POTENTIAL RESEARCH AREAS

- Inter- and intragenerational connections in health: The genealogical design can be used to assess the similarities and differences in health between brothers and sisters, and among grandparents, parents, and adult children.
- Socioeconomic status and health: Income, wealth, consumption, and education data can be combined with extensive health data to help understand the strong connections between socioeconomic outcomes and health status.
- Life course modeling: Baby boomers can be followed from childhood to adulthood and into retirement years, and then compared with other birth cohorts.
- Contextual effects on social and economic outcomes: With a confidential contract, resident census tract is identified, allowing data to be linked to externally measured neighborhood factors.
- Financial planning and well-being: Assessment of the effects of stock market-induced fluctuations in household wealth on the decision to retire or un-retire.
- Changes in wealth holdings: Investigation of changes in wealth and active savings prior to and during life course transitions such as job loss, health shocks, children’s enrollment in higher education.
- Mortality modeling: Over 6,000 PSID family members have died since 1968, supporting detailed assessment of the causes of mortality using data linked to the National Death Index.

STUDY DIRECTION AND OVERSIGHT

The PSID is directed by faculty at the University of Michigan, with data collection conducted by the Institute for Social Research. An external Board of Overseers, which consists of leading scientists from various disciplines, provides scientific input and monitors the project.

Director: Charles Brown
Associate Directors: Vicki Freedman and Narayan Sastry
Assistant Director: Katherine McGonagle

SPONSORSHIP

PSID is sponsored by: the National Science Foundation, the National Institute on Aging, the Eunice Kennedy Shriver National Institute on Health and Human Development, the Center on Philanthropy at Indiana University, the United States Department of Agriculture, the Office of the Assistant Secretary for Planning and Evaluation, and the United States Department of Housing and Urban Development.

DATA ACCESS: PSID.org

All waves of the PSID and study supplements are accessible via the PSID Data Center, which provides:

- Automatic merges of all waves of data
- Customized codebooks and datasets in a variety of formats including SAS, Stata, SPSS, Excel, and text
- Instructional webinars and tutorials, bibliographies, technical papers, and user documentation

Some types of PSID data are available only under a restricted contract. These include: geospatial data down to block-level; mortality data from the National Death Index; assisted housing matched to U.S. Dept. of Housing and Urban Development data; Medicare claims; and educational characteristics linked to the National Center for Education Statistics data.

PSID.org

DATA ON AGING & HEALTH
OVERVIEW

Design features of the PSID allow researchers to uniquely address research questions on aging. Thousands of PSID respondents have been interviewed each wave since 1968, representing a large portion of their life course. Content is broad, including health status, health insurance, health care expenditures, wealth, income, expenditures, demographic outcomes, and more.

PSID has always followed sons and daughters of sample members, which allows researchers to compare economic, health, and social outcomes across generations within the same family and among adult siblings.

The PSID is freely available to all users worldwide. Data are distributed at the PSID web site (psidonline.org), where users can create customized extracts and codebooks.

SAMPLE DESIGN

The original PSID consisted of a national sample. An over-sample of low-income families was included to provide adequate sample sizes for investigating poverty related issues. Roughly 18,000 individuals living in 5,000 households were members of the original 1968 sample.

In 1997/1999, a sample of 511 immigrant families was added to enhance representativeness. Using weights provided by the PSID, it has been shown that the PSID sample continues to closely resemble the national population even after nearly 50 years of interviewing.

WEALTH & PENSIONS

Beginning in 1984, respondents reported information on wealth holdings, including: the amount of money put into pensions, private annuities, IRAs, real estate, stocks and bonds, business or farm, and other forms of savings such as a home remodel; any amount received for selling part of a business or farm, or from an inheritance; and the values for the items listed below.

- Home equity
- Equity in real estate other than main home
- Vehicles, including boats, motor homes, and trailers
- Farm or business net worth
- Private annuities and Individual Retirement Accounts
- Checking or savings accounts, money market funds, certificates of deposit, stocks, government savings bonds, and treasury bills
- Other savings or assets, such as bonds, life insurance policies, and valuable collectables
- Debts on credit cards and student loans
- Transfers and bequests

Questions on mortgage distress and foreclosures were added in 2009. The PSID also collects information on pension coverage and balances for people of all ages, and detailed information on pension characteristics.

INTERGENERATIONAL TRANSFERS

The 2013 wave of the PSID includes a new Family Roster and Transfer Module that collects data on the living parents and adult children (over age 18) of respondents and their spouses/partners.

These data for family members include age, educational attainment, marital/partner status, income, home ownership, health employment status, and number of children, as well as respondent reports of any recent or long-term transfers of time and money to and from them.

HEALTH

PSID health modules support analyses of the evolution of health outcomes over the life course:

- Disability – ADLs, IADLs, and hospitalization
- Chronic health conditions – onset, duration, recency, and frequency
- Health status – since birth, adolescence, last interview, and current
- Body Mass Index – height and weight
- Health behaviors – exercise, smoking, drinking
- Health care expenditures – Medicaid, Medicare, insurance coverage and premiums
- Linkages to Medicare claims available with restricted data agreement
- Mental health – psychiatric disorders, 30 day distress, 12 month depression
- Childhood health – physical and emotional conditions
- Mortality – date and cause of death available under restricted contract

DISABILITY AND USE OF TIME

A supplemental data collection (DUST) was conducted in 2009 and 2013 to investigate the connections among disability, time use, and well-being for older adults. Information was obtained about:

- What respondents did and with whom
- Where they were during activities
- How they felt
- For whom the activities were carried out (household and care-related activities)

Now available: Early data from Childhood Retrospective Circumstances Study

PSID’s first web study provides data on experiences in childhood and young adulthood from over 8,000 household heads and spouses.

EMPLOYMENT & RETIREMENT

Employment outcomes have also been a focus of the PSID. Information is collected on employment, retirement, occupation, industry, firm size, earnings, hours, benefits and other characteristics of employment.