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ICPSR 13707

Project on Human Development in Chicago Neighborhoods (PHDCN): Generalized Anxiety Disorder (Primary Caregiver and Young Adult Report on Self), Wave 3, 2000-2002

Description

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Bibliographic Description

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Title: Project on Human Development in Chicago Neighborhoods (PHDCN): Generalized Anxiety Disorder (Primary Caregiver and Young Adult Report on Self), Wave 3, 2000-2002

Alternate Title: PHDCN GAD, 2000-2002

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Scope of Study

Summary: The Project on Human Development in Chicago Neighborhoods (PHDCN) was a large-scale, interdisciplinary study of how families, schools, and neighborhoods affect child and adolescent development. One component of the PHDCN was the Longitudinal Cohort Study, which was a series of coordinated longitudinal studies that followed over 6,000 randomly selected children, adolescents, and young adults, and their primary caregivers over time to examine the changing circumstances of their lives, as well as the personal characteristics, that might lead them toward or away from a variety of antisocial behaviors. Numerous measures were administered to respondents to gauge various aspects of human development, including individual differences, as well as family, peer, and school influences. One such measure was the Generalized Anxiety Disorder (Primary Caregiver and Young Adult Report on Self) instrument. It was administered to subjects' primary caregivers in Cohorts 0, 3, 6, 9, 12, and 15 and to subjects in Cohort 18. The instrument was adapted from the Anxiety module of the Diagnostic Interview Schedule for Children (DISC 4) and obtained information regarding the primary caregivers' and subjects' worrying and anxiety. It is similar to (PROJECT ON HUMAN DEVELOPMENT IN CHICAGO NEIGHBORHOODS (PHDCN): GENERALIZED ANXIETY DISORDER (PRIMARY CAREGIVER), WAVE 2, 1997-2000 (ICPSR 13624) and related to PROJECT ON HUMAN DEVELOPMENT IN CHICAGO NEIGHBORHOODS (PHDCN): GENERALIZED ANXIETY DISORDER (PRIMARY CAREGIVER REPORT ON SUBJECT), WAVE 3, 2000-2002 (ICPSR 13706) and PROJECT ON HUMAN DEVELOPMENT IN CHICAGO NEIGHBORHOODS (PHDCN): GENERALIZED ANXIETY DISORDER (SUBJECT AND YOUNG ADULT), WAVE 3, 2000-2002 (ICPSR 13708). It asked a slightly different but similarly themed set of questions than the set used in 13706 and 13708.

Subject Term(s): adolescents, anxiety, caregivers, child development, childhood, emotional states, social behavior, worry

Geographic Coverage: Chicago, Illinois, United States

Time Period:
- 2000 - 2002

Date(s) of Collection:
- 2000 - 2002

Unit of Observation: individual

Universe: Children, adolescents, young adults, and their primary caregivers, living in the city of Chicago in 1994.

Data Type: survey data

Data Collection Notes: (1) The Murray Research Center conducted the initial data and documentation processing for this collection. (2) At present, only a restricted version of the data is available (see RESTRICTIONS field). A downloadable version of the data is slated to be available in the near future.

Methodology

Purpose of the Study:

Project on Human Development in Chicago Neighborhoods

The Project on Human Development in Chicago Neighborhoods (PHDCN) was a large-scale, interdisciplinary study of how families, schools, and neighborhoods affect child and adolescent development. It was designed to advance the understanding of the developmental pathways of both positive and negative human social behaviors. In particular, the project examined the causes and pathways of juvenile delinquency, adult crime, substance abuse, and violence. At the same time, the project provided a detailed look at the environments in which these social behaviors took place by collecting substantial amounts of data about urban Chicago, including its people, institutions, and resources.

Longitudinal Cohort Study

One component of the PHDCN was the Longitudinal Cohort Study, which was a series of coordinated longitudinal studies that followed over 6,000 randomly selected children, adolescents, and young adults, and their primary caregivers over time to examine the changing circumstances of their lives, as well as the personal characteristics, that might lead them toward or away from a variety of antisocial behaviors. The age cohorts

include birth (0), 3, 6, 9, 12, 15, and 18 years. Numerous measures were administered to respondents to gauge various aspects of human development, including individual differences, as well as family, peer, and school influences.

Generalized Anxiety Disorder (Primary Caregiver and Young Adult Report on Self)

The data in this collection are from Wave 3 of the Longitudinal Cohort Study, which was administered between 2000 and 2002. The data files contain information from the Generalized Anxiety Disorder (Primary Caregiver and Young Adult Report on Self) protocol. The Generalized Anxiety Disorder (Primary Caregiver and Young Adult Report on Self) instrument was adapted from the Anxiety module of the Diagnostic Interview Schedule for Children (DISC 4) and obtained information regarding subjects' worrying and anxiety.

Study Design: **Project on Human Development in Chicago Neighborhoods**

The city of Chicago was selected as the research site for the PHDCN because of its extensive racial, ethnic, and social-class diversity. The project collapsed 847 census tracts in the city of Chicago into 343 neighborhood clusters (NCs) based upon seven groupings of racial/ethnic composition and three levels of socioeconomic status. The NCs were designed to be ecologically meaningful. They were composed of geographically contiguous census tracts, and geographic boundaries, and knowledge of Chicago's neighborhoods were considered in the definition of the NCs. Each NC was comprised of approximately 8,000 people.

Longitudinal Cohort Study

For the Longitudinal Cohort Study, a stratified probability sample of 80 neighborhoods was selected. The 80 NCs were sampled from the 21 strata (seven racial/ethnic groups by three socioeconomic levels) with the goal of representing the 21 cells as equally as possible to eliminate the confounding between racial/ethnic mix and socioeconomic status. Once the 80 NCs were chosen, then block groups were selected at random within each of the sample neighborhoods. A complete listing of dwelling units was collected for all sampled block groups. Pregnant women, children, and young adults in seven age cohorts (birth, 3, 6, 9, 12, 15, and 18 years) were identified through in-person screening of approximately 40,000 dwelling units within the 80 NCs. The screening response rate was 80 percent. Children within six months of the birthday that qualified them for the sample were selected for inclusion in the Longitudinal Cohort Study. A total of 8,347 participants were identified through the screening. Of the eligible study participants, 6,228 were interviewed in the Wave 1 data collection, 5,338 were interviewed in the

Wave 2 data collection, and 4,850 were interviewed in the Wave 3 data collection.

Data collection for Wave 3 began in 2000 and ended in 2002. It included a letter sent to study participants notifying them that they would be contacted to schedule an interview. Additional information on the contact log included the dates and research assistant ID of the Wave 2 interview (or the status of the case if incomplete in Wave 2), a list of household composition and ID numbers of other household members in the study, the name the telephone was listed under, the recontact information from Waves 1 and 2, and an updated history of addresses.

For all cohorts except 0 and 18, primary caregivers as well as the child were interviewed. The primary caregiver was the person found to spend the most time taking care of the child. Separate research assistants administered the primary caregiver interviews and the child interviews. The primary method of data collection was face-to-face interviewing, although participants who refused to complete the personal interview were administered a phone interview. An abbreviated telephone interview was conducted for the primary caregivers in Cohorts 0-15 and Cohort 18 study participants in Wave 3 who lived outside the nine-county metropolitan area to which research assistants were able to travel for interviews. In Wave 3, phone interviews were also conducted with the study participants in Cohort 15. People who refused to complete the two-hour in-person interview were administered the phone interview. A total of 391 telephone interviews were conducted during Wave 3, representing 6.3 percent of the sample.

Proxy interviews were conducted with study participants who were emancipated minors (under 18 but married or living independently). The study participants answered questions from the primary caregiver's interview on the primary caregiver's behalf. In Wave 3, one primary caregiver and eleven study participants (young adults) were interviewed in jail. They were located in either the Cook County Jail or in one of the state prisons. Those study participants in a state system outside the nine-county area were also interviewed by phone. Study participants in foster care could not be interviewed. The Department of Children and Family Services did not allow interviews of the foster parent or the child. Permission was granted for a brief period in Wave 1, therefore there are some children in the sample who could not be followed up in Waves 2 and 3. Some children were not in foster care in Wave 1 but were placed in foster care by Wave 2 or 3. They were also not followed up. Lastly, some participants were interviewed in Wave 3 but not in Wave 2, as they were in foster care during Wave 2.

Some participants in Wave 1 spoke a language other than English, Spanish, or Polish. In Wave 3, an abbreviated version of the primary caregiver's protocol was administered, and the research assistant

arranged for someone in the household to translate on the spot. In Wave 3, the complete protocol was translated into Spanish.

Depending on the age and wave of data collection, participants were paid between $5 and $20 per interview. Other incentives, such as free passes to museums, the aquarium, and monthly drawing prizes, were also included.

Interview protocols included a wide range of questions. For example, some questions assessed impulse control and sensation-seeking traits, cognitive and language development, leisure activities, delinquency and substance abuse, friends' activities, and self-perception, attitudes, and values. Caregivers were also interviewed about family structure, parent characteristics, parent-child relationships, parent discipline styles, family mental health, and family history of criminal behavior and drug use.

For primary caregivers included in Wave 3 but not in Wave 2, an addendum interview was administered consisting of measures or portions of measures from the Wave 2 interview. An addendum was also given to the Cohort 15 and 18 study participants who were not included in Wave 2. A total of 164 primary caregivers and 62 young adult (Cohorts 15 and 18) addendums were completed in Wave 3.

Generalized Anxiety Disorder (Primary Caregiver and Young Adult Report on Self)

The Generalized Anxiety Disorder (Primary Caregiver and Young Adult Report on Self) was administered to subjects' primary caregivers in Cohorts 0, 3, 6, 9, 12, and 15 and to subjects in Cohort 18. The instrument was adapted from the Anxiety module of the Diagnostic Interview Schedule for Children (DISC 4) and obtained information regarding the primary caregivers' and subjects' worrying and anxiety. It is similar to (PROJECT ON HUMAN DEVELOPMENT IN CHICAGO NEIGHBORHOODS (PHDCN): GENERALIZED ANXIETY DISORDER (PRIMARY CAREGIVER), WAVE 2, 1997-2000 (ICPSR 13624) and related to (PROJECT ON HUMAN DEVELOPMENT IN CHICAGO NEIGHBORHOODS (PHDCN): GENERALIZED ANXIETY DISORDER (PRIMARY CAREGIVER REPORT ON SUBJECT), WAVE 3, 2000-2002 (ICPSR 13706) and (PROJECT ON HUMAN DEVELOPMENT IN CHICAGO NEIGHBORHOODS (PHDCN): GENERALIZED ANXIETY DISORDER (SUBJECT AND YOUNG ADULT), WAVE 3, 2000-2002 (ICPSR 13708). It asked a slightly different, but similarly themed, set of questions than the set used in 13706 and 13708.

Sample: Stratified probability sample.

Weight: none

Mode of Data Collection: face-to-face interview

telephone interview

Description of Variables: The data files contain information regarding primary caregivers' and subjects' worrying and anxiety. Respondents were asked if, during the past 12 months, they ever had a period lasting one month or longer when most of the time they felt worried, tense, or anxious and if they worried more than most people in their situation. They were also asked if this period had ended or was still ongoing and for how long the period lasted or had been going on. Respondents were also asked if, during that period, they experienced any of a number of characteristics such as worrying most days, having different worries on their mind at the same time, or finding it difficult to control their worrying. They were also asked if, in addition to their worry or anxiety, they had such problems as restlessness, trouble concentrating, or tense, sore, or aching muscles. Respondents were also asked if they told a doctor or other professional about their problems, whether they took medication or used drugs or alcohol more than once for their problems, and how much the worrying or anxiety interfered with their life or activities.

Response Rates: The overall response rate for Wave 3 of the Longitudinal Cohort Study was 78.19 percent or 4,850 participants. The response rates for subjects by cohort were:

1. 76.0 percent for Cohort 0
2. 80.5 percent for Cohort 3
3. 80.2 percent for Cohort 6
4. 77.5 percent for Cohort 9
5. 74.9 percent for Cohort 12
6. 71.3 percent for Cohort 15
7. 67.4 percent for Cohort 18

The response rates for primary caregivers by cohort were:

1. 76.6 percent for Cohort 0
2. 81.3 percent for Cohort 3
3. 80.6 percent for Cohort 6
4. 79.0 percent for Cohort 9
5. 79.1 percent for Cohort 12
6. 77.0 percent for Cohort 15
7. 0 percent for Cohort 18

Presence of Common Scales: none

Extent of Processing: Performed recodes and/or calculated derived variables.

Checked for undocumented or out-of-range codes.

Access and Availability

Note: A list of the data formats available for this study can be found in the summary of holdings. Detailed file-level information (such as record length, case count, and variable count) is listed in the file manifest.

Some instruments administered as part of this study may contain contents from copyrighted instruments. Reproductions of the instruments are provided solely as documentation for the analysis of the data associated with this collection. Please contact the data producers for information on permissions to use the instruments for other purposes.

Restrictions: To protect respondent privacy, the data are restricted from general dissemination. Users interested in obtaining these data must complete an Agreement for the Use of Confidential Data, specify the reasons for the request, and obtain IRB approval or notice of exemption for their research. Apply for access to these data through the ICPSR Restricted Data Contract Portal, which can be accessed via the study home page (Link).

Researchers are encouraged to also consult the NACJD Restricted Data page (Link) for additional information about restricted data.

Original ICPSR Release: 2007-02-06

Dataset(s):

- DS1: Cohort 0
- DS2: Cohort 3
- DS3: Cohort 6
- DS4: Cohort 9
- DS5: Cohort 12
- DS6: Cohort 15
- DS7: Cohort 18

Publications

Final Reports and Other Publication Resources: A list of publications related to, or based on, this data collection can be accessed from the study's download page on the NACJD Web site or through the ICPSR Bibliography of Data-Related Literature at http://www.icpsr.umich.edu/ICPSR/citations/index.html. The list of citations includes links to abstracts and publications in Portable Document Format (PDF) files or text files when available.

Final reports and other publications describing research conducted on a variety of criminal justice topics are available from the National Criminal Justice Reference Service (NCJRS). NCJRS was established in 1972 by the National Institute of Justice (NIJ), an agency of the U.S. Department of Justice, to provide research findings to criminal justice professionals and researchers. NCJRS operates specialized clearinghouses that are staffed by information specialists who supply a range of reference, referral, and distribution services. Publications can be obtained from NCJRS at NIJ/NCJRS, Box 6000, Rockville, MD, 20849-6000, 800-851-3420 or 301-519-5500. TTY Service for the Hearing Impaired is 877-712-9279 (toll-free) or 301-947-8374 (local). The URL for the NCJRS Web site is:

http://www.ncjrs.gov/

NIJ Data Resources Program

About the DRP: The National Institute of Justice Data Resources Program (DRP) makes datasets from NIJ-funded research and evaluation projects available to the research community and sponsors research and training activities devoted to secondary data analysis. Datasets are archived by the National Archive of Criminal Justice Data (NACJD) at the Inter-university Consortium for Political and Social Research (ICPSR) at the University of Michigan.

The NACJD maintains a World Wide Web site with instructions for transferring files and sending messages. Criminal justice data funded by the Department of Justice are available via the Internet at this site at no charge to the user. NACJD may be contacted at NACJD/ICPSR, P.O. Box 1248, Ann Arbor, MI, 48106-1248, 800-999-0960. The URL for the NACJD Web site is:

http://www.icpsr.umich.edu/NACJD/