



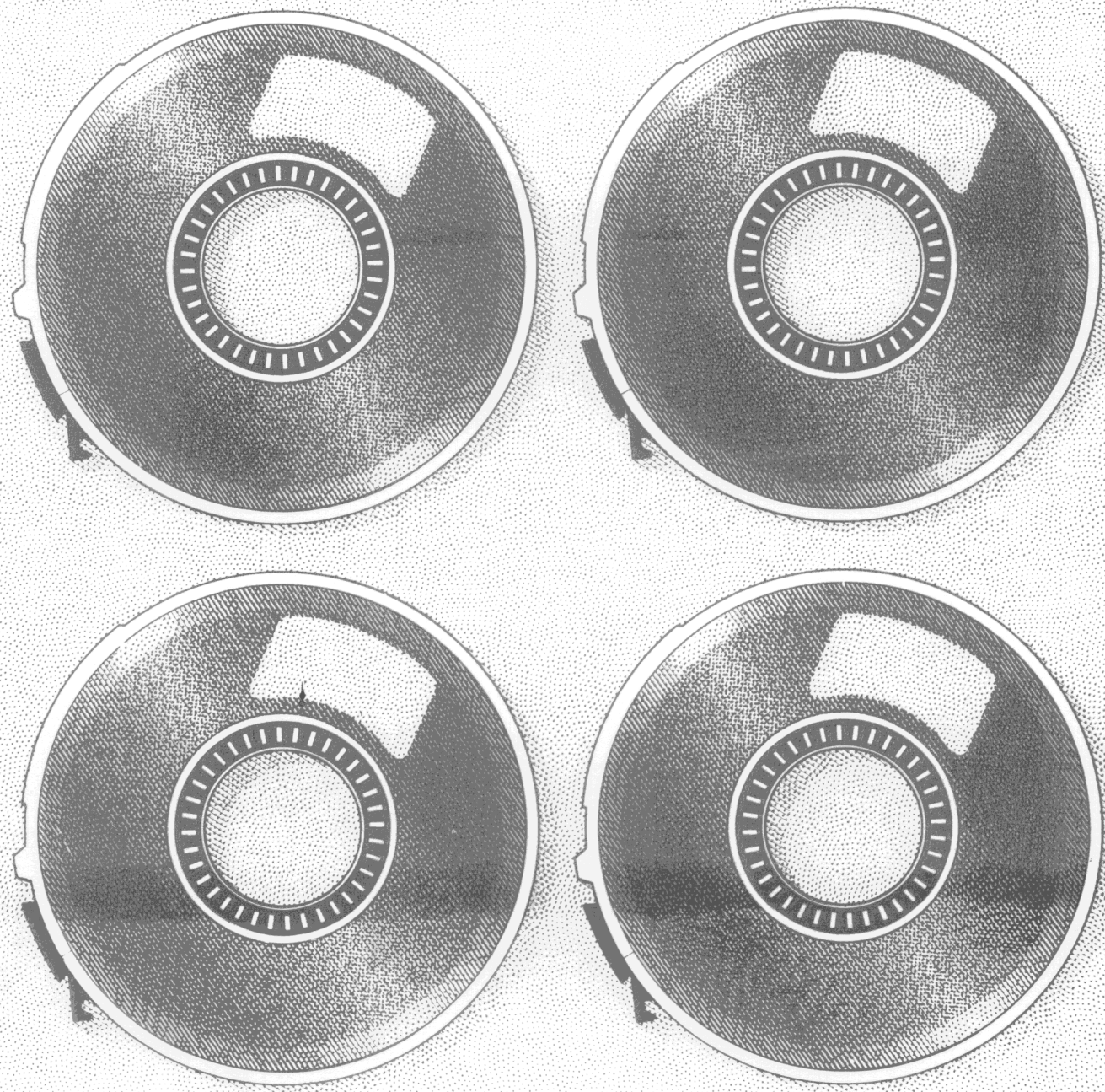
Public Use Data Tape Documentation

Measures of Depression
Ages 20 - 74 Years
Tape Number 6523

Version 2

Hispanic Health and Nutrition
Examination Survey, 1982-1984

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES • Public Health Service • Centers for Disease Control • National Center for Health Statistics

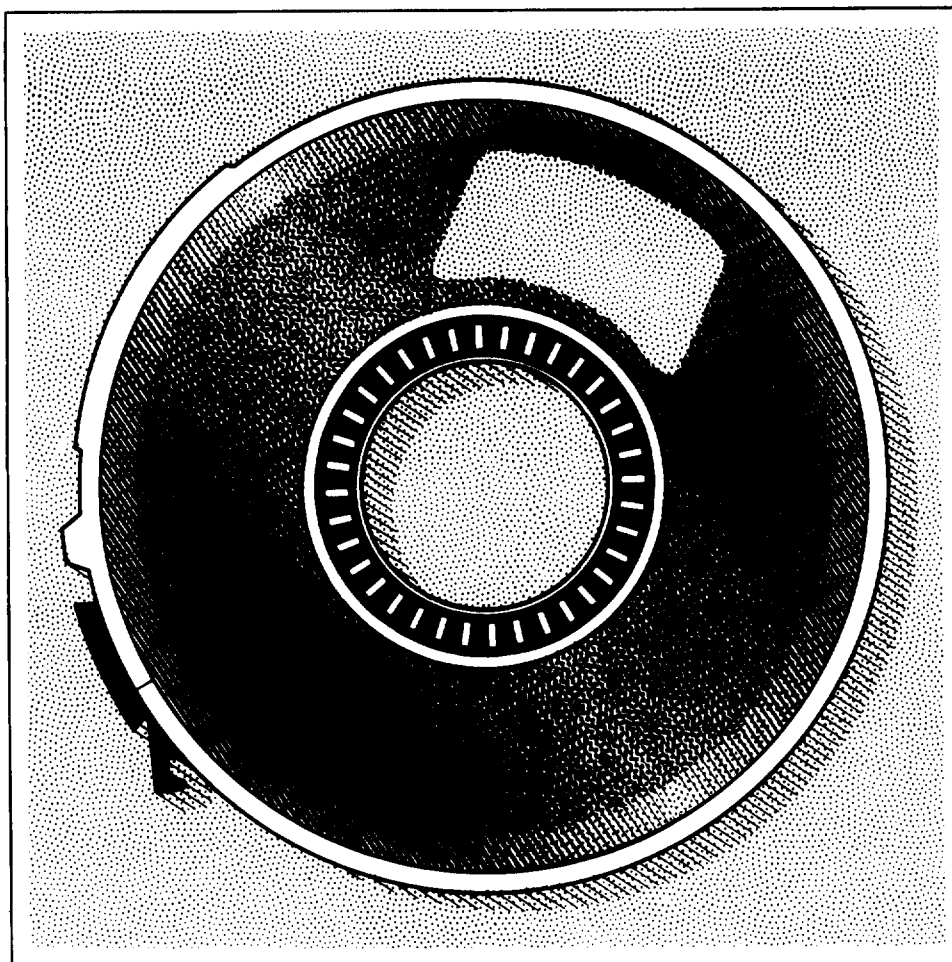


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U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
Centers for Disease Control
National Center for Health Statistics

Hyattsville, Maryland
November 1988

Hispanic Health and Nutrition Examination Survey

Mexican Americans
Cuban Americans
Puerto Ricans

Tape Number 6523

MEASURES OF DEPRESSION

NIMH Diagnostic Interview Schedule (DIS) Depression Section

Center for Epidemiologic Studies Depression Scale (CES-D)

Ages 20 - 74 Years

Version 2

June 1987

The Hispanic Health and Nutrition Examination Survey (HHANES) was conducted from July 1982 through December 1984. The data on the tape documented here are from all three portions of the survey:

Mexican Americans

Residing in selected counties of Texas, Colorado, New Mexico, Arizona, and California

Surveyed from July 1982 through November 1983

9,894 persons sampled; 8,554 interviewed; 7,462 examined

Cuban Americans

Residing in Dade County (Miami), Florida

Surveyed from January 1984 through April 1984

2,244 persons sampled; 1,766 interviewed; 1,357 examined

Puerto Ricans

Residing in the New York City area, including parts of New Jersey and Connecticut

Surveyed from May 1984 through December 1984

3,786 persons sampled; 3,369 interviewed; 2,834 examined

The following tape characteristics are those of the version of the tape kept at NCHS and of the tape transmitted to the National Technical Information Service for release to users:

Tape labels: IBM standard
Data set name: HHANES.DU652302
Data set organization: Physical sequential
Record format: Fixed block
Record length: 520
Block size: 23400
Density: 6250 BPI
Number of records: 11653
Data code: EBCDIC

CAUTION

BEFORE USING THIS DATA TAPE,
PLEASE READ THIS PAGE

- o Read the accompanying description of the survey, "The Plan and Operation of the Hispanic Health and Nutrition Examination Survey", DHHS Publication No. (PHS) 85-1321 before conducting analyses of the data on this tape.

- o Two aspects of HHANES, especially, should be taken into account when conducting any analyses: the sample weights and the complex survey design.

- o Analyses should not be conducted on data combined from the three portions of the survey (Mexican-American, Cuban-American, Puerto Rican).

- o HHANES is a survey of Hispanic households and some of the sample persons included on this tape are not of Hispanic origin. A detailed description of the data codes dealing with national origin or ancestry appears in the NOTES section of this document.

- o Examine the range and frequency of values of a variable before conducting an analysis of data. The range may include unusual or unexpected values. The frequency counts may be useful to determine which analyses may be worthwhile.

- o Language of Interview, which may appear several places on this tape, can vary depending on the questionnaire (several used in the survey) and on whether the response was provided by the sample person or by a proxy.

- o For some data items, reference is made to a note. The notes (in a separate section of this document) may be very important in data analyses. Attention to them is strongly urged.

- o For some data items, the number of sample persons with a positive response is very small. In these instances, it may not be possible to produce a reliable population estimate.

This Public Use Data Tape has been edited very carefully. Numerous consistency and other checks were also performed. Nevertheless, due especially to the large number of data items, some errors may have gone undetected.

Please bring to the attention of NCHS any errors in the data tape or the documentation. Errata sheets will be sent to people who have purchased the data tapes and corrections will be made to subsequently released data tapes.

In publications, please acknowledge NCHS as the original data source. The acknowledgment should include a disclaimer crediting the authors for analyses, interpretations, and conclusions; NCHS should be cited as being responsible for only the collection and processing of the data. In addition, NCHS requests that the acronym HHANES be placed in the abstracts of journal articles and other publications based on data from this survey in order to facilitate the retrieval of such materials through automated bibliographic searches. Please send reprints of journal articles and other publications that include data from this tape to NCHS.

Division of Health Examination Statistics
National Center for Health Statistics
Center Building, Room 2-58
3700 East-West Highway
Hyattsville, MD 20782

Public Use Data Tapes for the Hispanic Health and Nutrition Examination Survey will be released through the National Technical Information Service (NTIS) as soon as the data have been edited, validated, and documented. A list of NCHS Public Use Data Tapes that can be purchased from NTIS may be obtained by writing the Scientific and Technical Information Branch, NCHS.

Scientific and Technical Information Branch
National Center for Health Statistics
Center Building, Room 1-57
3700 East-West Highway
Hyattsville, MD 20782
301-436-8500

CONTENTS

		<u>Page</u>
Section	A. Introduction and survey description	1
Section	B. Data collection and processing procedures	7
Section	C. References	9
Section	D. Tape position index	12
Section	E. Sociodemographic data - sample person	14
Section	F. Sociodemographic data - head of family	22
Section	G. Family composition and income data	25
Section	H. Residence and household data	28
Section	I. Sample weights	31
Section	J. Family relationships	32
Section	K. NIMH Diagnostic Interview Schedule (DIS) Depression Section	33
Section	L. Center for Epidemiologic Studies Depression Scale (CES-D)	42
Section	M. Notes	46
Section	N. Differences between the standard DIS depression section and HHANES version	60
Section	O. Diagnosis of major depressive episode	61

SECTION A. INTRODUCTION AND SURVEY DESCRIPTION

The National Center for Health Statistics (NCHS) collects, analyzes, and disseminates data on the health status of Americans. The results of surveys, analyses, and studies are made known primarily through publications and the release of computer data tapes. This document contains details required to guide programmers, statistical analysts, and research scientists in the use of a Public Use Data Tape.

From 1960 through 1980 NCHS conducted five population-based, national health examination surveys. Each survey involved collecting data by direct physical examination, the taking of a medical history, and laboratory and clinical tests and measurements. Questionnaires and examination components have been designed to obtain and support analyses of data on certain targeted conditions such as diabetes, hypertension, and anemia. Beginning with the first National Health and Nutrition Examination Survey (NHANES I) a nutrition component was added to obtain information on nutritional status and dietary practices. The numbers of Hispanics in these samples were, however, insufficient to enable adequate estimation of their health conditions. From 1982 through 1984 a Hispanic Health and Nutrition Examination Survey (HHANES) was conducted to obtain data on the health and nutritional status of three Hispanic groups: Mexican Americans from Texas, Colorado, New Mexico, Arizona, and California; Cuban Americans from Dade County, Florida; and Puerto Ricans from the New York City area, including parts of New Jersey and Connecticut.

The general structure of the HHANES sample design was similar to that of the previous National Health and Nutrition Examination Surveys. All of these studies have used complex, multistage, stratified, clustered samples of defined populations. The major difference between HHANES and the previous surveys is that HHANES was a survey of three special subgroups of the population in selected areas of the United States rather than a national probability sample. A detailed presentation of the design specifications is found in Chapter 5 of "Plan and Operation of the Hispanic Health and Nutrition Examination Survey, 1982-84" (Ref. No. 1).

Data collection began with a household interview. Several questionnaires were administered:

- o A Household Screener Questionnaire (HSQ), administered at each selected address, for determining household eligibility and for selecting sample persons.
- o A Family Questionnaire (FQ), administered once for each family containing sample persons, which included sections on family relationships, basic demographic information for sample persons and head of family, Medicare and health insurance coverage, participation in income assistance programs, and housing characteristics.
- o An Adult Sample Person Questionnaire (ASPQ), for persons 12 through 74 years which, depending on age, included sections on health status measures, health services utilization, smoking (20 through 74 years), meal program participation, and acculturation. Information on the use of medicines and vitamins in the past two weeks was also obtained.
- o A Child Sample Person Questionnaire (CSPQ), for sample persons 6 months through 11 years which included sections on a number of health status issues, health care utilization, infant feeding practices, participation in meal programs, school attendance, and language use. Information on the use of medicines and vitamins in the past two weeks was also obtained.

At the Mobile Examination Center two questionnaires were administered and an examination performed:

- o An Adult Sample Person Supplement (ASPS), for sample persons 12 through 74 years, which included sections on alcohol consumption, drug abuse, depression, smoking (12 through 19 years), pesticide exposure, and reproductive history.
- o A Dietary Questionnaire (DQ), for persons 6 months through 74 years, by which trained dietary interviewers collected information about "usual" consumption habits and dietary practices, and recorded foods consumed 24-hours prior to midnight of the interview.
- o An examination which included a variety of tests and procedures. Age at interview and other factors determined which procedures were administered to which examinees. A dentist performed a dental examination and a vision test. Technicians took blood and urine specimens and administered a glucose tolerance test, X-rays, electrocardiograms, and ultrasonographs of the gallbladder. Technicians also performed hearing tests and took a variety of body measurements. A physician performed a medical examination focusing especially on the cardiovascular, gastrointestinal, neurological, and musculoskeletal systems. The physician's impression of overall health, nutritional and weight status, and health care needs were also recorded. Some blood and urine specimen analyses were performed by technicians in the examination center; others were conducted under contract at various laboratories.

Because the HHANES sample is not a simple random one, it is necessary to incorporate sample weights for proper analysis of the data. These sample weights are a composite of individual selection probabilities, adjustments for noncoverage and nonresponse, and poststratification adjustments. The HHANES sample weights, which are necessary for the calculation of point estimates, are located on all data tapes in positions 184-213. Because of the complex sample design and the ratio adjustments used to produce the sample weights, commonly used methods of point and variance estimation and hypothesis testing which assume simple random sampling may give misleading results. In order to provide users with the capability of estimating the complex sample variances in the HHANES data, Strata and Pseudo Primary Sampling Unit (PSU) codes have been provided on all data tapes in positions 214-217. These codes and the sample weights are necessary for the calculation of variances.

There are computer programs available designed for variance estimation for complex sample designs. The balanced repeated replication approach (Ref. No. 2) is used in &REPER and a linearization approach is used in &PSALMS to calculate variance-covariance matrixes. Both routines are available within the OSIRIS IV library (Ref. No. 3). SURREGR (Ref. No. 4) and SUPERCARP (Ref. No. 5) are programs that calculate variance-covariance matrixes using a linearization approach (Ref. No. 6) (Taylor series expansion). Another program, SESUDAAN (Ref. No. 7) calculates standard errors, variances, and design effects. (Note: This version of SESUDAAN should not be used to obtain variances for totals.) SURREGR and SESUDAAN are special procedures which run data under the SAS system (Ref. No. 8).

Even though the total number of examined persons in this survey is quite large, subclass analyses can lead to estimates that are unstable, particularly estimates of variances. Consequently, analyses of subclasses require that the user pay particular attention to the number of sample persons in the subclass and the number of PSU's that contain at least one sample person in the subclass. Small sample sizes, or a small number of PSU's used in the variance calculations, may produce unstable estimates of the variances.

A more complete discussion of these issues and possible analytic strategies for examining various hypotheses is presented in Chapter 11 of "Plan and Operation of the Hispanic Health and Nutrition Examination Survey, 1982-84" (Ref. No. 1) and in an earlier NCHS methodology (Series 2) publication (Ref. No. 9).

Some users, however, may not have access to the computer programs for estimating complex sample variances or may want to do their preliminary analyses without using them. In addition, variance estimates calculated from HHANES data through use of the programs described previously are likely to be unstable because there were so few sample areas for each portion of HHANES. This instability is not due to there being too few people in the sample but may be due to the fact that the sample was selected from relatively few areas. Therefore, the following discussion is designed to provide an alternative approach to deal with the unavailability of software and the small number of PSU's. The approach is based on using average design effects (Ref. No. 10).

The design effect, defined as the ratio of the variance of a statistic from a complex sample to the variance of the same statistic from a simple random sample of the same size, that is,

$$\text{DESIGN EFFECT (DEFF)} = \frac{\text{COMPLEX SAMPLE VARIANCE}}{\text{SIMPLE RANDOM SAMPLE VARIANCE}}$$

is often used to show the impact of the complex sample design on variances. If the design effect is near 1, the complex sample design has little effect on the variances and the user could consider assuming simple random sampling for the analysis.

Some illustrative design effects for HHANES data on this tape are given in the following tables. The design effects in the tables are the average for the age groups usually presented in NCHS Series 11 publications. If the average design effect for a subgroup was less than 1.0 (implying an improvement over simple random sampling), it was coded as 1.0.

The following guidelines were used in the calculation of the average design effects:

1. Exclude all persons of non-Hispanic origin,
2. Exclude all estimates for large age ranges, such as all ages combined or 'all adults', and
3. Exclude all estimates where the proportion of the subpopulation with the specific characteristic or condition was zero percent or one hundred percent.

Design effects tend to be larger when age groups are combined, just as they are when the sexes are combined, as shown in the tables. The data in the tables give the user an idea of the range in design effects for selected response variables from this data tape. If a response variable is not one shown in the tables take the range into account; it is possible that a user could have one of the higher, rather than one of the lower, design effects.

Average Design Effects, by Sex, for Selected Variables --
Mexican-American Portion

Variable	Mean or Proportion	Tape Positions	Both Sexes	Male	Female
Appetite summary	p	424	1.2	1.0	1.1
Sleep summary	p	427	1.4	1.2	1.4
Tired out summary	p	429	1.1	1.0	1.2
Slow, restless summary	p	432	1.0	1.0	1.0
Sex summary	p	437	1.3	1.0	1.2
Worthless summary	p	439	1.2	1.0	1.7
Trouble thinking summary	p	442	1.0	1.0	1.2
Death summary	p	447	1.0	1.0	1.0
DIS diagnostic variable (DSM-III major depression)	p	481	1.5	1.0	1.4
CES-D total score	\bar{x}	506-510	1.4	1.0	1.2
CES-D caseness score	p	511	1.0	1.0	1.0

Source: NCHS, HHANES, 1982-84, Tape Number 6523, Version 2.

Average Design Effects, by Sex, for Selected Variables --
Cuban-American Portion

Variable	Mean or Proportion	Tape Positions	Both Sexes	Male	Female
Appetite summary	p	424	1.4	1.4	1.5
Sleep summary	p	427	1.1	1.2	1.2
Tired out summary	p	429	1.0	1.0	1.1
Slow, restless summary	p	432	1.1	1.0	1.2
Sex summary	p	437	1.0	1.0	1.0
Worthless summary	p	439	1.0	1.0	1.1
Trouble thinking summary	p	442	1.0	1.0	1.0
Death summary	p	447	1.0	1.0	1.2
DIS diagnostic variable (DSM-III major depression)	p	481	1.1	1.0	1.2
CES-D total score	\bar{x}	506-510	1.0	1.0	1.0
CES-D caseness score	p	511	1.0	1.0	1.0

Source: NCHS, HHANES, 1982-84, Tape Number 6523, Version 2.

Average Design Effects, by Sex, for Selected Variables --
Puerto Rican Portion

Variable	Mean or Proportion	Tape Positions	Both Sexes	Male	Female
Appetite summary	p	424	1.0	1.0	1.1
Sleep summary	p	427	1.3	1.3	1.0
Tired out summary	p	429	1.0	1.1	1.0
Slow, restless summary	p	432	1.2	1.2	1.0
Sex summary	p	437	1.2	1.0	1.2
Worthless summary	p	439	1.4	1.0	2.0
Trouble thinking summary	p	442	1.2	1.0	1.0
Death summary	p	447	2.7	1.1	2.3
DIS diagnostic variable (DSM-III major depression)	p	481	1.5	1.0	1.0
CES-D total score	\bar{x}	506-510	1.6	1.4	1.3
CES-D caseness score	p	511	1.5	1.4	1.3

Source: NCHS, HHANES, 1982-84, Tape Number 6523, Version 2.

Suppose, for example, there were 349 Mexican-American females ages 35-74 years. Suppose, also, that the average CES-D total score for these women was 8.7 and that 17 percent of them had a CES-D caseness score (greater than or equal to 16) indicative of a current depressive state.

Assuming simple random sampling, the variance for the percent is calculated by converting the percent to a proportion and using the standard formula for the variance of a proportion,

$$V = \frac{pq}{n}$$

This variance (V) multiplied by the design effect (DEFF) provides an estimate of the variance from a complex sample of the same sample size (n). In the example above,

$$V = \frac{(.17) (.83)}{349}$$

=.0004 = variance for a simple random sample

Then, multiplying by the design effect,

$$= (.0004) (1.0)$$

= .0004 = estimated variance for the complex sample

In a similar way, the complex sample variance of the mean CES-D total score for this age-sex group is determined by multiplying the simple random sample variance of the mean by the appropriate design effect -- in this example, 1.2.

The user can then proceed with estimating confidence intervals and testing hypotheses in the usual manner.

The user should recognize that this approach does not incorporate the variance covariance matrix. In most cases, this leads to a slight overestimate of the variance because the covariance terms, which are subtracted in the variance of a ratio, in general are positive. Thus, in a borderline case, the null hypothesis would be less likely to be rejected (Ref. No. 11).

Alternative or better approaches may exist or be developed. Users who want to suggest such approaches, or who want the latest information should contact the Scientific and Technical Information Branch (address given in the beginning of this documentation).

SECTION B. DATA COLLECTION AND PROCESSING PROCEDURES

Data presented in Sections E through H and the family relationships data in Section J were collected on the Household Screener and Family Questionnaires. Data presented in Section K were collected on the Adult Sample Person Questionnaire. These interview schedules were administered in sample persons' households. Data presented in Section L were collected on the Adult Sample Person Supplement Questionnaire which was administered in the medical examination center. Completed interview schedules were reviewed in the Survey's field offices and again at the data processing center of NCHS by clerical editors. The editors checked the forms for completeness, clarity, and compliance with skip patterns, and they coded items such as industry and occupation. At the data processing center the questionnaires were keyed and verified on key-to-disk data entry equipment under the control of programs that checked for valid codes and ranges, compliance with skip patterns, and consistency. After being keyed, data were reedited by analysts for reasonableness and consistency and for compliance with instructions for sampling and questionnaire administration.

The general tape description format is Tape Position X Item X Counts. The item (field) may be a tape descriptor (e.g. Version Number), a sample person descriptor (e.g. Age at Interview), or a question (e.g. Is sample person covered by Medicare?). Where appropriate, data entries are presented by codes. Frequency counts are given for each code. The counts are included to help the user in planning analyses and in verifying that programs account for all data. The data source is given also (e.g., from Family Questionnaire). In some cases, a note is referenced. The notes contain explanations of the item (e.g. how Poverty Index is calculated).

The questionnaire data have undergone many quality control and editing procedures. The responses of sample persons to some questions may appear extreme or illogical. Self-reported data, especially, are subject to a number of sources of variability, including recall and other reporting errors. In the data clean-up process, responses that varied considerably from expected were verified through direct review of the collection form or a copy of it. Such responses may not represent fact, but they are included as recorded in the field. The user must determine if these responses should be included in analyses.

Responses to "other" and "specify" were recoded to existing categories, if possible. For responses that could not be recoded, new code categories were created if the information was deemed analytically useful. Caution should be used in interpreting the data from these new categories because there is no way of knowing which other respondents would have selected one of the new categories if given the option.

For the adult sample person questionnaires there are three codes for missing information: 7's, 8's, and blanks. In a few questions, 7's were used when the question was not applicable. A code "8", which is labeled as "blank but applicable", is used to indicate that a sample person should have a data value for a particular item but for varying reasons that value is unavailable. Blanks were used to follow skip patterns, i.e., when a question was not supposed to be asked or was not applicable. The "don't know" codes (9, 99, 999) were used only when given as a printed response on the original questionnaire.

Copies of the questionnaires, both in English and Spanish, can be found in the plan and operation report for HHANES (Ref. No. 1). Detailed information on interviewing procedures is contained in the household interviewer's manual (Ref. No. 12) and the mobile examination center interviewer's manual (Ref. No. 13). These manuals are available upon request from:

Division of Health Examination Statistics
National Center for Health Statistics
Center Building, Room 2-58
3700 East-West Highway
Hyattsville, MD 20782
301-436-7080

More information about the Diagnostic Interview Schedule (DIS) Depression Section and the Center for Epidemiologic Studies Depression Scale (CES-D) is available from:

Epidemiology and Psychopathology Research Branch
Division of Clinical Research
National Institute of Mental Health
5600 Fishers Lane, Room 10C-09
Rockville, MD 20857
301-443-3774

SECTION C. REFERENCES

1. National Center for Health Statistics: Maurer, K. R. and others: Plan and Operation of the Hispanic Health and Nutrition Examination Survey, 1982-84. Vital and Health Statistics. Series 1, No. 19. DHHS Pub. No. (PHS) 85-1321. Public Health Service. Washington. U.S. Government Printing Office. Sept., 1985.
2. National Center for Health Statistics: McCarthy, P. J.: Replication: An Approach to the Analysis of Data from Complex Surveys. Vital and Health Statistics. Series 2, No. 14. PHS Pub. No. 1000. Public Health Service. Washington. U.S. Government Printing Office. Apr., 1966.
3. Survey Research Center Computer Support Group: OSIRIS IV User's Manual, Institute for Social Research, University of Michigan, Ann Arbor, MI, 1979.
4. Holt, M. M: SURREGR: Standard Errors of Regression Coefficients from Sample Survey Data. Research Triangle Institute, Research Triangle Park, NC, 1977. (Revised Apr., 1982 by B. V. Shah).
5. Hidiroglou, M. A., Fuller, W. A., and Hickman, R. D.: SUPERCARP. Sixth Edition. Survey Section, Statistical Laboratory, Iowa State University, Ames, IA. Oct., 1980.
6. Woodruff, R. S.: A Simple Method for Approximating the Variance of a Complicated Estimate. Journal of the American Statistical Association, 66:411-414, 1971.
7. Shah, B. V.: SESUDAAN: Standard Errors Program for Computing of Standardized Rates from Sample Survey Data. RTI/5250/00-01S. Research Triangle Institute, Research Triangle Park, NC. Apr., 1981.
8. Helnig, J. T. and Council, K. A., eds.: SAS Users' Guide: Basics. SAS Institute, Inc. Cary, NC, 1982.
9. National Center for Health Statistics: Landis, J. R., Lepkowski, J. M., Eklund, S. A., and Stehouwer, S. A. A Statistical Methodology for Analyzing Data from a Complex Survey: The First National Health and Nutrition Examination Survey. Vital and Health Statistics. Series 2, No. 92. DHHS Pub. No. (PHS) 82-1366. Public Health Service. Washington. U.S. Government Printing Office. Sept., 1982.
10. Kovar, M. G. and Johnson, C.: Design Effects from the Mexican-American Portion of the Hispanic Health and Nutrition Examination Survey: A Strategy for Analysts. Proceedings of the Social Statistics Section, American Statistical Association, 1986 (in press).
11. Freeman, D. H. and Brock, D. B.: The Role of Covariance Matrix Estimation in the Analysis of Complex Sample Survey Data. In N. Krishnan Nambodiri, ed., Survey Sampling and Measurement. Symposium on Survey Sampling, 2d, University of North Carolina. New York, Academic Press, 1978.
12. National Center for Health Statistics: Instruction Manual Part 15h, Household Interviewer's Manual for the Hispanic Health and Nutrition Examination Survey, 1982-84. Hyattsville, MD, 1986.
13. National Center for Health Statistics: Instruction Manual Part 15g, Mobile Examination Center Interviewer's Manual for the Hispanic Health and Nutrition Examination Survey, 1982-84. Hyattsville, MD, 1986.

14. American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders (DSM-III), Third Edition, Washington, D.C., APA, 1980.
15. Freedman, D. X.: Psychiatric Epidemiology Counts. Arch Gen Psychiatry, 44:931-933, 1984.
16. Holzer, C. E., Eaton, W. W., Von Korff, M., Anthony, J. C., et al.: The Design of the Epidemiology Catchment Area Surveys. Arch Gen Psychiatry, 41:942-948, 1984.
17. Myers, J. K., Weissman, M. M., Tischler, G. L., Holzer, C. E., et al.: Six-month Prevalence of Psychiatric Disorders in Three Communities. Arch Gen Psychiatry, 41:959-967, 1984.
18. Regier, D. A., Myers, J. K., Kramer, M., Robins, L. N., et al.: The NIMH Epidemiologic Catchment Area Program. Arch Gen Psychiatry, 41:934-941, 1984.
19. Shapiro, S., Skinner, E. A., Kessler, L. G., Von Korff, M., et al.: Utilization of Health and Mental Health Services. Arch Gen Psychiatry, 41:971-978, 1984.
20. Robins, L. N., Helzer, J. E., Weissman, M. M., Orvaschel, H., et al.: Lifetime Prevalence of Specific Psychiatric Disorders in Three Sites. Arch Gen Psychiatry, 41:949-958, 1984.
21. Boyd, J. H., Burke, J. D., Gruenberg, E., Holzer, C. E., et al.: Exclusion Criteria of DSM-III. Arch Gen Psychiatry, 41:983-989, 1984.
22. Eaton, W. W., Kessler, L. G. (eds.): Epidemiologic Field Methods in Psychiatry: The NIMH Epidemiologic Catchment Area Program. Orlando, Florida: Academic Press, 1985.
23. Anthony, J. C., Folstein, M., Romanoski, A. J., Von Korff, M. R., et al.: Comparison of the Lay Diagnostic Interview Schedule and a Standardized Psychiatric Diagnosis. Arch Gen Psychiatry, 42:667-675, 1985.
24. Helzer, J. E., Robins, L. N., McEvoy, L. T., Spitznagel, E. L., et al.: A Comparison of Clinical and Diagnostic Interview Schedule Diagnoses. Arch Gen Psychiatry, 42:657-666, 1985.
25. Hesselbrock, V., Stabenau, J., Hesselbrock, M., Mirkin, P., et al.: A Comparison of Two Interview Schedules. Arch Gen Psychiatry, 39:674-677, 1982.
26. Klerman, G. L.: Diagnosis of Psychiatric Disorders in Epidemiologic Field Studies. Arch Gen Psychiatry, 42:723-724, 1985.
27. Robins, L. N., Helzer, J. E., Ratcliff, K. S., Seyfried, W.: Validity of the Diagnostic Interview Schedule, Version II: DSM-III Diagnoses: Psychological Medicine, 12:855-870, 1982.
28. Wittchen, H. U., Semler, G., von Zerssen, D.: A Comparison of Two Diagnostic Methods. Arch Gen Psychiatry, 42:677-684, 1985.
29. Weissman, M. M., Sholomskas, D., Pottenger, M., Prusoff, A., et al.: Assessing Depressive Symptoms in Five Psychiatric Populations: A Validation Study. Amer J of Epidemiology, 106:203-214, 1977.

30. Burnam, M. A., Karno, M., Hough, R. L., Escobar, J. I., et al.: The Spanish Diagnostic Interview Schedule. Arch Gen Psychiatry, 40:1189-1196, 1983.
31. Karno, M., Burnam, M. A., Escobar, J. I., Hough, R. L., et al.: Development of the Spanish-Language Version of the National Institute of Mental Health Diagnostic Interview Schedule: Arch Gen Psychiatry, 40:1183-1188, 1983.
32. Radloff, L.S.: The CES-D Scale: A Self-Report Depression Scale for Research in the General Population. Applied Psychological Measurement, 1:3, 385-401, 1977.
33. Radloff, L. S., Locke, B. Z.: The Community Mental Health Assessment Survey and the CES-D Scale. Community Surveys, (In press), 1985.
34. Comstock, G. W., Helsing, K. J.: Symptoms of Depression in Two Communities, Psychological Medicine, 6:551-563, 1976.
35. Craig, T. J., Van Natta, P. A.: Presence and Persistence of Depression Symptoms in Patient and Community Populations. Am J Psychiatry, 133:12, 1426-1429, 1976.
36. Clark, V. A., Aneshensel, C. S., Frerichs, R. R., Morgan, T. M.: Analysis of Effects of Sex and Age in Response to Items on the CES-D Scale. Psychiatry Research, 5:171-181, 1981.
37. Eaton, W. W., Kessler, L. G.: Rates of Symptoms of Depression in a National Sample. Amer J of Epidemiology, 114:4, 528-538, 1981.
38. Frerichs, R. R., Aneshensel, C. S., Clark, V. A.: Prevalence of Depression in Los Angeles County. Amer J of Epidemiology, 113:6, 691-699, 1981.
39. Roberts R. E., Vernon, S. W.: The Center for Epidemiologic Studies Depression Scale: Its use in a Community Sample. Am J Psychiatry, 140:1, 41-46, 1983.
40. Vernon, S. W., Roberts, R. E.: Prevalence of Treated and Untreated Psychiatric Disorders in Three Ethnic Groups. Soc Sci Med., 16:1575-1582, 1982.
41. Vernon, S. W., Roberts, R. E., Lee, E. S.: Response Tendencies, Ethnicity, and Depression Scores. Amer J of Epidemiology, 116:482-495, 1982.
42. Roberts, R. E.: Reliability of the CES-D Scale in Different Ethnic Contexts. Psychiatry Research, 2:125-133, 1980.
43. Boyd, J. H., Weissman, M. M., Thompson, W. D., Myers, J. K.: Screening for Depression in a Community Sample. Arch Gen Psychiatry, 39:1195-1200, 1982.
44. Husaini, B. A., Neff, J. A., Harrington, J. B., Hughes, M.D., et al.: Depression in Rural Communities: Validating the CES-D Scale. J of Community Psychology, 8:20-27, 1980.

SECTION D. TAPE POSITION INDEX

TAPE POSITIONS 1-400 contain data categories common to all data tapes: sociodemographic data, family composition, family income, residence and household. Sample weights are also in this set of data.

TAPE POSITIONS 401+ contain data categories unique to this data tape.

SOCIODEMOGRAPHIC DATA - SAMPLE PERSON (SECTION E)

1-5	Sample Person Sequence Number
6-15	Survey and Tape Identifiers
16	Examination Status
- 17	Language of Interview
18-21	Date of Interview
22-25	Date of Examination
26-29	Date of Birth
30-32	Age at Interview
33-38	Age at Examination
39-43	Family Number
44-45	Relationship to Head of Family
46	Sex
47	Race
48-49	National Origin or Ancestry
50-52	Birth Place
53	National Origin Recode
54-56	Education
57	Marital Status
58	Service in Armed Forces
59-69	Work/Occupation/Employment
70-95	Health Insurance/Health Care Support
96-99	Income Assistance/Public Compensation or Support

SOCIODEMOGRAPHIC DATA - HEAD OF FAMILY (SECTION F)

100	Interview and Examination Status
102-105	Date of Birth
106-108	Age at Interview
109	Sex
110	Race
111-112	National Origin or Ancestry
113-115	Birth Place
116-118	Education
119	Marital Status
120	Service in Armed Forces
121-131	Work/Occupation/Employment

FAMILY COMPOSITION AND INCOME DATA (SECTION G)

132-133	Number of People in Family
134-135	Number of Sample People in Family
136-138	Combined Family Income
139-143	Per Capita Income
144-146	Poverty Index
147-162	Income, Food Stamps

RESIDENCE AND HOUSEHOLD DATA (SECTION H)

163	Size of Place
164	Standard Metropolitan Statistical Area
165-166	Number of People in Household
167-168	Number of Sample People in Household
169-170	Number of Rooms
171	Kitchen Facilities Access
172-183	Heating/Cooling Equipment

SAMPLE WEIGHTS (SECTION I)

184-189	Examination Final Weight
190-195	Interview Final Weight
196-201	GTT/Ultrasound Weight
202-207	Audiometry/Vision Weight
208-213	Pesticide Weight
214-215	Strata Code
216	Pseudo PSU Code

FAMILY RELATIONSHIPS (SECTION J)

218-400	Data not yet available
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DEPRESSION DATA (SECTION K)

401-404	Tape Number
411	Measures of Depression Subset Identifier
414-416	Interviewer Number
417	Language of Interview
420-480	Diagnostic Interview Schedule (DIS) Items
481	Diagnostic Variable for Major Depressive Episode
486-505	Center for Epidemiologic Studies Depression Scale (CES-D) Items
506-510	CES-D Total Score
511	CES-D Caseness Score

Position	Item description and code	Counts			Source and notes
		M	C	P	
SECTION E. SOCIODEMOGRAPHIC DATA - SAMPLE PERSON (POS 1-99)					
Source: Family Questionnaire (FQ) Household Screener Questionnaire (HSQ)					
1-5	Sample person sequence number				
	00001-09894 Mexican Americans	7462	-	-	
	10002-12238 Cuban Americans	-	1357	-	
	13001-16785 Puerto Ricans	-	-	2834	
6-12	Blank				
13	Portion of survey				
	1 Mexican-American (M)	7462	-	-	
	2 Cuban-American (C)	-	1357	-	
	3 Puerto Rican (P)	-	-	2834	
14	Family Questionnaire missing				
	1 Yes	21	6	10	See Note 1
	2 No	7441	1351	2824	
15	Version number				
	2	7462	1357	2834	
16	Examination status				
	1 Examined	7462	1357	2834	See Note 2
	2 Not examined	0	0	0	
17	Language of interview (Pos. 1-400)				FQ
	1 English	4513	244	1229	
	2 Spanish	2929	1107	1595	
	Blank	20	6	10	
18-19	Date of interview				HSQ 4
	01-12 Month	7462	1357	2834	
20-21	82-84 Year	7462	1357	2834	
22-23	Date of examination				
	From survey control record				
	01-12 Month	7462	1357	2834	
24-25	82-84 Year	7462	1357	2834	
26-27	Date of birth				HSQ 2e
	01-12 Month	7462	1357	2834	
	88 Blank but applicable	0	0	0	
28-29	Date of birth				
	08-84 Year	7462	1357	2834	
	88 Blank but applicable	0	0	0	
30-31	Age at interview (computed)				
	01-74 (See next column for units)	7462	1357	2834	
32	Age at interview units				HSQ 2f
	1 Years	7342	1349	2796	
	2 Months	120	8	38	

Position	Item description and code	M	Counts C	P	Source and notes
	Age at examination (computed) Positions 33-38 are all 0 for non-examined persons.				
33-34	00-75 Years	7462	1357	2834	
35-36	00-11 Months	7462	1357	2834	
37-38	00-30 Days	7462	1357	2834	
39-43	Family number				See Note 3
	00002-03529	7462	-	-	
	04005-04922	-	1357	-	
	07001-08584	-	-	2834	
44-45	What is sample person's relationship to head of family? Sample person is:				HSQ 2b See Note 4
	01 Head of family living alone (1 family with only 1 member)	145	56	113	
	02 Head of family, with no related persons in household (2+ persons in household)	76	23	24	
	03 Head of family, with related persons in household	1582	369	678	
	04 Wife of head (husband living at home and not in Armed Forces)	1299	300	296	
	05 Wife of head (husband living at home and is in Armed Forces)	5	0	0	
	06 Husband of head (wife living at home and not in Armed Forces)	35	12	37	
	07 Husband of head (wife living at home and is in Armed Forces)	0	0	0	
	08 Child of head or head's spouse	3769	484	1437	
	09 Grandchild of head or head's spouse	217	32	115	
	10 Parent of head or head's spouse	57	35	33	
	11 Other relative (includes ex-spouse, daughter-in-law, etc.)	273	46	101	
	12 Foster child	4	0	0	
46	Sex				FQ B-4
	1 Male	3516	636	1237	
	2 Female	3946	721	1597	
47	Observed race				FQ B-5 See Note 5
	1 White	7213	1300	2462	
	2 Black	76	15	152	
	3 Other	8	3	73	
	8 Blank but applicable	72	15	59	
	9 Not observed	72	18	78	
	Blank	21	6	10	
48-49	Sample person's national origin or ancestry.				HSQ 2c See Note 6
	01 Mexican/Mexicano	1641	1	1	
	02 Mexican-American	5202	0	0	
	03 Chicano	102	0	0	
	04 Puerto Rican	7	3	2596	
	05 Boricuan	0	0	36	
	06 Cuban	4	1069	20	
	07 Cuban-American	0	222	0	
	08 Hispano - specify	150	14	26	
	09 Other Latin-American or other Spanish - specify	37	18	41	
	00 Other - specify	276	30	114	
	10 Spanish-American	22	0	0	
	11 Spanish (Spain)	21	0	0	

Position	Item description and code	M	Counts C	P	Source and notes
50-52	In what state or foreign country was sample person born?				FQ B-6 See Note 7
	001-118 State/country code	7403	1345	2771	
	888 Blank but applicable	38	6	53	
	Blank	21	6	10	
53	National origin recode "Hispanic" = Mexican-American in Southwest, Cuban-American in Florida and Puerto Rican in New York City area.				See Note 8
	1 "Hispanic"	7197	1291	2645	
	2 Not "Hispanic"	265	66	189	
54-55	What is the highest grade or year of regular school sample person has ever attended?				FQ B-7
	00 Never attended or kindergarten only	1476	116	446	
	01-08 Elementary grade	3118	556	1090	
	09-12 High school grade	2119	400	1011	
	13-16 College	581	243	225	
	17 Graduate school	70	30	14	
	88 Blank but applicable	77	6	38	
	Blank	21	6	10	
56	Did sample person finish that grade/year?				FQ B-8
	1 Yes	3938	853	1436	
	2 No	1934	368	861	
	8 Blank but applicable	93	14	81	
	Blank	1497	122	456	
57	Is sample person now married, widowed, divorced, separated or has he or she never been married?				FQ B-9
	0 Under 14 years of age	2953	297	1000	
	1 Married - spouse in household	2600	632	660	
	2 Married - spouse not in household	70	17	54	
	3 Widowed	161	50	66	
	4 Divorced	214	92	155	
	5 Separated	159	21	149	
	6 Never married	1265	241	730	
	8 Blank but applicable	19	1	10	
	Blank	21	6	10	
58	Did sample person ever serve in the Armed Forces of the United States?				FQ B-11
	1 Yes	416	27	145	
	2 No	3557	952	1409	
	8 Blank but applicable	7	3	14	
	Blank	3482	375	1266	
59	During the past 2 weeks, did sample person work at any time at a job or business, not counting work around the house?				FQ B-12
	1 Yes	2210	622	613	
	2 No	1751	349	930	
	8 Blank but applicable	19	11	25	
	Blank	3482	375	1266	

Position	Item description and code	M	Counts C	P	Source and notes
60	Even though sample person did not work during those 2 weeks, did he or she have a job or business?				FQ B-13
	1 Yes	46	13	23	
	2 No	1704	334	902	
	8 Blank but applicable	20	13	30	
	Blank	5692	997	1879	
61	Was sample person looking for work or on layoff from a job?				FQ B-14
	1 Yes	217	43	60	
	2 No	1533	304	865	
	8 Blank but applicable	20	13	30	
	Blank	5692	997	1879	
62	Which, looking for work or on layoff from a job or both?				FQ B-15
	1 Looking	146	34	44	
	2 Layoff	46	6	8	
	3 Both	23	2	7	
	8 Blank but applicable	22	14	31	
	Blank	7225	1301	2744	
63-65	What kind of business or industry does sample person work for?				FQ B-19 See Note 9
	010-932 Industry code	2429	665	681	
	990 Blank but applicable	49	18	37	
	Blank	4984	674	2116	
66-68	What kind of work was sample person doing?				FQ B-20 See Note 9
	003-889 Occupation code	2432	666	681	
	999 Blank but applicable	46	17	37	
	Blank	4984	674	2116	
69	Class of worker				FQ B-22
	1 An employee of a private company, business or individual for wages, salary, or commission	1912	543	551	
	2 A Federal government employee	74	6	21	
	3 A State government employee	124	19	17	
	4 A Local government employee	169	17	56	
	5 Self-employed in own incorporated business or professional practice	17	12	7	
	6 Self-employed in own unincorporated business, professional practice, or farm	131	67	27	
	7 Working without pay in family business or farm	3	0	0	
	8 Blank but applicable	46	18	38	
	0 Never worked or never worked at a full-time civilian job lasting 2 weeks or more	2	1	1	
	Blank	4984	674	2116	
70	Is sample person now covered by Medicare?				FQ C-2
	1 Covered	303	107	139	
	2 Not covered	7129	1237	2674	
	8 Blank but applicable	6	6	11	
	9 Don't know	3	1	0	
	Blank	21	6	10	

Position	Item description and code	M	Counts C	P	Source and notes
71	Is sample person now covered by the part of Social Security Medicare which pays for hospital bills?				FQ C-3
	1 Yes	270	100	124	
	2 No	18	4	5	
	8 Blank but applicable	15	6	20	
	9 Don't know	6	3	1	
	Blank	7153	1244	2684	
72	Is sample person now covered by that part of Medicare which pays for doctor's bills? This is the Medicare plan for which he or she or some agency must pay a certain amount each month.				FQ C-4
	1 Yes	269	100	111	
	2 No	17	5	17	
	8 Blank but applicable	15	6	20	
	9 Don't know	8	2	2	
	Blank	7153	1244	2684	
73	Type of Medicare coverage As shown on Medicare card				FQ C-5
	1 Hospital	0	0	0	
	2 Medical	2	0	0	
	3 Card not available	3	0	2	
	4 Hospital and medical	5	3	0	
	8 Blank but applicable	15	6	20	
	Blank	7437	1348	2812	
	HEALTH INSURANCE				See Note 10
74	Is sample person covered by any health insurance plan which pays any part of a hospital, doctor's, or surgeon's bill?				FQ C-11
	1 Yes	4094	818	1011	
	2 No	3326	526	1796	
	8 Blank but applicable	13	7	16	
	9 Don't know	8	0	1	
	Blank	21	6	10	
75	Is sample person covered by a plan that pays any part of hospital expenses?				FQ C-9
	1 Yes	4039	806	955	
	2 No	6	7	9	
	8 Blank but applicable	54	12	55	
	9 Don't know	8	0	8	
	Blank	3355	532	1807	
76	Is sample person covered by a plan that pays any part of a doctor's or surgeon's bills for operations?				FQ C-10
	1 Yes	4034	804	945	
	2 No	22	11	28	
	8 Blank but applicable	36	10	35	
	9 Don't know	15	0	19	
	Blank	3355	532	1807	

Position	Item description and code	M	Counts C	P	Source and notes
	Many people do not carry health insurance for various reasons. Which of these statements describes why sample person is not covered by any health insurance (or Medicare)? (Positions 77-80)				FQ C-13/15 See Note 10
77-78	Main reason				
	01 Care received through Medicaid or welfare	267	31	854	
	02 Unemployed, or reasons related to unemployment	350	40	114	
	03 Can't obtain insurance because of poor health, illness, or age	24	2	15	
	04 Too expensive, can't afford health insurance	1767	280	506	
	05 Dissatisfied with previous insurance	50	3	3	
	06 Don't believe in insurance	31	4	8	
	07 Have been healthy, not much sickness in the family, haven't needed health insurance	206	23	31	
	08 Military dependent, (CHAMPUS), Veteran's benefits	45	1	15	
	09 Some other reason - not specified	2	0	7	
	10 Some other reason - specified	255	35	58	
	88 Blank but applicable	118	34	77	
	Blank	4347	904	1146	
79-80	Second reason				
	00 No second reason reported	2573	339	1374	
	01 Care received through Medicaid or welfare	70	17	58	
	02 Unemployed, or reasons related to unemployment	109	30	30	
	03 Can't obtain insurance because of poor health, illness, or age	4	2	3	
	04 Too expensive, can't afford health insurance	168	20	132	
	05 Dissatisfied with previous insurance	15	1	2	
	06 Don't believe in insurance	18	3	3	
	07 Have been healthy, not much sickness in the family, haven't needed health insurance	47	4	8	
	08 Military dependent, (CHAMPUS), Veteran's benefits	0	0	2	
	09 Some other reason - not specified	0	0	0	
	10 Some other reason - specified	25	8	7	
	88 Blank but applicable	86	29	69	
	Blank	4347	904	1146	
81-87	Blank				
88	During the last 12 months, has sample person received health care which has been or will be paid for by Medicaid?				FQ D-6
	1 Yes	537	101	1076	
	2 No	6859	1242	1708	
	8 Blank but applicable	45	7	40	
	9 Don't know	0	1	0	
	Blank	21	6	10	

Position	Item description and code	M	Counts C	P	Source and notes
89	Does sample person have a Medicaid card?				FQ D-8
	1 Yes	530	104	1144	
	2 No	6872	1232	1647	
	8 Blank but applicable	39	15	33	
	9 Don't know	0	0	0	
	Blank	21	6	10	
90	Status of sample person's Medicaid card?				FQ D-9
	1 Medicaid card seen - current	382	84	832	
	2 Medicaid card seen - expired	7	0	12	
	3 No card seen	128	17	274	
	4 Other card seen	0	0	0	
	5 Other card seen (specify)	5	0	2	
	8 Blank but applicable	47	18	57	
	Blank	6893	1238	1657	
91	Is sample person now covered by any other public assistance program that pays for health care?				FQ D-11
	1 Yes	54	2	29	
	2 No	7376	1348	2780	
	8 Blank but applicable	11	1	15	
	9 Don't know	0	0	0	
	Blank	21	6	10	
92	Does sample person now receive military retirement payments from any branch of the Armed Forces or a pension from the Veteran's Administration? Do not include VA disability compensation.				FQ D-13
	1 Yes	56	4	9	
	2 No	7373	1346	2806	
	8 Blank but applicable	12	1	9	
	9 Don't know	0	0	0	
	Blank	21	6	10	
93	Which does sample person receive; the Armed Forces retirement, the VA pension, or both?				FQ D-14
	1 Armed Forces	16	0	2	
	2 Veteran's Administration	30	0	5	
	3 Both	4	4	1	
	8 Blank but applicable	18	1	10	
	Blank	7394	1352	2816	
94	Is sample person now covered by CHAMP-VA, which is medical insurance for dependents or survivors of disabled veterans?				FQ D-16
	1 Yes	45	4	10	
	2 No	7388	1346	2808	
	8 Blank but applicable	8	1	6	
	9 Don't know	0	0	0	
	Blank	21	6	10	
95	Is sample person now covered by any other program that provides health care for military dependents or survivors of military persons?				FQ D-18
	1 Yes	41	4	8	
	2 No	7387	1346	2804	
	8 Blank but applicable	13	1	12	
	9 Don't know	0	0	0	
	Blank	21	6	10	

Position	Item description and code	M	Counts C	P	Source and notes
96	Is sample person included in the AFDC, "Aid to Families with Dependent Children", assistance payment?				FQ D-2
	1 Yes	394	39	650	
	2 No	7020	1304	2134	
	8 Blank but applicable	27	6	39	
	9 Don't know	0	2	1	
	Blank	21	6	10	
97	Does sample person now receive the "Supplemental Security Income" or "SSI" gold-colored check?				FQ D-4
	1 Yes	131	44	135	
	2 No	7285	1295	2659	
	8 Blank but applicable	25	12	30	
	9 Don't know	0	0	0	
	Blank	21	6	10	
98	Does sample person have a disability related to his or her service in the Armed Forces of the United States?				FQ D-20
	1 Yes	48	2	14	
	2 No	346	20	108	
	8 Blank but applicable	29	8	37	
	Blank	7039	1327	2675	
99	Does sample person now receive compensation for this disability from the Veteran's Administration?				FQ D-21
	1 Yes	31	1	9	
	2 No	17	1	4	
	8 Blank but applicable	29	8	38	
	Blank	7385	1347	2783	

Position	Item description and code	Counts			Source and notes
		M	C	P	
SECTION F. SOCIODEMOGRAPHIC DATA - HEAD OF FAMILY (POS 100-131)					
Source: Family Questionnaire (FQ) Household Screener Questionnaire (HSQ)					
100	Interview and examination status of head of family				See Note 4
	1 Selected as sample person, interviewed on Adult Sample Person Questionnaire, and examined	5523	1076	2098	
	2 Selected as sample person, interviewed on Adult Sample Person Questionnaire, but not examined	338	62	79	
	3 Selected as sample person, not interviewed, and not examined	218	34	23	
	4 Not selected as sample person	1362	179	624	
	Blank	21	6	10	
101	Blank				
	Date of birth				HSQ 2e
102-103	01-12 Month	7413	1348	2830	
	88 Blank but applicable	49	9	4	
104-105	00-86, 89-99 Year	7440	1353	2832	
	88 Blank but applicable	22	4	2	
106-107	Age at interview 17-95 Years	7462	1357	2834	
108	Blank				
109	Sex				FQ B-4
	1 Male	5922	1069	1331	
	2 Female	1460	282	1493	
	Blank	20	6	10	
110	Observed race				FQ B-5 See Note 5
	1 White	7138	1282	2511	
	2 Black	75	27	165	
	3 Other	6	3	58	
	8 Blank but applicable	106	31	59	
	9 Not observed	117	8	31	
	Blank	20	6	10	
111-112	Head of family's national origin or ancestry.				HSQ 2c See Note 6
	01 Mexican/Mexicano	2068	0	3	
	02 Mexican-American	4523	0	0	
	03 Chicano	97	0	0	
	04 Puerto Rican	19	7	2503	
	05 Boricuan	0	0	29	
	06 Cuban	6	1197	46	
	07 Cuban-American	0	85	2	
	08 Hispano - specify	147	20	37	
	09 Other Latin-American or other Spanish - specify	54	17	39	
	00 Other - specify	513	31	175	
	10 Spanish-American	17	0	0	
	11 Spanish (Spain)	18	0	0	

Position	Item description and code	Counts			Source and notes
		M	C	P	
113-115	In what state or foreign country was head of family born?				FQ B-6 See Note 7
	001-118 State/country code	7362	1331	2762	
	888 Blank but applicable	80	20	62	
	Blank	20	6	10	
116-117	What is the highest grade or year of regular school head of family has ever attended?				FQ B-7
	00 Never attended or kindergarten only	250	7	35	
	01-08 Elementary grade	2959	511	889	
	09-12 High school grade	2896	411	1445	
	13-16 College	1002	336	363	
	17 Graduate school	170	57	41	
	88 Blank but applicable	165	29	51	
	Blank	20	6	10	
118	Did head of family finish that grade/year?				FQ B-8
	1 Yes	5710	1171	2210	
	2 No	1316	137	492	
	8 Blank but applicable	166	36	87	
	Blank	270	13	45	
119	Is the head of family now married, widowed, divorced, separated or has he or she never been married?				FQ B-9
	0 Under 14	0	0	0	
	1 Married - spouse in household	5706	1059	1295	
	2 Married - spouse not in household	129	9	129	
	3 Widowed	333	48	133	
	4 Divorced	492	136	376	
	5 Separated	388	28	452	
	6 Never married	320	56	418	
	8 Blank but applicable	74	15	21	
	Blank	20	6	10	
120	Did head of family ever serve in the Armed Forces of the United States?				FQ B-11
	1 Yes	1478	64	383	
	2 No	5883	1265	2400	
	8 Blank but applicable	81	22	41	
	Blank	20	6	10	
121	During the past 2 weeks, did head of family work at any time at a job or business, not counting work around the house?				FQ B-12
	1 Yes	5443	1019	1283	
	2 No	1923	305	1504	
	8 Blank but applicable	76	27	37	
	Blank	20	6	10	
122	Even though head of family did not work during those 2 weeks, did he or she have a job or business?				FQ B-13
	1 Yes	101	19	28	
	2 No	1822	286	1476	
	8 Blank but applicable	76	27	37	
	Blank	5463	1025	1293	

Position	Item description and code	M	Counts C	P	Source and notes
123	Was head of family looking for work or on layoff from a job?				FQ B-14
	1 Yes	510	61	118	
	2 No	1413	244	1384	
	8 Blank but applicable	76	27	39	
	Blank	5463	1025	1293	
124	Which, looking for work or on layoff from a job or both?				FQ B-15
	1 Looking	270	43	69	
	2 Layoff	151	12	26	
	3 Both	85	3	17	
	8 Blank but applicable	80	30	45	
	Blank	6876	1269	2677	
125-127	What kind of business or industry does head of family work for?				FQ B-19 See Note 9
	010-932 Industry code	5980	1080	1395	
	990 Blank but applicable	118	28	62	
	Blank	1364	249	1377	
128-130	What kind of work was head of family doing?				FQ B-20 See Note 9
	003-889 Occupation code	5988	1080	1391	
	999 Blank but applicable	110	28	66	
	Blank	1364	249	1377	
131	Class of worker				FQ B-22
	1 Employee of a private company, business or individual for wages, salary, or commission	4702	842	1058	
	2 A Federal government employee	219	4	45	
	3 A State government employee	246	12	54	
	4 A Local government employee	359	22	169	
	5 Self-employed in own incorporated business or professional practice	49	25	14	
	6 Self-employed in own unincorporated business, professional practice, or farm	420	171	56	
	7 Working without pay in family business or farm	0	0	0	
	8 Blank but applicable	99	32	60	
	0 Never worked or never worked at a full-time civilian job lasting 2 weeks or more	4	0	1	
	Blank	1364	249	1377	

Position	Item description and code	M	Counts C	P	Source and notes
SECTION G. FAMILY COMPOSITION AND INCOME DATA (POS 132-162)					
Source: Family Questionnaire (FQ)					
132-133	Number of persons in family (computed) 01-18 Persons	7462	1357	2834	
134-135	Number of sample persons in family (computed) 01-13 Persons	7462	1357	2834	
136	Was the total combined family income during the past 12 months more or less than \$20,000? Include money from jobs, Social Security, retirement income, unemployment payments, public assistance, and so forth. Also include income net from interest, dividends, income from business, farm or rent, and any other money income received.				FQ E-10
	1 \$20,000 or more	2353	536	578	
	2 Less than \$20,000	4856	795	2193	
	7 Refused information	31	1	7	
	8 Blank but applicable	202	19	46	
	Blank	20	6	10	
137-138	Of those income groups, which best represents the total combined family income during the past 12 months? Include wages, salaries, and other items we just talked about. (in dollars)				FQ E-11
	01 Less than 1,000	40	8	7	
	02 1,000 - 1,999	107	10	33	
	03 2,000 - 2,999	143	25	68	
	04 3,000 - 3,999	182	28	132	
	05 4,000 - 4,999	184	34	250	
	06 5,000 - 5,999	234	45	202	
	07 6,000 - 6,999	312	35	213	
	08 7,000 - 7,999	314	46	169	
	09 8,000 - 8,999	284	42	106	
	10 9,000 - 9,999	263	52	125	
	11 10,000 - 10,999	282	72	139	
	12 11,000 - 11,999	250	47	75	
	13 12,000 - 12,999	296	54	100	
	14 13,000 - 13,999	186	32	64	
	15 14,000 - 14,999	254	25	66	
	16 15,000 - 15,999	208	36	77	
	17 16,000 - 16,999	209	34	51	
	18 17,000 - 17,999	231	37	66	
	19 18,000 - 18,999	333	28	82	
	20 19,000 - 19,999	240	55	79	
	21 20,000 - 24,999	694	148	152	
	22 25,000 - 29,999	585	89	124	
	23 30,000 - 34,999	358	78	92	
	24 35,000 - 39,999	257	64	43	
	25 40,000 - 44,999	192	48	36	
	26 45,000 - 49,999	84	43	30	
	27 50,000 and over	107	55	54	
	77 Refused information	76	10	43	
	88 Blank but applicable	537	77	146	
	Blank	20	6	10	

Position	Item description and code	Counts			Source and notes
		M	C	P	
139-143	Per capita income (computed) 00083-50000 Dollars 88888 Blank but applicable Blank	6829 613 20	1264 87 6	2636 189 9	See Note 11
144-146	Poverty index (computed) Decimal not shown on tape. 0.04-9.78 999 Blank but applicable Blank	6829 613 20	1264 87 6	2636 189 9	See Note 12
147	Did any member of this family receive any Government food stamps in any of the past 12 months? 1 Yes 2 No 8 Blank but applicable Blank	1651 5783 8 20	234 1115 2 6	1344 1474 6 10	FQ E-12
148-149	In how many months of the past 12 months did any member of this family receive food stamps? 01-12 Months 88 Blank but applicable Blank	1631 28 5803	234 2 1121	1335 15 1484	FQ E-13
150	Did this family receive any government food stamps last month? 1 Yes 2 No 8 Blank but applicable Blank	1345 303 11 5803	187 47 2 1121	1290 50 10 1484	FQ E-14
151-152	In which month did any member of this family last receive food stamps? 01-12 Month 88 Blank but applicable Blank	298 16 7148	47 2 1308	50 10 2774	FQ E-15
153-154	For how many persons were those food stamps authorized? 01-13 Persons 88 Blank but applicable Blank	1641 18 5803	234 2 1121	1337 13 1484	FQ E-16
155-157	What was the total face value of those food stamps received by this family in that month? 010-520 Dollars 888 Blank but applicable Blank	1567 92 5803	230 6 1121	1325 25 1484	FQ E-17
158	Did this family spend more for food in that month than the value of your food stamps? 1 Yes 2 No 8 Blank but applicable Blank	1405 231 23 5803	194 40 2 1121	1279 64 7 1484	FQ E-18

Position	Item description and code	M	Counts C	P	Source and notes
159-161	How much more?				FQ E-19
	003-880 Dollars	1314	182	1258	
	888 Blank but applicable	114	14	28	
	Blank	6034	1161	1548	
162	Is your family receiving food stamps at the present time?				FQ E-20
	1 Yes	1273	175	1269	
	2 No	6153	1171	1542	
	8 Blank but applicable	16	5	13	
	Blank	20	6	10	

Position	Item description and code	Counts			Source and notes
		M	C	P	

SECTION H. RESIDENCE AND HOUSEHOLD DATA (POS 163-183)

Source: Family Questionnaire (FQ)
Household Screener Questionnaire (HSQ)

163	Size of place				See Note 13
	1 1 million or more	1049	0	2070	
	2 500,000 - 999,999	844	0	0	
	3 250,000 - 499,999	884	467	0	
	4 100,000 - 249,999	203	364	368	
	5 50,000 - 99,999	1277	70	76	
	6 25,000 - 49,999	785	205	216	
	7 10,000 - 24,999	746	120	79	
	8 200 - 9,999	1003	88	24	
	9 Not in a place	671	43	1	
164	Standard Metropolitan Statistical Area				See Note 13
	1 In SMSA, in central city	3707	467	2465	
	2 In SMSA, not in central city	2854	890	369	
	4 Not in SMSA	901	0	0	
165-166	Number of persons in household				HSQ 1a
	01-18 Persons	7462	1357	2834	
167-168	Number of sample persons in household (computed)				
	01-13 Persons	7462	1357	2834	
169-170	How many rooms are in this home? Count the kitchen, but not the bathroom.				FQ E-1
	01-14 Rooms	7433	1350	2816	
	88 Blank but applicable	9	1	8	
	Blank	20	6	10	
171	Do you have access to complete kitchen facilities in this home; that is, a kitchen sink with piped water, a refrigerator and a range or cookstove?				FQ E-2
	1 Yes	7136	1315	2548	
	2 No	83	10	18	
	8 Blank but applicable	223	26	258	
	Blank	20	6	10	
172-173	What is the main fuel used for heating this home?				FQ E-3 See Note 14
	00 No fuel used	538	231	16	
	01 Oil	4	0	1988	
	02 Natural gas	5955	78	718	
	03 Electricity	604	1027	37	
	04 Bottled gas (propane)	174	2	0	
	05 Kerosene	13	3	0	
	06 Wood	98	3	0	
	07 Coal	0	0	14	
	08 Other, not specified	0	0	2	
	09 Other, specified	11	0	8	
	88 Blank but applicable	45	7	41	
	Blank	20	6	10	

Position	Item description and code	M	Counts C	P	Source and notes
174-175	What is the main heating equipment for this home?				FQ E-4 See Note 14
	00 No heating equipment used	538	231	20	
	01 Steam or hot water with radiators or convectors	44	5	1450	
	02 Central warm air furnace with ducts to individual rooms, or central heat pump	2677	542	180	
	03 Built-in electric units (permanently installed in wall, ceiling, or baseboard)	474	323	63	
	04 Floor, wall or pipeless furnace	1598	46	21	
	05 Room heaters <u>with</u> flue or vent, burning oil, gas, or kerosene	805	17	596	
	06 Room heaters <u>without</u> flue or vent, burning oil, gas, or kerosene	847	6	425	
	07 Heating stove burning wood, coal or coke	88	0	9	
	08 Fireplace(s)	91	4	0	
	09 Portable electric heater(s)	139	137	4	
	10 Other, not specified	0	0	0	
	11 Other, specified	114	35	16	
	88 Blank but applicable	1	5	23	
	99 Don't know	26	0	17	
	Blank	20	6	10	
176-177	Are any other types of equipment used for heating this home?				FQ E-5 See Note 14
	00 No other heating equipment used	6057	1073	2350	
	01 Steam or hot water with radiators or convectors	0	0	13	
	02 Central warm air furnace with ducts to individual rooms, or central heat pump	11	15	7	
	03 Built-in electric units (permanently installed in wall, ceiling, or baseboard)	24	0	2	
	04 Floor, wall or pipeless furnace	11	0	0	
	05 Room heaters <u>with</u> flue or vent, burning oil, gas, or kerosene	22	0	3	
	06 Room heaters <u>without</u> flue or vent, burning oil, gas, or kerosene	22	1	29	
	07 Heating stove burning wood, coal or coke	70	0	8	
	08 Fireplace(s)	449	8	9	
	09 Portable electric heater(s)	186	18	351	
	10 Other, not specified	4	2	3	
	11 Other, specified	18	2	4	
	88 Blank but applicable	30	1	25	
	Blank	558	237	30	
178-179	What is the main fuel used by this additional equipment?				FQ E-6 See Note 14
	00 No fuel used	2	0	2	
	01 Oil	0	0	20	
	02 Natural gas	96	2	27	
	03 Electricity	214	35	345	
	04 Bottled gas (propane)	9	0	1	
	05 Kerosene	2	0	25	
	06 Wood	471	8	11	
	07 Coal	2	0	0	
	08 Other, not specified	0	0	0	
	09 Other, specified	7	0	0	
	88 Blank but applicable	44	2	23	
	Blank	6615	1310	2380	

Position	Item description and code	Counts			Source and notes
		M	C	P	
180-181	What is the main fuel used for cooking in this home?				FQ E-7
	00 No fuel used	21	4	4	
	01 Oil	14	0	31	
	02 Natural gas	5899	253	2603	
	03 Electricity	1295	1083	148	
	04 Bottled gas (propane)	182	8	12	
	05 Kerosene	0	0	3	
	06 Wood	0	0	0	
	07 Coal	0	0	0	
	08 Other, not specified	0	0	0	
	09 Other, specified	14	1	0	
	88 Blank but applicable	17	2	23	
	Blank	20	6	10	
182	Do you have air-conditioning - either individual room units, a central system or evaporative cooling?				FQ E-8
	1 Yes	3583	1254	653	
	2 No	3845	96	2153	
	8 Blank but applicable	14	1	18	
	Blank	20	6	10	
183	Which do you have?				FQ E-9
	1 Individual room unit	1625	583	613	
	2 Central air-conditioning	1233	660	22	
	3 Evaporative cooling	719	6	10	
	8 Blank but applicable	20	6	26	
	Blank	3865	102	2163	

Position	Item description and code	M	Counts C	P	Source and notes
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SECTION I. SAMPLE WEIGHTS (POS 184-217)

184-189	Examined final weight				
	000439-002711	7462	-	-	
	000223-000891	-	1357	-	
	000177-002000	-	-	2834	

190-195	Interview final weight				
	000447-002096	7462	-	-	
	000176-000604	-	1357	-	
	000175-001220	-	-	2834	

GTT/ULTRASOUND, AUDIOMETRY/VISION, PESTICIDE WEIGHTS

By design, only some of the persons in the sample were included in the GTT/ultrasound, audiometry/vision, and pesticide components of the survey. Tape positions for those persons not part of these subsamples are BLANK.

196-201	GTT/ultrasound weight				
	000843-005302	1777	-	-	
	000469-001685	-	449	-	
	000349-003110	-	-	667	
	Blank	5685	908	2167	

202-207	Audiometry/vision weight				
	000507-006283	4431	-	-	
	000223-001600	-	804	-	
	000264-003123	-	-	1759	
	Blank	3031	553	1075	

208-213	Pesticide weight				
	000872-005584	2465	-	-	
	000441-001600	-	568	-	
	000343-003117	-	-	1012	
	Blank	4997	789	1822	

214-215	Strata code				
	01-08	7462	1357	2834	

216-217	Pseudo PSU code				
	01-02	7462	1357	2834	

Position	Item description and code	M	Counts C	P	Source and notes
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SECTION J. FAMILY RELATIONSHIPS (POS 218-400)

Source: Adult Sample Person Questionnaire
Family Questionnaire

218-400 **Blank**
Data not yet available.

Position	Item description and code	M	Counts C	P	Source and notes
SECTION K. NIMH DIAGNOSTIC INTERVIEW SCHEDULE (DIS) DEPRESSION					
SECTION (POS 401-485)					
Source: Adult Sample Person Supplement (ASPS) (Ages 20 - 74 Years)					
401-404	Tape Number 6523	7462	1357	2834	
405-410	Blank	7462	1357	2834	
411	Measures of Depression Subset Identifier				See Note 15
	1 No depression data obtained	10	8	11	
	2 Depression data obtained	3545	899	1342	
	Blank Age less than 20 years	3907	450	1481	
412-413	Blank	7462	1357	2834	
414-416	Interviewer number				
	240-890	3544	902	1342	
	888 Blank, but applicable	11	0	1	
	Blank	3907	455	1491	
417	Language of interview (Positions 420-511) Adult Sample Person Supplement				ASPS
	1 English	2029	100	504	
	2 Spanish	1516	802	839	
	8 Blank, but applicable	10	0	0	
	Blank	3907	455	1491	
418-419	Blank	7462	1357	2834	
420	In your lifetime, have you ever had two weeks or more during which you felt sad, blue, depressed or when you lost all interest and pleasure in things that you usually cared about or enjoyed?				ASPS F2
	1 Yes	1444	513	749	
	2 No	2087	384	592	
	8 Blank, but applicable	24	10	12	
	Blank	3907	450	1481	
421	Has there ever been a period of two weeks or longer when you <u>lost your appetite</u>?				ASPS F3 See Note 16
	1 No	2920	712	941	
	3 Result of drugs, alcohol or medication	60	8	32	
	4 Result of physical illness or injury	173	39	133	
	5 Yes	386	139	232	
	8 Blank, but applicable	16	9	15	
	Blank	3907	450	1481	

Position	Item description and code	M	Counts C	P	Source and notes
422	Have you ever <u>lost weight</u> without trying to - as much as two pounds a week for several weeks (or as much as ten pounds altogether)?				ASPS F4 See Note 16
	1 No	2840	757	942	
	3 Result of drugs, alcohol or medication	59	4	25	
	4 Result of physical illness or injury	225	50	162	
	5 Yes	418	88	209	
	8 Blank, but applicable	19	8	15	
	Blank	3907	450	1481	
423	Have you ever had a period when your eating increased so much that you <u>gained</u> as much as two pounds a week for several weeks (or ten pounds altogether)?				ASPS F5 See Note 16
	1 No	3007	799	1036	
	3 Result of drugs, alcohol or medication	44	7	40	
	4 Result of physical illness or injury	69	12	75	
	5 Yes	413	81	183	
	8 Blank, but applicable	22	8	19	
	Blank	3907	450	1481	
424	Appetite summary				See Notes 16 and 17
	1 Code '5' in F3, F4, or F5	900	237	400	
	8 Blank, but applicable	14	8	15	
	Blank	6548	1112	2419	
425	Have you ever had a period of two weeks or more when you had <u>trouble falling asleep</u>, staying asleep or waking up too early?				ASPS F6 See Note 16
	1 No	2759	660	895	
	3 Result of drugs, alcohol or medication	59	5	24	
	4 Result of physical illness or injury	127	29	115	
	5 Yes	594	204	304	
	8 Blank, but applicable	16	9	15	
	Blank	3907	405	1481	
426	Have you ever had a period of two weeks or longer when you were <u>sleeping too much</u>?				ASPS F7 See Note 16
	1 No	3163	838	1176	
	3 Result of drugs, alcohol or medication	41	6	17	
	4 Result of physical illness or injury	108	21	63	
	5 Yes	221	34	82	
	8 Blank, but applicable	22	8	15	
	Blank	3907	450	1481	
427	Sleep summary				See Notes 16 and 17
	1 Code '5' in F6 or F7	719	221	339	
	8 Blank, but applicable	17	8	15	
	Blank	6726	1128	2480	
428	Has there ever been a period lasting two weeks or more when you felt <u>tired out</u> all the time?				ASPS F8 See Note 16
	1 No	2559	710	860	
	3 Result of drugs, alcohol or medication	80	4	23	
	4 Result of physical illness or injury	342	78	251	
	5 Yes	549	105	200	
	8 Blank, but applicable	25	10	19	
	Blank	3907	450	1481	

Position	Item description and code	Counts			Source and notes
		M	C	P	
429	Tired out summary				See Notes 16 and 17
	1 Code '5' in F8	549	105	200	
	8 Blank, but applicable	16	9	18	
	Blank	6897	1243	2616	
430	Has there ever been a period of two weeks or more when you talked or moved <u>more</u> slowly than is normal for you?				ASPS F9 See Note 16
	1 No	3140	822	1063	
	3 Result of drugs, alcohol or medication	50	2	25	
	4 Result of physical illness or injury	211	43	170	
	5 Yes	134	31	80	
	8 Blank, but applicable	20	9	15	
	Blank	3907	450	1481	
431	Has there ever been a period of two weeks or more when you had to be <u>moving all the time</u>, that is, you couldn't sit still and paced up and down?				ASPS F10 See Note 16
	1 No	3297	852	1123	
	3 Result of drugs, alcohol or medication	28	1	16	
	4 Result of physical illness or injury	58	7	54	
	5 Yes	152	38	145	
	8 Blank, but applicable	20	9	15	
	Blank	3907	450	1481	
432	Slow, restless summary				See Notes 16 and 17
	1 Code '5' in F9 or F10	251	58	182	
	8 Blank, but applicable	14	8	14	
	Blank	7197	1291	2638	
433	Was there ever a period of several weeks when <u>your interest in sex</u> was a lot less than usual?				ASPS F11 See Notes 16 and 18
	1 No (GO TO F12)	2840	744	985	
	2 Below criterion	469	118	227	
	3 Result of drugs, alcohol or medication	23	3	12	
	4 Result of physical illness or injury	56	11	33	
	5 Yes	123	22	63	
	6 No interest ever	13	0	7	
	8 Blank, but applicable	31	9	26	
	Blank	3907	450	1481	
434	Did you tell a doctor or any other professional about your decreased interest in sex?				ASPS F11A See Notes 16 and 18
	1 No	550	131	291	
	8 Blank, but applicable	26	6	18	
	Blank	6886	1220	2525	
435	Did you take medication more than once for your decreased interest in sex?				ASPS F11B See Notes 16 and 18
	1 No	531	123	284	
	8 Blank, but applicable	25	6	18	
	Blank	6906	1228	2532	
436	Did your decreased interest in sex interfere with your life or activities a lot?				ASPS F11C See Notes 16 and 18
	1 No	469	118	227	
	8 Blank, but applicable	33	6	20	
	Blank	6960	1233	2587	

Position	Item description and code	Counts			Source and notes
		M	C	P	
437	Sex Summary				See Notes 16 and 17
	1 Code '5' in F11	123	22	63	
	8 Blank, but applicable	18	8	17	
	Blank	7321	1327	2754	
438	Has there ever been a period of two weeks or more when you felt worthless, sinful or guilty?				ASPS F12 See Note 16
	1 No	3028	800	1050	
	5 Yes	504	98	287	
	8 Blank, but applicable	23	9	16	
	Blank	3907	450	1481	
439	Worthless Summary				See Notes 16 and 17
	1 Code '5' in F12	504	98	287	
	8 Blank, but applicable	17	8	14	
	Blank	6941	1251	2533	
440	Has there ever been a period of two weeks or more when you had a lot more <u>trouble concentrating</u> than is normal for you?				ASPS F13 See Note 16
	1 No	2994	798	1009	
	3 Result of medication, alcohol or drugs	47	1	28	
	4 Result of physical illness or injury	89	10	67	
	5 Yes	405	90	232	
	8 Blank, but applicable	20	8	17	
	Blank	3907	450	1481	
441	Have you ever had a period of two weeks or more when your <u>thoughts</u> came much slower than usual or seemed mixed up?				ASPS F14 See Note 16
	1 No	3111	797	1047	
	3 Result of medication, alcohol or drugs	43	2	26	
	4 Result of physical illness or injury	70	12	63	
	5 Yes	306	87	199	
	8 Blank, but applicable	25	9	18	
	Blank	3907	450	1481	
442	Trouble thinking summary				See Notes 16 and 17
	1 Code '5' in F13 or F14	482	102	280	
	8 Blank, but applicable	19	8	16	
	Blank	6961	1247	2538	
443	Has there ever been a period of two weeks or more when you <u>thought</u> a lot <u>about death</u> - either your own, someone else's or death in general?				ASPS F15 See Note 16
	1 No	2782	713	907	
	5 Yes	754	186	430	
	8 Blank, but applicable	19	8	16	
	Blank	3907	450	1481	
444	Has there ever been a period of two weeks or more when you felt like you wanted to die?				ASPS F16 See Note 16
	1 No	3175	778	1056	
	5 Yes	361	120	280	
	8 Blank, but applicable	19	9	17	
	Blank	3907	450	1481	

Position	Item description and code	M	Counts C	P	Source and notes
445	Have you ever felt so low you <u>thought</u> of committing <u>suicide</u>?				ASPS F17 See Note 16
	1 No	3248	848	1139	
	5 Yes	290	50	196	
	8 Blank, but applicable	17	9	18	
	Blank	3907	450	1481	
446	Have you ever attempted <u>suicide</u>?				ASPS F18 See Note 16
	1 No	3426	880	1216	
	5 Yes	111	18	121	
	8 Blank, but applicable	18	9	16	
	Blank	3907	450	1481	
447	Death summary				See Notes 16 and 17
	1 Code '5' in F15-F18	952	247	519	
	8 Blank, but applicable	15	8	17	
	Blank	6495	1102	2298	
448	Depression summary				ASPS F19 See Note 19
	1 Less than 4 summary boxes checked (GO TO NEXT SECTION G1)	3216	856	1134	
	2 4 or more summary boxes checked, <u>and</u> a 'No' in F2. (GO TO F22)	40	1	14	
	3 4 or more summary boxes checked, <u>and</u> a 'Yes' in F2. (GO TO F20)	284	43	192	
	8 Blank, but applicable	15	7	13	
	Blank	3907	450	1481	
449	You said you've had a period of feeling depressed/(RESPONDENT'S EQUIVALENT) and also said you've had some other problems (MENTION ALL QUESTIONS CODED '5' IN F3-F18) Has there ever been a time when the feelings of (depression/RESPONDENT'S EQUIVALENT) and some of these other problems occurred that is within the same month?				ASPS F20 See Note 19
	1 Yes	212	38	166	
	2 No	69	4	20	
	8 Blank, but applicable	18	8	19	
	Blank	7163	1307	2629	
450	So there's never been a period when you felt (depressed/(RESPONDENT'S EQUIVALENT) at the same time you were having some of these other problems?				ASPS F21 See Note 19
	1 Has been a period (GO TO F24)	17	0	2	
	2 Never been a period (GO TO G1)	52	4	18	
	8 Blank, but applicable	18	8	19	
	Blank	7375	1345	2795	
451	You said you have had periods when (MENTION ALL QUESTIONS CODED '5' IN F3-F18). Was there ever a time when several of these problems occurred together - that is, within the same month?				ASPS F22 See Note 19
	1 Yes	19	0	7	
	2 No (GO TO G1)	18	1	4	
	8 Blank, but applicable	18	5	13	
	Blank	7407	1351	2810	

Position	Item description and code	M	Counts C	P	Source and notes
452	When you were having some of these problems at about the same time, were you feeling okay, or were you feeling low, gloomy, blue or uninterested in everything?				ASPS F23 See Note 19
	1 Okay (GO TO G1)	3	0	0	
	2 Low or equivalent	16	0	5	
	8 Blank, but applicable	18	5	15	
	Blank	7425	1352	2814	
453-454	What's the longest spell you've ever had when you felt (depressed/RESPONDENT'S EQUIVALENT) and had several of these other problems at the same time?				ASPS F24 See Note 20
	01-40 Number of times	246	38	173	
	88 Blank, but applicable	20	6	24	
	Blank	7196	1313	2637	
455	Weeks, months, or years				ASPS F24
	1 Weeks	68	7	40	
	2 Months	136	22	91	
	3 Years	41	9	43	
	8 Blank, but applicable	21	6	23	
	Blank	7196	1313	2637	
456	Check item for F24				ASPS F25 See Note 20
	1 Less than 2 weeks in F24 (GO TO G1a)	26	3	17	
	2 Other	221	35	160	
	8 Blank, but applicable	19	6	20	
	Blank	7196	1313	2637	
457	Have you had more than one spell when you felt (depressed/RESPONDENT'S EQUIVALENT) and had several of these other problems at the same time?				ASPS F26 See Note 20
	1 Yes	126	24	124	
	2 No	94	11	35	
	8 Blank, but applicable	20	6	21	
	Blank	7222	1316	2654	
458	Did (this spell/any of those spells) occur Just after someone close to you died? (IF VOLUNTEERS BEGAN MORE THAN 2 MONTHS AFTER DEATH, MARK 'NO' AND SKIP TO F29)				ASPS F27 See Note 20
	1 Yes	84	13	60	
	2 No (GO TO F29)	136	22	99	
	8 Blank, but applicable	20	6	21	
	Blank	7222	1316	2654	
459	Have you had any spell of depression along with these other problems (such as MENTION SOME PROBLEMS CODED '5' IN F3-F18) at times when it wasn't due to a death?				ASPS F28 See Note 20
	1 Only due to death	35	4	12	
	2 Other times or not due to death	49	9	48	
	8 Blank, but applicable	20	6	21	
	Blank	7358	1338	2753	

Position	Item description and code	M	Counts C	P	Source and notes
460	Are you in one of these spells of feeling low or disinterested and having some of these other problems now?				ASPS F29 See Note 20
	1 Yes (GO TO F31)	78	14	75	
	2 No	142	21	84	
	8 Blank, but applicable	20	6	21	
	Blank	7222	1316	2654	
461	When did your last spell like that end?				ASPS F30 See Note 20
	1 Within last 2 weeks	11	0	9	
	2 Within last month	6	2	4	
	3 Within last 6 months	29	8	16	
	4 Within last year	17	4	15	
	5 More than 1 year ago	79	7	39	
	8 Blank, but applicable	20	6	22	
	Blank	7300	1330	2729	
462	Check item				See Note 20
	1 Yes in F26 (F32)	126	24	124	
	2 More than 52 weeks or more than 1 year in F24 (F32)	9	2	8	
	3 Other (GO TO F33)	85	9	28	
	8 Blank, but applicable	20	6	20	
	Blank	7222	1316	2654	
463-464	Now I'd like to know about the time when you were feeling (depressed/RESPONDENT'S EQUIVALENT) for at least 2 weeks and had the largest number of these problems at the same time. How old were you at that time? (IF CAN'T CHOOSE: Then pick one bad spell.)				ASPS F32 See Note 20
	04-73 Years	132	25	131	
	88 Blank, but applicable	23	7	21	
	Blank	7307	1325	2682	
	During (this/that) spell of (depression/RESPONDENT'S EQUIVALENT) which of these other problems did you have? For instance, during that spell: FOR F34-F49, READ EACH QUESTION WITH A CHECK (YES) IN BOX 5.				
465	(If 'yes' in F3): Did you lose your appetite?				ASPS F34 See Note 21
	1 Yes	118	22	92	
	2 No	16	3	3	
	8 Blank, but applicable	17	8	16	
	Blank	7311	1324	2723	
466	(If 'yes' in F4): Did you lose weight without trying to-as much as two pounds a week for several weeks (or as much as ten pounds altogether)?				ASPS F35 See Note 21
	1 Yes	86	13	76	
	2 No	15	3	11	
	8 Blank, but applicable	17	8	17	
	Blank	7344	1333	2730	

Position	Item description and code	M	Counts C	P	Source and notes
467	(If 'yes' in F5): Did your eating increase so much that you gained as much as two pounds a week for several weeks (or ten pounds altogether)?				ASPS F36 See Note 21
	1 Yes	34	7	37	
	2 No	39	2	27	
	8 Blank, but applicable	17	7	18	
	Blank	7372	1341	2752	
468	(If 'yes' in F6): Did you have trouble falling asleep, staying asleep or waking up too early?				ASPS F37 See Note 21
	1 Yes	141	26	110	
	2 No	9	0	2	
	8 Blank, but applicable	19	8	16	
	Blank	7293	1323	2706	
469	(If 'yes' in F7): Were you sleeping too much?				ASPS F38 See Note 21
	1 Yes	39	5	32	
	2 No	18	2	16	
	8 Blank, but applicable	14	7	13	
	Blank	7391	1343	2773	
470	(If 'yes' in F8): Were you tired out all the time?				ASPS F39 See Note 21
	1 Yes	127	20	102	
	2 No	24	0	3	
	8 Blank, but applicable	20	8	17	
	Blank	7291	1329	2712	
471	(If 'yes' in F9): Did you talk or move more slowly than is normal for you?				ASPS F40 See Note 21
	1 Yes	60	15	51	
	2 No	8	0	6	
	8 Blank, but applicable	17	7	15	
	Blank	7377	1355	2762	
472	(If 'yes' in F10): Did you have to be moving all the time-that is you couldn't sit still and paced up and down?				ASPS F41 See Note 21
	1 Yes	43	15	69	
	2 No	14	0	5	
	8 Blank, but applicable	15	7	16	
	Blank	7390	1335	2744	
473	(If 'yes' in F11): Was your interest in sex a lot less than usual?				ASPS F42 See Note 21
	1 Yes	34	8	29	
	2 No	6	0	5	
	8 Blank, but applicable	19	7	15	
	Blank	7403	1342	2785	
474	(If 'yes' in F12): Did you feel worthless, sinful or guilty?				ASPS F43 See Note 21
	1 Yes	143	25	101	
	2 No	19	0	6	
	8 Blank, but applicable	17	7	20	
	Blank	7283	1325	2707	

Position	Item description and code	M	Counts C	P	Source and notes
475	(If 'yes' in F13): Did you have a lot more trouble concentrating than is normal for you?				ASPS F44 See Note 21
	1 Yes	135	26	109	
	2 No	22	1	9	
	8 Blank, but applicable	17	8	20	
	Blank	7288	1322	2696	
476	(If 'yes' in F14): Did your thoughts come much slower than usual or seem mixed up?				ASPS F45 See Note 21
	1 Yes	105	29	95	
	2 No	11	1	5	
	8 Blank, but applicable	18	7	14	
	Blank	7328	1320	2720	
477	(If 'yes' in F15): Did you think a lot about death-either your own, someone else's or death in general?				ASPS F46 See Note 21
	1 Yes	109	23	103	
	2 No	27	4	9	
	8 Blank, but applicable	20	8	18	
	Blank	7306	1322	2704	
478	(If 'yes' in F16): Did you feel like you wanted to die?				ASPS F47 See Note 21
	1 Yes	91	18	92	
	2 No	15	3	9	
	8 Blank, but applicable	20	8	20	
	Blank	7336	1328	2713	
479	(If 'yes' in F17): Did you feel so low that you thought of committing suicide?				ASPS F48 See Note 21
	1 Yes	63	8	68	
	2 No	17	5	8	
	8 Blank, but applicable	17	8	19	
	Blank	7365	1336	2739	
480	(If 'yes' in F18): Did you attempt suicide?				ASPS F49 See Note 21
	1 Yes	21	4	34	
	2 No	13	1	16	
	8 Blank, but applicable	16	8	15	
	Blank	7412	1344	2769	
481	DIAGNOSTIC VARIABLE FOR MAJOR DEPRESSIVE EPISODE				See Note 22
	DEPRESS				
	The lifetime DSM-III diagnosis of major depressive episode.				
	0 No major depression	3364	867	1200	
	1 DSM-III major depression	150	29	126	
	2 Bereavement	25	3	11	
	8 Blank, but applicable	16	8	16	
	Blank	3907	450	1481	
482-485	Blank	7462	1357	2834	

Position	Item description and code	M	Counts C	P	Source and notes
SECTION L. CENTER FOR EPIDEMIOLOGIC STUDIES DEPRESSION SCALE					
(CES-D) (POS 486-520)					
Source: Adult Sample Person Supplement (ASPS) (Ages 20 - 74 Years)					
During the past week, that would be from (date) through today:					
486	I was bothered by things that usually don't bother me				ASPS G1a See Note 23
	0 Rarely, or none of the time (less than 1 day)	2714	730	933	
	1 Some or a little of the time (1-2 days)	388	74	185	
	2 Occasionally or a moderate amount of time (3-4 days)	89	15	68	
	3 Most or all of the time (5-7 days)	147	29	149	
	8 Blank, but applicable	217	59	18	
	Blank	3907	450	1481	
487	I did not feel like eating; my appetite was poor				ASPS G1b
	0 Rarely, or none of the time (less than 1 day)	2806	762	988	
	1 Some or a little of the time (1-2 days)	326	42	134	
	2 Occasionally or a moderate amount of time (3-4 days)	92	7	59	
	3 Most or all of the time (5-7 days)	117	37	155	
	8 Blank, but applicable	214	59	17	
	Blank	3907	450	1481	
488	I felt that I could not shake off the blues even with help from my family or friends				ASPS G1c
	0 Rarely, or none of the time (less than 1 day)	2829	733	972	
	1 Some or a little of the time (1-2 days)	272	60	121	
	2 Occasionally or a moderate amount of time (3-4 days)	90	8	55	
	3 Most or all of the time (5-7 days)	149	47	187	
	8 Blank, but applicable	215	59	18	
	Blank	3907	450	1481	
489	I felt I was just as good as other people				ASPS G1d See Note 24
	0 Most or all of the time (5-7 days)	2240	747	1033	
	1 Occasionally or a moderate amount of time (3-4 days)	211	21	74	
	2 Some or a little of the time (1-2 days)	193	9	69	
	3 Rarely, or none of the time (less than 1 day)	683	68	158	
	8 Blank, but applicable	228	62	19	
	Blank	3907	450	1481	
490	I had trouble keeping my mind on what I was doing				ASPS G1e
	0 Rarely, or none of the time (less than 1 day)	2532	692	880	
	1 Some or a little of the time (1-2 days)	484	95	182	
	2 Occasionally or a moderate amount of time (3-4 days)	138	19	82	
	3 Most or all of the time (5-7 days)	185	42	190	
	8 Blank, but applicable	216	59	19	
	Blank	3907	450	1481	

Position	Item description and code	M	Counts C	P	Source and notes
491	I felt depressed				ASPS G1f
	0 Rarely, or none of the time (less than 1 day)	2478	660	787	
	1 Some or a little of the time (1-2 days)	541	110	208	
	2 Occasionally or a moderate amount of time (3-4 days)	141	18	91	
	3 Most or all of the time (5-7 days)	175	60	248	
	8 Blank, but applicable	220	59	19	
	Blank	3907	450	1481	
492	I felt that everything I did was an effort				ASPS G1g
	0 Rarely, or none of the time (less than 1 day)	2343	706	802	
	1 Some or a little of the time (1-2 days)	344	59	158	
	2 Occasionally or a moderate amount of time (3-4 days)	173	12	82	
	3 Most or all of the time (5-7 days)	473	71	292	
	8 Blank, but applicable	222	59	19	
	Blank	3907	450	1481	
493	I felt hopeful about the future				ASPS G1h See Note 24
	0 Most or all of the time (5-7 days)	1858	620	617	
	1 Occasionally or a moderate amount of time (3-4 days)	298	32	104	
	2 Some or a little of the time (1-2 days)	236	41	132	
	3 Rarely, or none of the time (less than 1 day)	923	149	478	
	8 Blank, but applicable	240	65	22	
	Blank	3907	450	1481	
494	I thought my life had been a failure				ASPS G1i
	0 Rarely, or none of the time (less than 1 day)	2981	771	1011	
	1 Some or a little of the time (1-2 days)	192	46	116	
	2 Occasionally or a moderate amount of time (3-4 days)	52	8	43	
	3 Most or all of the time (5-7 days)	112	22	163	
	8 Blank, but applicable	218	60	20	
	Blank	3907	450	1481	
495	I felt fearful				ASPS G1j
	0 Rarely, or none of the time (less than 1 day)	2860	779	1021	
	1 Some or a little of the time (1-2 days)	279	41	149	
	2 Occasionally or a moderate amount of time (3-4 days)	81	8	43	
	3 Most or all of the time (5-7 days)	115	20	119	
	8 Blank, but applicable	220	59	21	
	Blank	3907	450	1481	
496	My sleep was restless				ASPS G1k
	0 Rarely, or none of the time (less than 1 day)	2481	647	804	
	1 Some or a little of the time (1-2 days)	465	96	202	
	2 Occasionally or a moderate amount of time (3-4 days)	162	32	93	
	3 Most or all of the time (5-7 days)	231	73	233	
	8 Blank, but applicable	216	59	21	
	Blank	3907	450	1481	

Position	Item description and code	M	Counts C	P	Source and notes
497	I was happy				ASPS G11
	0 Most or all of the time (5-7 days)	2567	673	818	See Note 24
	1 Occasionally or a moderate amount of time (3-4 days)	348	62	182	
	2 Some or a little of the time (1-2 days)	217	53	152	
	3 Rarely, or none of the time (less than 1 day)	195	59	176	
	8 Blank, but applicable	228	60	25	
	Blank	3907	450	1481	
498	I talked less than usual				ASPS G1m
	0 Rarely, or none of the time (less than 1 day)	2745	754	994	
	1 Some or a little of the time (1-2 days)	306	62	114	
	2 Occasionally or a moderate amount of time (3-4 days)	128	11	76	
	3 Most or all of the time (5-7 days)	138	20	148	
	8 Blank, but applicable	238	60	21	
	Blank	3907	450	1481	
499	I felt lonely				ASPS G1n
	0 Rarely, or none of the time (less than 1 day)	2712	732	872	
	1 Some or a little of the time (1-2 days)	332	60	153	
	2 Occasionally or a moderate amount of time (3-4 days)	118	13	74	
	3 Most or all of the time (5-7 days)	174	43	233	
	8 Blank, but applicable	219	59	21	
	Blank	3907	450	1481	
500	People were unfriendly				ASPS G1o
	0 Rarely, or none of the time (less than 1 day)	2902	750	1076	
	1 Some or a little of the time (1-2 days)	274	44	124	
	2 Occasionally or a moderate amount of time (3-4 days)	63	7	42	
	3 Most or all of the time (5-7 days)	100	44	90	
	8 Blank, but applicable	216	62	21	
	Blank	3907	450	1481	
501	I enjoyed life				ASPS G1p See Note 24
	0 Most or all of the time (5-7 days)	2467	690	881	
	1 Occasionally or a moderate amount of time (3-4 days)	228	32	122	
	2 Some or a little of the time (1-2 days)	200	44	127	
	3 Rarely, or none of the time (less than 1 day)	438	81	202	
	8 Blank, but applicable	222	60	21	
	Blank	3907	450	1481	
502	I had crying spells				ASPS G1q
	0 Rarely, or none of the time (less than 1 day)	2869	765	1022	
	1 Some or a little of the time (1-2 days)	315	55	157	
	2 Occasionally or a moderate amount of time (3-4 days)	83	8	49	
	3 Most or all of the time (5-7 days)	71	20	102	
	8 Blank, but applicable	217	59	23	
	Blank	3907	450	1481	

Position	Item description and code	M	Counts C	P	Source and notes
503	I felt sad				ASPS G1r
	0 Rarely, or none of the time (less than 1 day)	2453	663	751	
	1 Some or a little of the time (1-2 days)	599	108	286	
	2 Occasionally or a moderate amount of time (3-4 days)	139	14	104	
	3 Most or all of the time (5-7 days)	150	63	193	
	8 Blank, but applicable	214	59	19	
	Blank	3907	450	1481	
504	I felt that people disliked me				ASPS G1s
	0 Rarely, or none of the time (less than 1 day)	2999	798	1098	
	1 Some or a little of the time (1-2 days)	232	30	120	
	2 Occasionally or a moderate amount of time (3-4 days)	35	3	37	
	3 Most or all of the time (5-7 days)	72	16	79	
	8 Blank, but applicable	217	60	19	
	Blank	3907	455	1481	
505	I could not get "going"				ASPS G1t
	0 Rarely, or none of the time (less than 1 day)	2798	751	956	
	1 Some or a little of the time (1-2 days)	333	54	175	
	2 Occasionally or a moderate amount of time (3-4 days)	88	7	48	
	3 Most or all of the time (5-7 days)	119	36	155	
	8 Blank, but applicable	217	59	19	
	Blank	3907	450	1481	
506-510	CES-D Total Score				See Note 25
	00.00-60.00 Total CES-D Score	3341	848	1334	
	88.00 Blank, but applicable	214	59	19	
	Blank	3907	450	1481	
511	CES-D Caseness Score (Total score greater than or equal to 16)				See Note 26
	0 No current depressive state	2884	755	934	
	1 Current depressive state	457	93	400	
	8 Blank, but applicable	214	59	19	
	Blank	3907	450	1481	
512-520	Blank	7462	1357	2834	

SECTION M. NOTES

1. Family Questionnaire Missing

A Family Questionnaire was to be completed for each eligible family in a household with sample persons. However, a few Family Questionnaires are missing. Data records for sample persons in families with missing questionnaires are flagged with a code = 1, and all family data are blank. Data records for sample persons in families with a Family Questionnaire are flagged with a code = 2.

During the Mexican-American portion of the HHANES survey, a Family Questionnaire continuation booklet containing sample person information was lost for one sample person. Therefore, the sociodemographic data for this sample person are missing. The reference person, family composition, income, residence, and household data for this person were obtained from another person in the household.

2. Examination Status

Not all sample persons consented to come to a Mobile Examination Center to participate in the examination phase of the survey. In certain rare instances (less than 0.1%), sample persons who came to the Mobile Examination Centers did not participate in sufficient components of the examination to be considered as "examined." This data field contains code = 1 for those persons who participated fully in the examination phase, and code = 2 for those who did not come to the examination center or who did not satisfactorily complete the examination.

3. Family Number

In HHANES, all household members who were related by blood, marriage, or adoption were considered to be one "family." All sample persons in the same family unit have the same computer-generated family unit code.

4. Head of Family

Relationship of Sample Person to Head of Family (Pos. 44-45)

Each family containing sample persons has a designated "head of family," and the relationship of each sample person to the head of his or her family is coded in tape positions 44-45. The first three categories of this variable describe the "head" of three different kinds of families.

- o Code '01' identifies sample persons who lived alone (i.e., "head" of one-person families, no unrelated individuals living in the household).
- o Code '02' identifies sample persons who lived only with unrelated persons.
- o Code '03' identifies sample persons who were "heads" of families containing at least one other person (whether or not the household included additional families unrelated to the sample person).

Sociodemographic Data (Pos. 100-131)

This data tape includes some sociodemographic data about the head of each sample person's family (Section F). Because there can only be one "head" per family, the data in this section (positions 100-131) are the same for all sample persons in the same family (i.e., with the same family number codes in positions 39-43). If the sample person is the head of his or her family, the data in positions 100-131 are the same as in the corresponding positions in Section E.

5. Observed Race

"Race" was observed by the interviewer for all sample persons actually seen. Rules for classification of observed race were consistent with those used in the NHANES II and the National Health Interview Survey at that time. The categories were coded as follows:

<u>White</u>	Includes Spanish origin persons unless they are definitely Black, Indian or other nonwhite.
<u>Black</u>	Black or Negro.
<u>Other</u>	Race other than White or Black, including Japanese, Chinese, American Indian, Korean, Eskimo.

6. National Origin or Ancestry

The value for national origin or ancestry is based on Item 2c in the Household Screener Questionnaire and was reported by the household respondent for all household members. In the Mexican-American portion of the survey, if "other Latin-American or other Spanish" (code 9) or "Other" (code 0) was recorded and the specified origin was "Spanish-American" or "Spanish (Spain)", a code of 10 or 11, respectively, was assigned. In all three portions of the survey, if more than one category was reported, the first appropriate "Hispanic" code, if any, was assigned (codes 1, 2, 3, 8, 10, or 11 in the Mexican-American portion; codes 6 or 7 in the Cuban-American portion; codes 4 or 5 in the Puerto Rican portion). If none of these codes was recorded, the first category entered was coded.

7. Codes for States and Foreign Countries

Code	State or Foreign Country
001	Alabama
002	Alaska
004	Arizona
005	Arkansas
006	California
008	Colorado
009	Connecticut
010	Delaware
011	District of Columbia
012	Florida
013	Georgia
015	Hawaii
016	Idaho
017	Illinois
018	Indiana
019	Iowa
020	Kansas
021	Kentucky
022	Louisiana
023	Maine
024	Maryland

Codes for States and Foreign Countries (continued)

Code	State or Foreign Country
025	Massachusetts
026	Michigan
027	Minnesota
028	Mississippi
029	Missouri
030	Montana
031	Nebraska
032	Nevada
033	New Hampshire
034	New Jersey
035	New Mexico
036	New York
037	North Carolina
038	North Dakota
039	Ohio
040	Oklahoma
041	Oregon
042	Pennsylvania
044	Rhode Island
045	South Carolina
046	South Dakota
047	Tennessee
048	Texas
049	Utah
050	Vermont
051	Virginia
053	Washington
054	West Virginia
055	Wisconsin
056	Wyoming
060	American Samoa
093	Canada
061	Canal Zone
062	Canton and Enderbury Islands
091	Central America
095	Costa Rica
063	Cuba
064	Dominican Republic
065	El Salvador
062	Enderbury Islands
087	Germany
066	Guam
068	Guatemala
069	Haiti
088	Honduras
070	Jamaica
090	Japan
067	Johnston Atoll
080	Mexico
071	Midway Islands
081	Nicaragua
096	Palestine
097	Austria
098	Lebanon
099	Chile
100	Philippines

Codes for States and Foreign Countries (continued)

Code	State or Foreign Country
101	Brazil
102	Holland
103	Colombia
082	Panama
072	Puerto Rico
092	Saudi Arabia
083	Spain
094	Taiwan
089	Turkey
084	Uruguay
085	Venezuela
073	Ryukyu Islands, Southern
074	Swan Islands
075	Trust Territories of the Pacific Islands (includes Caroline, Mariana and Marshall Island groups)
076	U. S. miscellaneous Caribbean Islands (includes Navassa Islands, Quito Sueno Bank, Roncador Cay, Serrana Bank and Serranilla Bank)
077	U. S. miscellaneous Pacific Islands (includes Kingman Reef, Howland, Baker & Jarvis Islands, and Palmyra Atoll)
086	United States
078	Virgin Islands
079	Wake Island
104	Azores
105	Peru
106	England
107	Vietnam
108	Italy
109	Ecuador
110	North America
111	Surinam
112	Argentina
113	Portugal
114	Trinidad
115	Egypt
116	Sudan
117	British Honduras
118	China
888	Blank but applicable

8. National origin recode

In the HHANES, if any household member was identified as "Hispanic" (as defined below), all household members, regardless of origin, were eligible to be selected as sample persons. The national origin recode specifies whether a sample person is considered to be "Hispanic" or "not Hispanic" for purposes of analysis. "Hispanic" is defined as:

Mexican-American, residing in selected counties of Texas, Colorado
New Mexico, Arizona, and California;
Cuban-American, residing in Dade County (Miami), Florida; or
Puerto Rico, residing in the New York City area, including parts of
New Jersey and Connecticut.

The recode was assigned as follows:

A. Southwest portion

- 1) If the original national origin or ancestry code on the Household Screener Questionnaire was 1, 2, 3, 8, 10, or 11, then National origin recode = 1;
- 2) If national origin or ancestry was 4, 5, 6, 7, 9, or 0 but the person specified Mexican/Mexicano, Chicano, or Mexican-American self-identification on the Adult Sample Person Questionnaire (question M10), or the person was the biological child of a household member with Recode equal to 1 (as determined by questions A-1/A-11 on the Family Questionnaire), then National origin recode = 1;
- 3) In all other cases, National origin recode = 2.

B. Dade County, Florida portion

- 1) If the original national origin or ancestry code was 6 or 7, then National origin recode = 1;
- 2) In all other cases, National origin recode = 2;

C. New York City area portion

- 1) If the original national origin or ancestry code was 4 or 5, then National origin recode = 1;
- 2) If national origin or ancestry was 1, 2, 3, 6, 7, 8, 9, or 0 but the person specified Boricuan or Puerto Rican self-identification on the Adult Sample Person Questionnaire (question M10), or the person was the biological child of a household member with Recode equal to 1 (as determined by questions A-1/A-11 on the Family Questionnaire), then National origin recode = 1;
- 3) In all other cases, National origin recode = 2;

The national origin recode may be used in analysis in one of two ways:

- a. Selecting on Recode = 1 will restrict analysis to "Hispanics" only. In this case, in the Southwest portion of the survey, the weighted estimates by age and sex will approximately equal U.S. Bureau of Census population estimates of the number of Mexican Americans and a small proportion of other Hispanics assumed to be Hispano in the five Southwest States (Arizona, California, Colorado, New Mexico, and Texas) at the midpoint of the Mexican-American portion of HHANES - March 1983. The weighted estimates of Cuban Americans represents an independent estimate of the number of Cuban Americans in Dade County at the midpoint, February 1984. The weighted estimates of Puerto Ricans represents an independent estimate of the number of Puerto Ricans in the sample counties in New York, New Jersey, and Connecticut at the midpoint of the Puerto Rican portion - September 1984.

- b. Using Recode greater than 0, that is, all sample persons, will include "Hispanic" and "not Hispanic" persons and the Southwest weighted estimates by age and sex will overestimate the U.S. Bureau of the Census population estimates of Mexican Americans and other Hispanics by about 4.5 percent. In Dade County, using recode greater than 0 will increase the weighted estimates by about 5.3 percent over that for Cuban Americans only, using recode greater than 0 for the New York area will increase the weighted estimates by about 9.2 percent over that for Puerto Ricans only:

9. Industry and Occupation Code

Family Questionnaire questions B-12 through B-15 (see page 117 or 139 of Ref. No. 1 in Section C) identified sample persons 17 years old or older who were in the labor force working for pay at a job or business or who worked without pay in a family business or farm operated by a related member of the household without receiving wages or salary for work performed.

Questions B-17 through B-22 provided a full description of sample persons' current or most recent job or business. The detail asked for in these questions was necessary to properly and accurately code each occupation and industry.

Interviewers were trained to define a job as a definite arrangement for regular work for pay every week or every month. This included arrangements for either regular part-time or regular full-time work. If a sample person was absent from his or her regular job, worked at more than one job, was on layoff from a job or was looking for work during the two week reference period, interviewers were trained to use the following criteria to determine the job described:

- a. If a sample person worked at more than one job during the two week reference period or operated a farm or business and also worked for someone else, the job at which he or she worked the most hours was described. If the sample person worked the same number of hours at all jobs, the job at which he or she had been employed the longest was entered. If the sample person was employed at all jobs the same length of time, the job the sample person considered the main job was entered.
- b. If a sample person was absent from his or her regular job all of the two week reference period, but worked temporarily at another job, the job at which the sample person actually worked was described, not the job from which he or she was absent.
- c. If a sample person had a job but did not work at all during the two week reference period, the job he or she held was described.
- d. If a sample person was on layoff during the two week reference period, the job from which he or she was laid off, regardless of whether a full-time or part-time job, was described.
- e. If a sample person was looking for work or waiting to begin a new job within 30 days of the interview, the last full-time civilian job which lasted two consecutive weeks or more was described.

The 1980 census of population Alphabetical Index of Industries and Occupations was used in the coding of both industry and occupation. This book has Library of Congress Number 80-18360, and is for sale by the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402 for \$3.00. Its Stock Number is 003024049-2.

10. Health Insurance

- a. In the Health Insurance section of the Family Questionnaire, up to three separate health insurance plans could be reported for a family. Each sample person could have been covered by any combination of the three, or by none at all. In order to simplify the health insurance coverage data, the information on all reported plans was combined to a single variable for each sample person, i.e., whether or not the person is covered by any plan (position 74). For all persons covered by at least one plan, information on the type of coverage is then indicated: position 75 specifies whether any of the sample person's plans pays hospital expenses and position 76 specifies whether any of the sample person's plans pays doctor's or surgeon's bills.
- b. For all sample persons who were not covered by Medicare or any health insurance plan, the reasons for not being covered were ascertained. Positions 77-78 contain the main or only reason reported. For persons with one or more additional reasons, the first (lowest) code entered on the questionnaire was coded in positions 79-80.

11. Per Capita Income

Per capita income was computed by dividing the total combined family income by the number of people in the family.

12. Poverty Index

The poverty index is a ratio of two components. The numerator is the midpoint of the income bracket reported for each family in the Family Questionnaire (E-11). Respondents were asked to report total combined family income during the 12 months preceding the interview. The denominator is a poverty threshold which varied with the number of persons in the family, the adult/child composition of the family, the age of the reference person, and the month and the year in which the family was interviewed.

(Note 12 continues on next page)

Poverty thresholds published in Bureau of the Census reports* are based on calendar years and were adjusted to reflect differences caused by inflation between calendar years and 12 month income reference periods to which question E-11 referred. Average Consumer Price Indexes for all Urban consumers (CPI-U) for the calendar year for which the poverty thresholds were published (see table below) and for the 12 months representing the income reference period for the respondent were calculated. The percentage difference between these two numbers represents the inflation between these two periods and was applied to the poverty threshold appropriate for the family (based on the characteristics listed above). For example, for a family interviewed in November, 1983, the 1982 poverty threshold was updated to reflect inflation by multiplying by the percent change in the average CPI-U for the 12 month reference period, which would have been November, 1982 through October, 1983, over the calendar year January through December, 1982, in this example. To compute poverty indexes, the midpoint of the total combined family income bracket was divided by the updated poverty threshold.

Average Consumer Price Index, all Urban Consumers (CPI-U),
U. S. city average, 1981-84

Month	Year			
	1981	1982	1983	1984
January	260.5	282.5	293.1	305.2
February	263.2	283.4	293.2	306.6
March	265.1	283.1	293.4	307.3
April	266.8	284.3	295.5	308.8
May	269.0	287.1	297.1	309.7
June	271.3	290.6	298.1	310.7
July	274.4	292.2	299.3	311.7
August	276.5	292.8	300.3	313.0
September	279.3	293.3	301.8	
October	279.9	294.1	302.6	
November	280.7	293.6	303.1	
December	281.5	292.4	303.5	
Average	272.4	289.1	298.4	

Source: U.S. Department of Labor, Bureau of Labor
Statistics

* U.S. Bureau of the Census, Current Population Reports, Series P-60, No. 138, "Characteristics of the Population Below the Poverty Level: 1981", U.S. Government Printing Office, Washington, D.C., March 1983.

U.S. Bureau of the Census, Current Population Reports, Series P-60, No. 144, "Characteristics of the Population Below the Poverty Level: 1982", U.S. Government Printing Office, Washington, D.C., March 1984.

Members of families with incomes equal to or greater than poverty thresholds have poverty indexes equal to or greater than 1.0 and can be described as "at or above poverty"; those with incomes less than the poverty threshold have indexes less than 1.0 and can be described as "below poverty".

Poverty thresholds used were computed on a national basis only. No attempt was made to adjust these thresholds for regional, State, or other variations in the cost of living. None of the noncash public welfare benefits such as food stamp bonuses were included in the income of the low income families receiving these benefits.

13. Size of Place and SMSA

Codes for size of place and SMSA were obtained from Bureau of Census summary tape files (STF1B).

A place is a concentration of population. Most places are incorporated as cities, towns, villages or boroughs, but others are defined by the Bureau of the Census around definite residential nuclei with dense, city-type street patterns, with, ideally, at least 1,000 persons per square mile. The boundaries of Census defined places may not coincide with civil divisions.

A Standard Metropolitan Statistical Area (SMSA) is a large population nucleus and nearby communities which have a high degree of economic and social integration with that nucleus. Generally, an SMSA includes one or more central cities, all urbanized areas around the city or cities, and the remainder of the county or counties in which the urbanized areas are located. SMSAs are designated by the Office of Management and Budget.

The same place size and SMSA codes were assigned to all persons in the same segment (for the definition of segments see Ref. No. 1 in Section C). In a few cases segments were divided by place boundaries. In these cases codes were assigned after inspecting segment maps. If the segment was predominantly in one place, then the place code for that place was used. If the segment was approximately evenly divided, the code for the larger place was used.

14. Home Heating

Questions E-3 through E-6, pertaining to the main fuel and equipment used for heating the home, appear to have codes which are inconsistent. It has been verified that these are the codes that were recorded on the original document; that is, codes that appear inconsistent were not incorrectly keyed.

15. Blank Records

Not all sample persons who came to the Mobile Examination Center to participate in the examination phase of the survey were given the Adult Sample Person Supplement which contained the measures of depression. In HHANES, there were 10 persons in the Mexican-American portion, 8 in the Cuban-American portion, and 11 in the Puerto Rican portion for which this was the case. Reasons for the nonadministration of this questionnaire to these people were primarily related to lack of time. This data field contains code = '1' for those persons who did not receive the DIS or CES-D depression questions and code = '2' for those who were asked the depression questions. When code '1' appears, the remaining data fields will be coded with '8's signifying "Blank, but applicable." A blank in this field means that the sample person was less than 20 years of age and was not eligible for the depression questions.

16. Lifetime Symptoms of Depression

The questionnaire inquires about whether a symptom has occurred at any time in life (F3-18). Each of these DIS symptom questions can take a value of "1", "3", "4", or "5". There is no "2". The value "1" means the respondent said "no." If the respondent said "yes", additional "probe" questions were asked (See Ref. No. 1, p. 428). First, the respondent was asked if the symptom was always due to use of medicine, alcohol, or drugs. If the respondent said "yes" then a "3" was coded. If the respondent said "no" then he/she was next asked whether the symptom always occurred when he/she had a physical illness or injury that might have caused it. If the respondent said "yes" then a "4" was coded. If the respondent said "no" then a "5" was coded. A value of "5" indicates that the possibility of this being a symptom of a mental disorder cannot be ruled out.

17. Summary Questions

The lifetime depression symptom questions (F3-18) are arranged in groups, each of which approximates one of the diagnostic criteria in Section B of the definition of major depressive episode from the American Psychiatric Association's Diagnostic and Statistical Manual, Third Edition (DSM-III) (Section O). Positions 424, 427, 429, 432, 437, 439, 442, and 447 are summary questions. They ask the interviewer whether or not the respondent had a code "5" in the preceding group of questions. They correspond to the eight symptoms of major depressive episode listed in the DSM-III.

The "Blank" code in each of these summary questions includes all respondents who denied having the symptoms, as well as all respondents under 20 years of age.

18. Decreased Interest in Sex

If the respondent answered "yes" to the initial question (decreased interest in sex), a series of additional questions was asked (F11A-C). If the respondent answered "no" to all three questions, then a code "2" was entered for F11, indicating that the symptom was below the diagnostic threshold. If the respondent answered "yes" to any one of the three additional questions (F11A-C), then the normal "probe" questions (Ref. No. 1, p. 428) were asked, leading to an assignment of values 3, 4, or 5, that is, whether the symptom was always due to medicine, alcohol, or drugs or to physical illness or injury; any remaining parts of F11A-C were skipped.

"Yes" responses to F11A-C were not coded on the data tape. Persons responding "yes" to these additional questions may be identified by executing a programming algorithm such as the following:

If F11 equals 2-8 and F11A is blank, make F11A yes (n=139);

If F11A equals 1 or 8, and F11B is blank, make F11B yes (n=20);

If F11B equals 1 or 8, and F11C is blank, make F11C yes (n=54).

If the respondent volunteered that he/she had never been interested in sex, the original value of "8" was recoded to "6" to avoid confusion with the standard interpretation of an "8" code (blank, but applicable).

19. Several Gateways or Decision Points

Item F19 asks the interviewer whether four or more summary boxes were checked. If fewer than four were marked, all the remaining DIS depression questions were skipped and the interviewer moved to the CES-D questions (G1a- G1t). The remaining DIS questions were coded as blank on the data tape.

If a respondent had four or more DSM-III symptoms during his/her life (F19), the interviewer asked one of two parallel series of questions to determine whether questions pertaining to the worst episode of depression should be asked.

Section A: F19 was coded "2" if there were four or more symptoms of depression, and the respondent answered "no" to the initial question (F2) about ever having had two weeks or more of feeling sad, blue, or depressed. F22 was then asked to determine if several of the depressive symptoms (F3-18) were clustered together in the same month. If the answer to this was "no", then the remaining DIS depression questions were skipped. If the answer was "yes" then F23 was asked, which elicits symptoms of "masked depression." Although only major depression is diagnosed by HHANES, DSM-III also allows a diagnosis of depression in the absence of a dysphoric mood, if the person had a "loss of interest or pleasure in all or almost all usual activities and pastimes", and there are four or more symptoms of the depressive syndrome. If the respondent indicated that he/she felt "okay", the remaining DIS questions were skipped.

Series B: F19 was coded "3" if there were four or more symptom groups of depression, and the respondent answered "yes" to the initial question (F2) about two weeks or more of feeling sad, blue, or depressed. The respondent was then asked F20 about having these problems cluster in time, in the same month. If the answer was "yes", F24 was asked. If the response to F20 was "no" (meaning the problems did not cluster in the same month), then a second question about temporal clustering was asked (F21). If the respondent again answered "no", the remaining DIS questions were skipped. If the respondent said "yes" to F21, F24 was asked.

20. Characteristics of the Depressive Episode

F24 through F25 establish the length of the longest episode of depression. If this was less than two weeks then the remaining DIS depression questions were skipped. (The standard DIS does not have this particular skip-out.) If the longest depressive episode was two weeks or longer, all the remaining DIS depression questions were asked, including questions on symptoms experienced during the worst episode.

21. Worst Episode Symptoms of Depression

These questions ask about symptoms during the worst episode identified in F32. Each of the questions about a worst episode of depression is parallel to one of the lifetime depression questions: for example, F3 asks "has there ever been a period of two weeks or longer when you lost your appetite?" The corresponding worst episode question, F34, asks, "Did you lose your appetite?" The worst episode question (in this example, F34) was only asked if the corresponding lifetime question (in this example F3) was coded "5". The worst episode question was coded "yes" or "no", indicating the presence or absence of the symptom during the worst episode of depression. A diagnosis of major depressive episode was based on the symptoms during the worst episode of depression (F34-F49), and is not based on the lifetime symptoms of depression (F3-F18).

22. The Diagnostic Variable "DEPRESS"

The variable DEPRESS is the diagnosis of major depressive episode. The diagnosis of major depressive episode is based on criteria A and B of the DSM-III definition of major depressive episode (Section O).

Criterion A for the diagnosis of major depressive episode in DSM III calls for "dysphoric mood or loss of interest or pleasure in all or almost all usual activities and pastimes". If the respondent said "yes" to the initial depression question (F3), or if there were at least two weeks of dysphoria combined with some other problems (F24), then the person was said to have "dysphoria", and was considered to have met Criterion A for the diagnosis of major depressive episode.

The DSM-III definition of Criterion B for major depressive episode contains eight symptoms, at least four of which must be present during an episode of depression in order to qualify for a diagnosis. These eight symptoms are approximated by the following HHANES questions:

<u>DSM-III Symptom</u>	<u>HHANES Question(s)</u>
1. Appetite or weight change	F34, F35, or F36
2. Insomnia or hypersomnia	F37, or F38
3. Agitation or retardation	F39, or F40
4. Loss of interest in sex	F41
5. Loss of energy, fatigue	F42
6. Feeling worthless or guilty	F43
7. Trouble thinking, concentrating	F44, or F45
8. Thoughts of death or suicide	F46, F47, F48, or F49

In order to qualify for a diagnosis of major depressive episode in the HHANES, the respondent had to have symptoms from at least four items of this list.

The variable DEPRESS can take five values:

0 = Absent

1 = Major depressive episode

2 = Bereavement

8 = Blank but applicable

Blank = respondent under age 20

DEPRESS = 0. No major depressive episode was diagnosed if the subject answered at least three quarters of the lifetime DIS depression questions (F2-F18), and did not qualify for a diagnosis of major depressive episode or bereavement (as defined in the next two paragraphs).

DEPRESS = 1. Major depressive episode was diagnosed if three conditions were met: there was dysphoria (as defined above), there were at least four depression symptoms from the list above, and the depression could not be ascribed entirely to bereavement (F28 = 2).

DEPRESS = 2. Bereavement was diagnosed if there was dysphoria and four or more depression symptoms from the list above, and all the episodes of depression occurred soon after a person close to the respondent died (F28 = 1).

DEPRESS = 8. The major depressive episode variable took a "blank but applicable" value if three conditions were met: there was neither major depressive episode, nor bereavement, and at least one quarter of the lifetime depression questions (F2-F18) were unanswered. Because DIS data are missing in this case, it is necessary to be cautious and define the diagnostic variable as missing.

23. CES-D "Blank but Applicable"

The large number of "8" codes for each CES-D item can be accounted for as follows:

1. One-hundred ninety persons had CES-Ds in which "0" was marked for every response, including the positive items. These persons were considered to have a response set, that is, either the interviewer marked the wrong response (the majority of the cases), the respondent did not understand the directions, or the respondent did not pay attention to the individual items, answering "none of the time" for all items. Since the scores of these persons are of questionable validity, all of their responses to the CES-D items were counted only as "Blank but applicable."
2. Twenty-four persons who completed other components of the examination did not complete the CES-D, although they were eligible to do so (i.e., at least 20 years of age).
3. Some persons did not respond to all the items on the CES-D. This is reflected in the differential control counts.

24. CES-D Questions G1d, G1h, G1l, G1p

These four items reflect positive affect. If the respondent indicated that he/she had positive feelings most of the time, the interviewer recorded a 3 on the response form. Conversely, if the respondent indicated that he/she rarely experienced positive feelings during the past week, the interviewer recorded a 0. The scores on these items have been reversed in the final data tape. In this data set, a score of 0, for example, indicates that the respondent had positive feelings most of the time (as opposed to 0 on a negative item, indicating persistence of a depressive symptom). A score of 3 on a positive item indicates presence of a depressive symptom, that is, the respondent rarely experienced the positive feeling during the past week.

25. CES-D Total Score

This score represents the total added over all 20 items. The minimum possible score was 0, with a maximum of 60. Total scores were calculated only for those respondents who had answered 16 or more items. If a respondent answered at least 16, but fewer than 20 items, his mean score on the answered questions was used to impute the score for the unanswered questions. Total scores are therefore represented by five tape positions, with a decimal point in the middle position. If a respondent answered fewer than 16 items, a total score was not calculated for that person, but was coded as "Blank but applicable".

26. CES-D Caseness Score

If a respondent's total score was 16 or greater, he/she was considered to have a current depressive state. This is not a diagnosis of depression, since the CES-D was not designed to yield a diagnosis.

SECTION N. DIFFERENCES BETWEEN THE STANDARD DIS DEPRESSION SECTION AND HHANES VERSION

There are four important differences between the HHANES version and the standard version of the DIS:

1. The threshold for entering the "worst episode" (F19) is higher (4 symptoms) in the HHANES than in the standard DIS (3 symptoms). The threshold was increased since four symptoms are the minimum number required for assignment of a diagnosis. The higher threshold is therefore more efficient. A smaller proportion of respondents were asked the "worst episode" questions, however. This difference might be expected either to have no effect, or to decrease the prevalence of depression incrementally in the HHANES.
2. With the exception of F11, no separate questions are included in the HHANES concerning whether the depression caused the respondent to see a doctor or other health professional or to take medicine more than once, or interfered with his/her life to a great extent. It is therefore not possible to divide people with major depressive episode into "severe" and "non-severe" categories the way the standard DIS diagnosis does. This difference might be expected to increase the prevalence of depression in the HHANES, by counting non-severe depressions along with severe depressions.
3. The HHANES did not have either a Mini-Mental Status exam or a test for psychoses, so there are no bases for operationalizing the DSM-III exclusion criteria (criteria C, D, or E). Since the initial papers reporting results from the ECA Program (the largest study to date using the standard DIS) did not employ exclusion criteria (Ref. Nos. 15, 18, 19) this difference would not be expected to affect the prevalence rates of depression from the HHANES.
4. A diagnosis of dysthymia cannot be generated from the data in the HHANES. The standard DIS allows a diagnosis of dysthymia if the respondent reports at least two years of chronic depression plus a number of lifetime symptoms. The HHANES does not contain a question about at least two years of depression, and some of the lifetime depressive symptoms found in the somatization section of the standard DIS are omitted from the present version.

SECTION O. DIAGNOSIS OF MAJOR DEPRESSIVE EPISODE*

Major Depressive Episode

The essential feature is either a dysphoric mood, usually depression, or loss of interest or pleasure in all or almost all usual activities and pastimes. This disturbance is prominent, relatively persistent, and associated with other symptoms of the depressive syndrome. These symptoms include appetite disturbance, change in weight, sleep disturbance, psychomotor agitation or retardation, decreased energy, feelings of worthlessness or guilt, difficulty concentrating or thinking, and thoughts of death or suicide or suicidal attempts.

An individual with a depressive syndrome will usually describe his or her mood as depressed, sad, hopeless, discouraged, down in the dumps, or in terms of some other colloquial variant. Sometimes, however, the mood disturbance may not be expressed as a synonym for depressive mood but rather as a complaint of "not caring anymore", or as a painful inability to experience pleasure. In a child with a depressive syndrome there may not be complaints of any dysphoric mood, but its existence may be inferred from a persistently sad facial expression.

Loss of interest or pleasure is probably always present in a major depressive episode to some degree, but the individual may not complain of this or even be aware of the loss, although family members may notice it. Withdrawal from friends and family and neglect of avocations that were previously a source of pleasure are common.

Appetite is frequently disturbed, usually with loss of appetite, but occasionally with increased appetite. When loss of appetite is severe, there may be significant weight loss or, in the case of children, failure to make expected weight gains. When appetite is markedly increased there may be significant weight gain.

Sleep is commonly disturbed, more frequently with insomnia present, but sometimes with hypersomnia. The insomnia may involve difficulty falling asleep (initial insomnia), waking up during sleep and then returning to sleep only with difficulty (middle insomnia), or early morning awakening (terminal insomnia).

Psychomotor agitation takes the form of inability to sit still, pacing, hand-wringing, pulling or rubbing of hair, skin, clothing, or other objects, outbursts of complaining or shouting, or pressure of speech. Psychomotor retardation may take the form of slowed speech, increased pauses before answering, low or monotonous speech, slowed body movements, a markedly decreased amount of speech (poverty of speech), or muteness. (In children there may be hypoactivity rather than psychomotor retardation.) A decrease in energy level is almost invariably present, and is experienced as sustained fatigue even in the absence of physical exertion. The smallest task may seem difficult or impossible to accomplish.

The sense of worthlessness varies from feelings of inadequacy to completely unrealistic negative evaluations of one's worth. The individual may reproach himself or herself for minor failings that are exaggerated and search the environment for cues confirming the negative self-evaluation. Guilt may be expressed as an excessive reaction to either current or past failings or as exaggerated responsibility for some untoward or tragic event. The sense of worthlessness or guilt may be of delusional proportions.

* American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Third Edition. Washington, D.C. APA. 1980. Used with permission.

Difficulty in concentrating, slowed thinking, and indecisiveness are frequent. The individual may complain of memory difficulty and appear easily distracted.

Thoughts of death or suicide are common. There may be fear of dying, the belief that the individual or others would be better off dead, wishes to die, or suicidal plans or attempts.

Associated Features. Common associated features include depressed appearance, tearfulness, feelings of anxiety, irritability, fear, brooding, excessive concern with physical health, panic attack, and phobias.

When delusions or hallucinations are present, their content is usually clearly consistent with the predominant mood (mood-congruent). A common delusion is that one is being persecuted because of sinfulness or some inadequacy. There may be nihilistic delusions of world or personal destruction, somatic delusions of cancer or other serious illness, or delusions of poverty. Hallucinations, when present, are usually transient and not elaborate, and may involve voices that berate the individual for his or her shortcomings or sins.

Less commonly the content of the hallucinations or delusions has no apparent relationship to the mood disturbance (mood-incongruent). This is particularly the case with persecutory delusions, in which the individual may be at a loss to explain why he or she should be the object of persecution. The usefulness of the distinction between mood-congruent and mood-incongruent psychotic features is controversial.

Age-Specific Associated Features. Although the essential features of a major depressive episode are similar in infants, children, adolescents, and adults, there are differences in the associated features.

In prepubertal children separation anxiety may develop and cause the child to cling, to refuse to go to school, and to fear that he or she or the parents will die. A previous history of separation anxiety may result in more intense anxiety symptoms with the onset of a major depressive episode.

In adolescent boys negativistic or frankly antisocial behavior may appear. Feelings of wanting to leave home or of not being understood and approved of, restlessness, grouching, and aggression are common. Sulkiness, a reluctance to cooperate in family ventures, and withdrawal from social activities, with retreat to one's room, are frequent. School difficulties are likely. There may be inattention to personal appearance and increased emotionality, with particular sensitivity to rejection in love relationships. Substance Abuse may develop.

In elderly adults there may be symptoms suggesting Dementia, such as disorientation, memory loss, and distractibility. Loss of interest or pleasure in the individual's usual activities may appear as apathy; difficulty in concentration as inattentiveness. These symptoms make the differential diagnosis of "pseudo-dementia" (due to depression) from true Dementia (an Organic Mental Disorder) particularly difficult.

Differential Diagnosis of Major Depressive Episode. An Organic Affective Syndrome with depression may be due to substances such as reserpine, to infectious diseases such as influenza, or to hypothyroidism. Only by excluding organic etiology can one make the diagnosis of a major depressive episode.

Primary Degenerative Dementia or Multi-infarct Dementia, because of the presence of disorientation, apathy, and complaints of difficulty concentrating or of memory loss, may be difficult to distinguish from a major depressive episode occurring in the elderly. If the features suggesting a major depressive episode are at least as prominent as those suggesting Dementia, it is best to diagnose a major depressive episode and assume that the features suggesting Dementia represent a pseudo-dementia that is a manifestation of the major depressive episode. In such cases the successful treatment of the major depressive episode often results in the disappearance of the symptoms suggesting Dementia. If the features suggesting Dementia are more prominent than the depressive features, the diagnosis should be the appropriate form of Dementia, but the presence of depressive features should be noted.

If a psychological reaction to the functional impairment associated with a physical illness that does not involve the central nervous system causes a depression that meets the full criteria for a major depressive episode, the Major Depression should be recorded on Axis I, the physical disorder on Axis III, and the severity of the psychosocial stressor on Axis IV. Examples would include the psychological reaction to the amputation of a leg or to the development of a life-threatening or incapacitating illness.

In **Schizophrenia** there is usually considerable depressive symptomatology. If an episode of depression follows an episode of Schizophrenia and is superimposed upon the residual phase of Schizophrenia, the additional diagnosis of either Atypical Depression or Adjustment Disorder with Depressed Mood may be made, but not Major Depression. An individual with a major depressive episode may have psychotic symptoms; however, the diagnosis of Schizophrenia is made in the presence of a full depressive syndrome only if the affective symptoms follow the psychotic symptoms or are brief relative to the duration of the psychotic symptoms. An individual with Schizophrenia, Catatonic Type, may appear to be withdrawn and depressed, and it may be difficult to distinguish this condition from Major Depression with psychomotor retardation. In such instances it may be necessary to rely on features that on a statistical basis are associated differentially with the two disorders. For example, the diagnosis of a major depressive episode is more likely if there is a family history of Affective Disorder, good premorbid adjustment, and a previous episode of affective disturbance from which there was complete recovery.

The diagnosis of **Schizoaffective Disorder** can be made whenever the clinician is unable to make a differential diagnosis between a major depressive episode and Schizophrenia. Although no criteria for Schizoaffective Disorder are provided in this manual, several examples of clinical situations in which this diagnosis might be appropriate are given on p. 202.

In **Dysthymic and Cyclothymic Disorders** there are features of the depressive syndrome, but they are not of sufficient severity and duration to meet the criteria for a major depressive episode. However, in some instances, a major depressive episode is superimposed on one of these disorders. In such cases both diagnoses should be recorded, since it is likely that after recovering from the major depressive episode, either a Dysthymic or a Cyclothymic Disorder will persist.

Chronic mental disorders, such as **Obsessive Compulsive Disorder** or **Alcohol Dependence**, when associated with depressive symptoms, may suggest a Major Depression. The additional diagnosis of Major Depression should be made only if the full depressive syndrome is present and persistent. In such instances both the chronic mental disorder and the superimposed Major Depression should be recorded.

In **Separation Anxiety Disorder**, depressive symptoms are common, but if the full depressive syndrome is not present, only Separation Anxiety Disorder should be diagnosed. On the other hand, children with Separation Anxiety Disorder may develop a superimposed major depressive episode, in which case both diagnoses should be made.

Uncomplicated Bereavement is distinguished from a major depressive episode and is not considered a mental disorder even when associated with the full depressive syndrome. However, if bereavement is unduly severe or prolonged, the diagnosis may be changed to Major Depression.

Diagnostic Criteria for Major Depressive Episode

- A. Dysphoric mood or loss of interest or pleasure in all or almost all usual activities and pastimes. The dysphoric mood is characterized by symptoms, such as the following: depressed, sad, blue, hopeless, low, down in the dumps, irritable. The mood disturbance must be prominent and relatively persistent, but not necessarily the most dominant symptom, and does not include momentary shifts from one dysphoric mood to another dysphoric mood, e.g., anxiety to depression to anger, such as are seen in states of acute psychotic turmoil. (For children under six, dysphoric mood may have to be inferred from a persistently sad facial expression.)
- B. At least four of the following symptoms have each been present nearly every day for a period of at least two weeks (in children under six, at least three of the first four):
- (1) poor appetite or significant weight loss (when not dieting) or increased appetite or significant weight gain (in children under six, consider failure to make expected weight gains)
 - (2) insomnia or hypersomnia
 - (3) psychomotor agitation or retardation (but not merely subjective feelings of restlessness or being slowed down) (in children under six, hypoactivity)
 - (4) loss of interest or pleasure in usual activities, or decrease in sexual drive not limited to a period when delusional or hallucinating (in children under six, signs of apathy)
 - (5) loss of energy; fatigue
 - (6) feelings of worthlessness, self-reproach, or excessive or inappropriate guilt (either may be delusional)
 - (7) complaints or evidence of diminished ability to think or concentrate, such as slowed thinking, or indecisiveness not associated with marked loosening of associations or incoherence
 - (8) recurrent thoughts of death, suicidal ideation, wishes to be dead, or suicide attempt

- C. Neither of the following dominate the clinical picture when an affective syndrome (i.e., criteria A and B above) is not present, that is, before it developed or after it has remitted:
 - (1) preoccupation with a mood-incongruent delusion or hallucination (see definition below)
 - (2) bizarre behavior
- D. Not superimposed on either Schizophrenia, Schizophreniform Disorder, or a Paranoid Disorder.
- E. Not due to any Organic Mental Disorder or Uncomplicated Bereavement.