouse or family member does not make them part owner, the person must be listed on business documents as an owner.

Work for exchange or "barter" is also considered working for compensation. This would include sharecroppers and others for which some exchange of goods or services takes place. Note that the Respondent is forced to volunteer never having worked.

EM4.

Do not include time when the Respondent was a full-time student or retired.

EM7.1.

This is a standard question measuring the Respondent's participation in the labor market. The Respondent can have multiple responses for this question. Respondents who identify themselves as unemployed, laid off, retired, homemaker or student are still asked if they are doing any work for pay now in EM11.

"Temporarily laid off" means the Respondent is not working because his or her place of work has temporarily reduced the need for workers, even though the Respondent could be called back to work at some time in the future. Temporary lay-off is common in seasonal jobs like in the construction industry and in assembly line jobs where periodic retooling leads to lay-offs.

EM15.

The Respondent's main job is the job at which s/he spends the most time. S/he will be asked to respond to this question in light of his/her current job, not usual or regular job (if different). For the purpose of the International Standard Classification Occupation System (ISCO) the decisive factor for determining how an occupation should be classified is the nature of the skills or the education required to carry out the tasks and duties of the corresponding jobs, not necessarily the education of the person doing the job.

EM16.

The answer to this question will also be coded using the ISCO. Do not ask for the company name where the Respondent works, but ask what kind of place it is that s/he works for, whether the place is a manufacturing or a sales enterprise and what kind of product or service is manufactured or sold. Note that extra-territorial organization and bodies includes the activities of international organizations such as the United Nations, the Council for Mutual Economic Assistance, the European Communities, the International Monetary Fund, the World Bank, etc.

EM19.

The Respondent's main job was the job at which s/he spent the most time. S/he will be asked to respond to this question in light of her/his last job, not usual or regular job (if different). For the purpose of the

ISCO classification system, the decisive factor for determining how an occupation should be classified is the nature of the skills or the education required to carry out the tasks and duties of the corresponding jobs, not necessarily the education of the person doing the job.

EM20.

The answer to this question will also be coded using the ISCO. Do not ask for the company name where the Respondent worked, but ask what kind of place it is that s/he worked for, whether the place is a manufacturing or a sales enterprise and what kind of product or service is manufactured or sold.

SE7.

The Respondent's spouse's or partner's main job was the job at which s/he spent the most time. For the purpose of the ISCO classification system, the decisive factor for determining how an occupation should be classified is the nature of the skills or the education required to carry out the tasks and duties of the corresponding jobs, not necessarily the education of the person doing the job.

SE8.

The answer to this question will also be coded using the ISCO. Do not ask for the company name where the Respondent's spouse/partner worked, but ask what kind of place it is that s/he worked for, whether the place is a manufacturing or a sales enterprise and what kind of product or service is manufactured or sold.

SE9.

The Respondent's spouse's/partner's main job is the job at which s/he spends the most time. For the purpose of the ISCO classification system, the decisive factor for determining how an occupation should be classified is the nature of the skills or the education required to carry out the tasks and duties of the corresponding jobs, not necessarily the education of the person doing the job.

SE12.

If the Respondent chooses the "other" category, be sure to record his/her response completely and accurately. If respondent answers no, code "Not Spanish/Hispanic" which is category #1.

SE13.

Before accepting a refusal or "don't know" as an answer, probe by asking again, "Which one would you say best describes his/her race?"

FN2.

For some unemployed spouses and partners it may be especially important to clarify that a question about his/her spouse's or partner's earnings will come next, but this question is only meant to ask about the Respondent's personal earnings, which could be zero. This may be a little awkward for Respondents who are accustomed to thinking of their spouse's paycheck as fully shared. The Respondent that says s/he had no income, code "B."

FN5.

If there was more than one spouse or partner during the past 12 months, use the earnings income of the most recent spouse or partner.

FN7.

Include any family members who lived with the Respondent even part of the year. If the Respondent says there are no other household family members, code "B." If the Respondent is not sure about the income of the other family members, the interviewer can say, "Your best estimate is fine." If the Respondent is still unsure, code "Don't know."

FN12.

This question is trying to assess if after the Respondent sold everything s/he owned and paid his/her debts, would s/he still be in debt or have money left over. The Respondent's best estimate is acceptable. This question only refers to debts and possessions the Respondent has in the U.S., it does not refer to property owned outside of the U.S. A similar question (FN13d) asks about assets and debts in the Respondent's country of origin.

FN13b.

By country of origin we mean the Respondent's country of birth.

FN13c.

This is a follow-up question to the previous one. Therefore, the reference to “home” in this question refers to the Respondent’s country of origin.

FN13d.

This question is trying to assess if after the Respondent sold everything s/he owned and paid his/her debts, would s/he still be in debt or have money left over. The Respondent’s best estimate is acceptable. This question only refers to debts and possessions the Respondent has in the country of origin, it does not refer to property owned inside of the U.S. A similar question (FN12) asks about assets and debts the Respondent has in the U.S.

MR42.

Even if the Respondent did any of these things only once, it counts.

MR43.

Even if the Respondent was the recipient of any one of these things only once, it counts.

MR44.

Even if the Respondent did any of these things only once, it counts.

MR45.

Even if the Respondent was the recipient of any one of these things only once, it counts.

MR49a

The intent of the question is to evaluate the Respondent's perception of his/her spouse's/partner's excessive alcohol or drug use, regardless of whether or not the spouse/partner believes s/he uses these substances excessively.

CN1.

Children who died should not be counted.

CN2.

This question includes every person the Respondent supported or helped to raise, regardless of whether or not the person lived with the Respondent.

CN9.

The intent of this question is to find out how the Respondent rates his/her overall relationship with all his/her children. If a Respondent states that has a very good relationship with one child but a bad relationship with another, encourage them to choose a number between 0 and 10 to rate his/her overall

relationship with all children.

CN10.

Even if the Respondent did any of these things only once, it counts.

CN11.

Even if the Respondent did any of these things only once, it counts.

CN11.3

This is a long question with three different definitions that describe sexual preference. It is important to read it slowly and emphasize the underlined words. The options and definitions are only read for the Respondents who cannot read. Respondents who can read are referred to the Respondent Booklet.

SN1.

If the Respondent's spouse lives elsewhere because of being in the armed forces, prison, etc., speaking with the spouse counts.

SN2.

If the Respondent answers “it depends on the relative,” stress any of your relatives.

SN4.

Read the word “children” only if Respondent reported having biological or adoptive children in previous section (CHILDREN -- CN).

DA31b.1

If the Respondent answers “Catholic” but does not specify denomination, please do not probe and code answer as 31.

DA36.1.

By “homeless” we mean a person who lacks a fixed, regular, and adequate nighttime residence, or who lives in a supervised publicly or privately operated shelter.

DA36.2.

Some Respondents might explain that they were in a concentration camp, in such cases; code “political prisoner” which is response category #6.

DA37.

The Respondent looks at the ladder on Page 50 of the Respondent Booklet. The question intends to evaluate how the Respondent views him or herself as compared to other people who live in the United States. This is a highly subjective question. The Respondent who seems to have difficulty can be told to answer as best s/he can. Some Respondents might have a very high educational level but a very low income in the United States, or vice versa. In such cases, advise the Respondent to choose the number that reflects in general how s/he views him or herself as compared to other people who live in the United States.

DA38.

The Respondent looks at the ladder on Page 50 of the Respondent Booklet. The question intends to evaluate how the Respondent views him or herself as compared to other people who live in the same community. “Community” is defined according to what is most meaningful to the Respondent. Note that this question differs from the previous one in that it asks about a smaller social circle. However, it is still highly subjective. Therefore, the Respondent answers as best s/he can.

DA38b.

By country of origin we mean the Respondent's country of birth. Only Respondents who were born outside of the United States are asked this question. This is a hypothetical question that evaluates how the Respondent would compare her/his standing in relation to other people who live in her/his native country, if s/he had never left the country of origin to move to the United States. If a Respondent finds this question to be difficult, please encourage s/he to answer as best s/he can.

DA39.

This is one of several questions related to the attacks of September 11, 2001 and the impact that these events might have had on the Respondent's life. It is important to read this question slowly and sensitively.

DA39a.

This is one of several questions related to the attacks of September 11, 2001 and the impact that these events might have had on the Respondent's life. It is important to read this question slowly and sensitively.

DA40.

This is one of several questions related to the attacks of September 11, 2001 and the impact that these events might have had on the Respondent's life. It is important to read this question slowly and sensitively.

DA40a.

This is one of several questions related to the attacks of September 11, 2001 and the impact that these events might have had on the Respondent's life. It is important to read this question slowly and sensitively.

DA41.

This is one of several questions related to the attacks of September 11, 2001 and the impact that these events might have had on the Respondent's life. It is important to read this question slowly and sensitively.

By in-person witness we mean a Respondent that was physically there when the attacks happened, not that the attacks were viewed live on television.

DA41a.

This is one of several questions related to the attacks of September 11, 2001 and the impact that these events might have had on the Respondent's life. It is important to read this question slowly and sensitively.

DA42b.

This is series of questions is related to the attacks of September 11, 2001 and the impact that these events might have had on the Respondent's life. It is important to read each question slowly and sensitively.

DA42c.

This is series of questions is related to the attacks of September 11, 2001 and the impact that these events might have had on the Respondent's life. It is important to read each question slowly and sensitively.

DA42d.

This is series of questions is related to the attacks of September 11, 2001 and the impact that these events might have had on the Respondent's life. It is important to read each question slowly and sensitively.

DA42e.

This is series of questions is related to the attacks of September 11, 2001 and the impact that these events

might have had on the Respondent's life. It is important to read each question slowly and sensitively.

By "patriotic" in this question we mean the love a person feels for the United States.

DA42f.

This is series of questions is related to the attacks of September 11, 2001 and the impact that these events might have had on the Respondent's life. It is important to read each question slowly and sensitively.

DA42g.

This is series of questions is related to the attacks of September 11, 2001 and the impact that these events might have had on the Respondent's life. It is important to read each question slowly and sensitively.

DA42h.

This is series of questions is related to the attacks of September 11, 2001 and the impact that these events might have had on the Respondent's life. It is important to read each question slowly and sensitively.

DA42i.

This is series of questions is related to the attacks of September 11, 2001 and the impact that these events might have had on the Respondent's life. It is important to read each question slowly and sensitively.

DA42j.

This is series of questions is related to the attacks of September 11, 2001 and the impact that these events might have had on the Respondent's life. It is important to read each question slowly and sensitively.

DA42k.

This is series of questions is related to the attacks of September 11, 2001 and the impact that these events might have had on the Respondent's life. It is important to read each question slowly and sensitively.

DA42l.

This is series of questions is related to the attacks of September 11, 2001 and the impact that these events might have had on the Respondent's life. It is important to read each question slowly and sensitively.

DE7.

The definition of "when you were growing up" is whatever it means to the Respondent.

CD32.

In this question, school disciplinary measures such as getting kicked out of class should be included as well as suspensions or expulsions.

CD39b.

“Altogether” means that the Respondent should add up all the separate times.

MS3c.

This question asks about the length of the Respondents stay in his/her country of origin during the past year.

LP5b.

This question is intended to measure if the Respondent is able to comprehend and understand when reading in the specified language, without taking into account other reading skills such as pronunciation and grammatical rules.

LP5e.

This question is intended to measure if the Respondent is able to comprehend and understand when reading in English, without taking into account other reading skills such as pronunciation and grammatical rules.

LP7a.

When reading this question emphasis should be placed on the phrase most of your friends.

LP7b.

When reading this question emphasis should be placed on the phrase most of your family.

DS1a.

For the series DS1a-1i, even though "NEVER" does not appear as a response category in the question text you will notice that it appears as an option in BLAISE. Record "NEVER" only if volunteered by the Respondent.

DS1b.

For the series DS1a-1i, even though "NEVER" does not appear as a response category in the question text you will notice that it appears as an option in BLAISE. Record "NEVER" only if volunteered by the Respondent.

DS1c.

For the series DS1a-1i, even though "NEVER" does not appear as a response category in the question text you will notice that it appears as an option in BLAISE. Record "NEVER" only if volunteered by the Respondent.

DS1d.

For the series DS1a-1i, even though "NEVER" does not appear as a response category in the question text you will notice that it appears as an option in BLAISE. Record "NEVER" only if volunteered by the Respondent.

DS1e.

For the series DS1a-1i, even though "NEVER" does not appear as a response category in the question text you will notice that it appears as an option in BLAISE. Record "NEVER" only if volunteered by the Respondent.

DS1f.

For the series DS1a-1i, even though "NEVER" does not appear as a response category in the question text you will notice that it appears as an option in BLAISE. Record "NEVER" only if volunteered by the Respondent.

DS1g.

For the series DS1a-1i, even though "NEVER" does not appear as a response category in the question text you will notice that it appears as an option in BLAISE. Record "NEVER" only if volunteered by the Respondent.

DS1h.

For the series DS1a-1i, even though "NEVER" does not appear as a response category in the question text you will notice that it appears as an option in BLAISE. Record "NEVER" only if volunteered by the Respondent.

DS1i.

For the series DS1a-1i, even though "NEVER" does not appear as a response category in the question text you will notice that it appears as an option in BLAISE. Record "NEVER" only if volunteered by the Respondent.

DS3.

The Respondent is asked to identify the main reason for which s/he believes s/he had experiences related to discrimination. Record all the reasons mentioned. If the Respondent gives another reason that was not on the list, be sure to record it verbatim.

CE3.

If a Respondent says that his/her parents or family made the decision to move to the United States when he/she was still a child, please ask the question again in reference to his/her parents or family.

CE4e.

By country of origin we mean the Respondent's country of birth.

CE6.

If a Respondent asks whether the question refers to economic or emotional difficulty, please respond, "both."

AS7.

If the Respondent says, "I'm not looking for work," code "n/a."

AS10.

Some of the questions from AS1-AS10 present sensitive issues. If the Respondent refuses to answer, do not probe.

MM2c.

If the respondent also gives the year when they state the month in MM2a, MM2c can be recorded as "correct" without asking.

MM2d.

Note that we allow counting two seasons as correct for interviews conducted during four borderline months:

Winter: December, January, February, March

Spring: March, April, May, June

Summer: June, July, August, September

Fall: September, October, November, December

MM5.

The list should be read slowly, with a one second pause between each word. Record each word that the respondent recalls accurately, keeping in mind that the words may be repeated in any order. The task is repeated twice after the initial reading and recording.