

**THE PANEL STUDY OF INCOME DYNAMICS'
CHILDHOOD RETROSPECTIVE CIRCUMSTANCES STUDY (PSID-CRCS)**

USER GUIDE

Final Release 1

September 2015

This manual was prepared with funding from the National Institute on Aging P01 AG029409. This document should be cited as follows: McGonagle, Katherine and Vicki A. Freedman. 2015. The Panel Study of Income Dynamics' Childhood Retrospective Circumstances Study (PSID-CRCS) User Guide: Final Release 1. Institute for Social Research, University of Michigan. Please contact us at psidhelp@umich.edu if you find errors or have suggestions for improving this guide.

Table of Contents

INTRODUCTION.....	3
THE PSID-CRCS INSTRUMENT	3
Section A: Identifying Parents/Guardians, Parental Relationship Quality, Histories.....	3
Section B: Health Conditions.....	3
Section C: Socioeconomic Status	4
Section E: Friendships	4
Section F: School Experiences	4
Section G: Exposure to the Criminal Justice System	4
Section H: Parent/Guardian Mental Health.....	4
Section J: Relationship Quality with Parents/Guardians.....	5
Section K: Young Adult Mentoring.....	5
SAMPLE AND DATA COLLECTION PROCEDURES	5
RESPONSE RATES, WEIGHTING AND ADJUSTING FOR NON-RESPONSE.....	6
THE PSID-CRCS FINAL DATA FILE.....	8
REFERENCES.....	8

INTRODUCTION

The Childhood Retrospective Circumstances Study (PSID-CRCS) is a supplement to the Panel Study of Income Dynamics (PSID), a longitudinal study of a nationally representative sample of U.S. individuals and the families in which they reside. Since 1968, the PSID has collected data on family composition changes, expenditures, marriage and fertility histories, employment, income, time spent in housework, health, wealth, and more. For additional details on the PSID, see the PSID Main Interview User Guide at <http://psidonline.isr.umich.edu/data/Documentation/UserGuide2011.pdf> and McGonagle et al. (2012).

The PSID-CRCS is the first study conducted by the PSID using the internet as the primary mode of data collection. PSID-CRCS was supported by a program project grant from the National Institute on Aging (P01 AG029409). The goal of the study was to design and collect a mixed mode (web or paper) module from household heads and, if married/cohabitating, spouses/partners, about their childhood experiences. The data may be used to study early life influences on adult health and economic outcomes.

THE PSID-CRCS INSTRUMENT

The PSID-CRCS questionnaire was designed as a 20-minute self-administered instrument that could be completed via the internet or paper. The questionnaire consists of the following 10 sections.

Section A: Identifying Parents/Guardians, Parental Relationship Quality, Histories.

This section obtains information that identifies the most influential mother and father during the respondent's childhood. Questions are also included that aim to identify the most influential person who raised them for those respondents who did not live with biological parents. This information is used as a reference for principal maternal and paternal figures throughout the questionnaire. Information is collected about the relationship satisfaction of parents / guardians (when applicable). The occurrence and timing of parental/guardian separations, residential changes, and school changes are also collected. Based on experimental evidence that these salient events facilitate recall of subsequent events, these histories are collected at the beginning of the instrument (Belli, Shay & Stafford, 2001).

Section B: Health Conditions

A key aim of the PSID-CRCS is to collect information on physical and mental health during childhood, given the well documented association between childhood health and socioeconomic status and wellbeing in adulthood (Case et al., 2005; Kessler et al., 1996; Smith, 2007; 2009). This section collects information on self-rated health status and the occurrence and timing (age of onset and age of recency) of various physical and mental health conditions before age 17. The majority of health conditions in this section replicate those included in the 2007 - 2015 waves of Core PSID. Note that in Core PSID these conditions are reported for household heads and spouses/partners by a single respondent for the family. In contrast, the information collected in PSID-CRCS is obtained directly via self-report from each household head and spouse/partner.

Physical conditions include: a) those for which "occurrence" only is asked: measles, mumps, chicken pox, difficulty seeing and hearing, and b) those that ask about occurrence as well as age of onset and recency: asthma, diabetes, respiratory disorder, speech impairment, allergies, heart problems, chronic ear infections, epilepsy, severe headaches/migraine, stomach problems, high blood pressure, and attention deficit disorder. Respondents are also asked about their parents smoking behavior during their childhood.

Based on the demonstrated strong influence of childhood mental health problems on socioeconomic outcomes and health in adulthood (Smith and Smith, 2010; Luo and Waite, 2005; Kessler et al., 1995; Zielinski, 2009), information on the occurrence and timing, service utilization, and prescription medication use for the following mental health conditions is collected: alcohol and drug problems, depression, anxiety, and panic attacks. The purpose of collecting information on these mental health conditions is to identify major symptoms and manifestations of such problems during childhood, rather than to generate specific diagnostic criteria.

Section C: Socioeconomic Status

Many studies have demonstrated that levels of family socioeconomic status during childhood are an important determinant of childhood and adult outcomes (e.g., Case et al., 2002). This section collects information about childhood socioeconomic status from three periods of childhood: from birth to age 5, from ages 6 through 12, and from ages 13 through 16. Separate questions are asked about the employment status and job seeking of each parent, whether the family was ever on welfare or received food stamps, and how the financial situation of the family compared to that of the average family.

Section D: Neighborhood Quality

Information about characteristics of the neighborhood in which the respondent lived longest during the reference period of ages 6 through 12 is collected. These questions are based on a modified version of the Neighborhood Quality Evaluation Scale (NQES; Roosa et al., 2005). Neighborhood characteristics are additionally collected for respondents who changed neighborhoods between ages 13 and 16. Dimensions of the neighborhood include an evaluation of safety, whether the neighborhood was close-knit, whether people were willing to help each other, and general upkeep, cleanliness, and attractiveness.

Section E: Friendships

This section collects information about friendships during the reference periods of ages 6 through 12, and ages 13 through 16 using questions adapted from the PSID Child Development Supplement and the National Longitudinal Survey of Youth, 1979, Children and Young Adults (Bureau of Labor Statistics, 2012). Questions are asked about loneliness, belonging to a group, having a best friend, and for the older reference period, having a romantic partner, and the quality of the most important romantic relationship.

Section F: School Experiences

Information is collected about whether a school year (i.e., grade) was ever repeated and the timing. A question series about the frequency of being bullied, bullying others, and feeling happy and safe at school is asked for the reference periods ages 6 through 12, and ages 13 through 16. These questions have also been asked in waves 2 and 3 of the PSID Child Development Supplement.

Section G: Exposure to the Criminal Justice System

This section collects information on exposure to the criminal justice system throughout childhood and young adulthood. Questions are asked about victimization before age 17, criminal and delinquent activity before age 26, and arrests and sentences served since age 26. Questions are drawn from similar questions asked in the National Longitudinal Survey of Youth, 1997 (Bureau of Labor Statistics, 2013), and in all waves of the PSID Transition into Adulthood study.

Section H: Parent/Guardian Mental Health

A large literature documents the important influence of parental mental health on the subsequent wellbeing of offspring in adulthood. Following their successful implementation in the National Comorbidity Study (Kessler, R.C., National Comorbidity Survey: Baseline NCS-1, 1990-1992), questions

are asked about whether during the respondent's childhood, their parents had three of the most prevalent mental health conditions: anxiety, substance use, and depression that lasts for two weeks or more. Information is collected on the occurrence and frequency of each condition, as well as whether professional treatment or hospitalization was obtained, and the extent the condition interfered with daily activities.

Section J: Relationship Quality with Parents/Guardians

Section J assesses the quality of relationship between the respondent and each parent during the respondent's childhood using questions adapted from the National Survey of Midlife Development in the U.S. Study (MIDUS I). Information is collected on the overall quality of communication, extent of being able to confide problems and worries, levels of understanding, tension, emotional closeness, love and affection, strictness, and effort put forth in parenting. A series of questions adopted from the Conflict Tactics Scales (Straus, 1979) assesses the frequency of conflict between parents and respondent, between siblings and respondent, and between the parents.

Section K: Young Adult Mentoring

Drawing on the literature finding buffering effects of adult role models on childhood adversities (e.g., Beier et al., 2000), a brief question series has been developed to collect information about the presence of non-parental mentors during the time period spanning age 17 through 30. Information is collected about non-parental family members and individuals outside of the family who may have provided positive support or mentoring to help with success in work and in interpersonal relationships.

SAMPLE AND DATA COLLECTION PROCEDURES

Eligible Sample

The initial PSID-CRCS sample consisted of 13,117 individuals aged 19 and older (aged 19 by January 1, 2013) who were household heads and spouses/partners in PSID families that participated in the 2013 wave of PSID. Individuals for which other family unit members or proxies served as respondents in the 2013 core PSID interview and those who completed their core interview in Spanish were not eligible (N= 593). During editing eligibility status was reviewed and confirmed for 12,985 cases.

Assignment to Initial Mode

Respondents were initially assigned to one of two conditions to complete the survey: "Web" or "Choice". Individuals initially assigned to "Web" reported in 2013 that they could connect to the internet through a computer or laptop at home and had done so in the last year (questions A47A and A47B in the [PSID 2013 instrument](#)). The remaining individuals were assigned to a condition in which they were given a choice to complete the survey via the web, or wait for a paper questionnaire to be mailed to them in a few weeks. Initially, 73% of the sample was assigned to "Web" and the remaining 27% to "Choice."

Data Collection Procedures

The PSID-CRCS actively collected data for approximately six months, from May 2014 through October 2014, and then continued to accept responses through January 2015. The start of the study was deliberately staggered in three releases across PSID families due to the proximate timing of the field period with other ongoing data collections. In particular, individuals in families eligible for the 2014-2015 Child Development Supplement were prioritized for assignment in the first two sample releases,

and individuals who had just completed the 2013-2014 Transition into Adulthood Supplement were assigned to the third release.

The invitation letter included the web address of the survey and a login name and password. Invitations were mailed to individuals (rather than couples), so that spouses/partners within PSID families each received their own credentials. Upon completion of the survey, individuals were sent a check from the University of Michigan in the amount of \$20.

Follow-up Procedures

To encourage participation, non-respondents were sent bi-weekly reminders, alternating email notifications (available for 66% of the sample) with hard copy re-mailing of credentials. At week 6, an additional paper copy was sent to the choice sample. Also beginning in week 6, follow-up phone calls were made to remind respondents to complete their questionnaire. Interviewers reached or left messages with about 80% of the remaining sample; and an email reminder was sent halfway through calling. A final set of mailings, which stressed that data collection was ending, consisted of either an additional mailing of credentials or both credentials and a paper copy.

Data Entry

Answers from paper copies were entered into the web application by a trained staff member. A variable has been included on the final release file indicating if the final mode was web or paper.

RESPONSE RATES, WEIGHTING AND ADJUSTING FOR NON-RESPONSE

Background on Response Rates for Internet Supplements to National Panel Studies

Only a few national panel studies that have attempted to add a supplement using web (either alone or in combination with another mode). Thus far studies have either omitted segments of the population lacking internet access or added an additional mode (e.g. face-to-face) in order to obtain adequate response rates. The 2011 Health and Retirement Study (HRS), for example, included age 50+ non-proxy respondents who *regularly used the internet* (80% response rate among about 48% of current panel members age 50+; Health and Retirement Study 2011). The German Social Survey invited *internet users who were willing to do a follow-up study and who had an email address* (40%-57% response rate among 25% of current panel members; Bandilla et al. 2012). The UKHLS Understanding Society innovations panel undertook a mixed mode survey that combined an initial web contact (45% response rate), followed by a face-to-face interview (an additional 29% response rate; see Wood and Kunz 2014 for details).

Response Rates for PSID-CRCS

This study attempted to interview all household heads and spouses/partners across all ages either through web or a paper questionnaire. 8,072 cases provided responses; 75% of cases that responded completed their survey by web and the remaining 25% by paper. The weighted response rate was 67% (unweighted 62%). Response rates reached 70% (weighted) for the sample ages 40 and older and 69% (weighted) for the SRC sample. Younger respondents and those in the immigrant and SEO oversamples had considerably lower response rates.

Weights and Adjusting for Non-Response

Sample weights that adjust for differential probabilities of selection, response to PSID core, and response to CRCS have been provided on the final release file. Weights are based on the 2013 Core PSID cross-sectional individual weight, which is described in a technical working paper available at http://www.psidonline.isr.umich.edu/data/weights/cross_sec_weights_13.pdf. --These base weights were then adjusted for differential non-response using 1 / weighted probability of responding for the following groups:

Age Group	Sample	Education in 2011	Gender	N	RR	1/RR
Age <40	SEO/Imm	<HS/Missing	Male	299	0.397	2.519
Age 40-59	SEO/Imm	<HS/Missing	Male	161	0.489	2.047
Age 60+	SEO/Imm	<HS/Missing	Male	68	0.591	1.693
Age <40	SRC	<HS/Missing	Male	375	0.520	1.942
Age 40-59	SRC	<HS/Missing	Male	205	0.624	1.603
Age 60+	SRC	<HS/Missing	Male	111	0.678	1.476
Age <40	SEO/Imm	HS/Some Col	Male	542	0.361	2.767
Age 40-59	SEO/Imm	HS/Some Col	Male	407	0.525	1.903
Age 60+	SEO/Imm	HS/Some Col	Male	103	0.603	1.657
Age <40	SRC	HS/Some Col	Male	886	0.558	1.792
Age 40-59	SRC	HS/Some Col	Male	816	0.637	1.571
Age 60+	SRC	HS/Some Col	Male	449	0.698	1.433
Age <40	SEO/Imm	College+	Male	107	0.596	1.678
Age 40-59 / 60+	SEO/Imm	College+	Male	126	0.545	1.834
Age <40	SRC	College+	Male	388	0.734	1.363
Age 40-59	SRC	College+	Male	421	0.721	1.388
Age 60+	SRC	College+	Male	357	0.795	1.257
Age <40	SEO/Imm	<HS/Missing	Female	342	0.458	2.182
Age 40-59	SEO/Imm	<HS/Missing	Female	231	0.609	1.642
Age 60+	SEO/Imm	<HS/Missing	Female	98	0.639	1.565
Age <40	SRC	<HS/Missing	Female	356	0.595	1.680
Age 40-59	SRC	<HS/Missing	Female	237	0.645	1.550
Age 60+	SRC	<HS/Missing	Female	135	0.720	1.389
Age <40	SEO/Imm	HS/Some Col	Female	826	0.484	2.067
Age 40-59	SEO/Imm	HS/Some Col	Female	631	0.598	1.671
Age 60+	SEO/Imm	HS/Some Col or College+	Female	212	0.622	1.607
Age <40	SRC	HS/Some Col	Female	953	0.621	1.615
Age 40-59	SRC	HS/Some Col	Female	895	0.706	1.415
Age 60+	SRC	HS/Some Col	Female	629	0.760	1.316
Age <40	SEO/Imm	College+	Female	190	0.736	1.359
Age 40-59	SEO/Imm	College+	Female	133	0.606	1.650
Age <40	SRC	College+	Male	574	0.785	1.274
Age 40-59	SRC	College+	Male	447	0.763	1.311
Age 60+	SRC	College+	Male	275	0.817	1.224

THE PSID-CRCS FINAL DATA FILE

A final data file (N=8,072) is available here: <http://simba.isr.umich.edu/Zips/zipSupp.aspx>. Restricted variables are available under contract. Instructions for requesting restricted data are available here: <http://simba.isr.umich.edu/restricted/RestrictedUse.aspx>.

Table 2 summarizes which sections and variables are available in the public use file and which under restricted contract.

Questionnaire Items	Public Variable Names	Restricted Variable Names
IDs, Demographic Variables	CS14V1-CS14V8	
Section A	CS14V9-CS14V51	
Section B (through B29)	CS14V52-CS14V104	
Section B (B30-B53A)		CS14V105-CS14V152
Section B (B54-B55)	CS14V153-CS14V159	
Section C	CS14V160-CS14V178	
Section D	CS14V179-CS14V193	
Section E	CS14V194-CS14V201	
Section F	CS14V202-CS14V217	
Section G		CS14V218-CS14V241
Section H		CS14V242-CS14V277
Section J (J1-J9A)	CS14V278-CS14V286	
Section J (J10A-J13A)		CS14V287-CS14V290
Section J (J1B-J8B)	CS14V291-CS14V298	
Section J (J10B-J21)		CS14V299-CS14V310
Section K	CS14V311-CS14V314	
Weight	CS14V315	
Device Type	CS14V316	

The final release file includes variables to link to the 1968-2013 Public Release Files. To merge the PSID-CRCS data with the 1968-2013 Public Release Individual File, users should merge records where both CS14V2=ER34201 (2013 Family Interview ID Number) and CS14V3=ER34202 (2013 Sequence Number). To merge the PSID-CRCS data with the 1968-2013 Public Release Family File, users should merge records where CS14V2=ER53002 (2013 Family Interview ID Number).

REFERENCES

- Bandilla, W., M.P. Couper and L. Kaczmirek. 2012. The Mode of Invitation for Web Surveys. *Survey Practice*. 5 (3).
- Beier, S.R., Rosenfeld, W.D., Spitalny, K.C., Zansky, S.M., and Bontempo, A.N. (2000). The potential role of an adult mentor in influencing high-risk behaviors in adolescents. *Archives of Pediatric Adolescent Medicine*, 154 (4):327– 331.
- Belli, R.F., Shay, W.L., and Stafford, F.P. (2001). Event history calendars and question list surveys. *Public Opinion Quarterly*, 65:45-74.

- Bureau of Labor Statistics, U.S. Department of Labor, and National Institute for Child Health and Human Development. Children of the NLSY79, 1979-2010. Produced and distributed by the Center for Human Resource Research, The Ohio State University. Columbus, OH: 2012.
- Bureau of Labor Statistics, U.S. Department of Labor. National Longitudinal Survey of Youth 1997 cohort, 1997-2011 (rounds 1-15). Produced by the National Opinion Research Center, the University of Chicago and distributed by the Center for Human Resource Research, The Ohio State University. Columbus, OH: 2013.
- Case, A., Fertig, A., and Paxson, C. (2005). The Lasting Impact of Childhood Health and Circumstance. *Journal of Health Economics*, 24(2), 365-89.
- Case, A., Lubotsky, D., and Paxson, C. (2002). Economic Status and Health in Childhood: The Origins of the Gradient. *American Economic Review*, 92(5), 1308-34.
- Health and Retirement Study (2011). Data Description: Internet Survey, Final, Version 1.0, January 2012. Available at http://hrsonline.isr.umich.edu/modules/meta/2011/internet/desc/net11_dd.pdf
- Kessler, R.C., National Comorbidity Survey: Baseline (NCS-1), 1990-1992. ICPSR06693-v6. Ann Arbor, MI: Inter-university Consortium for Political and Social Research [distributor], 2008-09-12. <http://doi.org/10.3886/ICPSR06693.v6>
- Kessler R.C., Foster, C.L., Saunders, W.B., and Stang P.E. (1996). Social Consequences of Psychiatric Disorders, I: Educational Attainment. *American Journal of Psychiatry*, 152, 1026-1032.
- McGonagle, K.A., Schoeni, R.F., Sastry, N., and Freedman, V.A. (2012). The Panel Study of Income Dynamics: Overview, Recent Innovations, and Potential for Life Course Research. *Longitudinal and Life Course Studies*, 3(2): 268-284. PMID: PMC3591471
- National Survey of Midlife Development in the United States (MIDUS I), 1995-1996.
- Roosa, M.W., Deng, S., Ryu, E., Burrell, G.L., Tein, J-Y., Jones S., et al. (2005). Family and child characteristics linking neighborhood context and child externalizing behavior. *Journal of Marriage and the Family*, 67:515-529.
- Smith, J.P. (2009). The Impact of Childhood Health on Adult Labor Market Outcomes. *The Review of Economics and Statistics*, 91(3), 478-489.
- Smith, J.P. (2007). The Impact of Socioeconomic Status on Health over the Life-Course. *Journal of Human Resources*, 42(4), 739-764.
- Straus, M.A. (1979). Measuring Intrafamily Conflict and Violence: The Conflict Tactics (CT) Scales. *Journal of Marriage and Family*, 41(1):75-88.
- Wood, M. & Kunz, S. (2014). CAWI in a mixed mode longitudinal design. *Understanding Society Working Paper Series No. 2014-07*