

Guide to Content of the HRS Psychosocial Leave-Behind Participant Lifestyle Questionnaires: 2004 & 2006

Documentation Report Version 2.0

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Introduction

Background

In 2004, HRS added a new feature for data collection in the form of self-administered questionnaires that were left with respondents upon the completion of an in-person Core Interview. These are referred to as Leave-Behind Questionnaires and electronic versions of the questionnaires are included in the 2004 Final release and 2006 Early Release. The purpose of the Leave-Behind Questionnaire is to collect additional information from respondents without adding to the interview length. Two separate questionnaires on different topics were included in HRS 2004: a) Participant Lifestyle Questionnaire, which measures psychosocial issues that are described in much more detail later in this report, and b) Participant Questionnaire on Work and Health, which included a series of disability vignettes in which people with various levels of physical and mental health impairment were described and respondents were asked to indicate the extent to which they think the person described is limited in the kind or amount of work they can do. At the beginning of the vignettes, respondents were asked to rate their own degree of limitation in the kind or amount of work they can do.

The Participant Lifestyle Questionnaire: Addition of Psychosocial Measures in the HRS Since its inception in 1992, the HRS survey has focused on the health, economics, and demographics of aging and the retirement process, and the assessment of psychosocial issues in aging was not a goal of the HRS. In 2003, the NIA-HRS Data Monitoring Committee commissioned a report by Professor Carol Ryff of the University of Wisconsin, which described the research opportunities from expansion into this area. This report can be found online at the following site:

http://hrsonline.isr.umich.edu/papers/dmc/HRSReview-RyffPsychosocialVariables.pdf

The launch of the English Longitudinal Study of Ageing (ELSA) in 2002 provided a starting-point model for psychosocial data collection in HRS. The HRS then formed a Working Group under the direction of Jim House to consider content and methods toward four aims: 1) to determine the extent to which psychosocial measures may improve understanding of causes and effects of health, well-being, and retirement in middle and later life, 2) to improve understanding of social disparities in health, and 3) to increase utilization of HRS data by researchers in additional social science fields, including social epidemiology, social gerontology, and psychology, and 4) to facilitate the cross-cultural comparison of data from the English Longitudinal Study of Ageing (ELSA; http://www.ifs.org.uk/elsa/index.php) and the Survey of Health, Aging, and Retirement in Europe (SHARE; http://www.share-project.org/).

In 2004, the HRS Psychosocial Working Group developed a pilot Participant Lifestyle Questionnaire and administered it as a leave-behind self-administered questionnaire to a pilot sample of about 4,000 respondents. In 2005, the scientific review of the HRS renewal proposal strongly endorsed this new content and recommended an approach more strongly grounded in psychological theory than that taken by ELSA. In conjunction with a subcommittee of the NIA-HRS Data Monitoring Committee (Lisa Berkman, John Cacioppo, Nicholas Christakis, and Carol Ryff), the HRS consulted widely with experts in the psychology of aging and conducted a workshop at the Annual Meeting of the Gerontological Society of America in Orlando, FL on

November 18, 2005. The purpose of this meeting was to review the data collected from the pilot study, and discuss plans for a revised survey to be administered in 2006.

Participants at the November 18, 2005 Psychosocial Workshop included:

Toni Antonucci, University of Michigan

Elizabeth Breeze, University College, London

Deborah Carr, Rutgers University

Philippa Clarke, University of Michigan

Sheldon Cohen, Carnegie Mellon University

Eileen Crimmins, University of Southern California

Gwenith Fisher, University of Michigan

Robert Hauser, University of Wisconsin

Tess Hauser, University of Wisconsin

Jim House, University of Michigan

James Jackson, University of Michigan

Margie Lachman, Brandeis University

John J. McArdle, University of Southern California

Carol Ryff, University of Wisconsin

Richard Schulz, University of Pittsburgh

Jacqui Smith, Max Planck Institute of Human Development, now University of Michigan

Ron Spiro, VA Boston Healthcare System and Boston University

David Weir, University of Michigan

Robert Willis, University of Michigan

2004 Survey Methodology

In the 2004 wave of HRS, one of two leave-behind questionnaires was administered to a random subsample of living, non-institutionalized respondents who completed face-to-face interviews in that wave. The leave-behind questionnaires were designed as self-administered questionnaires and they were left with the selected respondents at the end of the interview. Respondents were asked to complete the questionnaire and mail it back to the main field office at the University of Michigan. The Participant Questionnaire on Work and Health One consisted of a series of work disability vignettes and was targeted toward respondents under 75 years of age, and the Participant Lifestyle Questionnaire contained questions on psychosocial topics and was administered to respondents of all ages.

Leave-behind questionnaires were administered to a random sample of respondents who were not in a nursing home and interviewed in-person in HRS 2004. Administration of the leave-behind questionnaires began around April 27 and continued through the end of the 2004 field period. Questionnaire assignments were made by Primary Sampling Unit (PSU) in such a way as to provide roughly equal numbers of respondents for each of the two leave-behind questionnaires. A random sample of the non-self-representing PSUs (roughly one-half) were

assigned to the Participant Lifestyle Questionnaire and the remaining non self-representing PSUs were assigned to the Participant Questionnaire on Work and Health. In self-representing PSUs, the sample was split so that roughly one-half of the segments within each PSU received each type of questionnaire. In households containing two respondents, both respondents received the same type of questionnaire.

<u>Response rate</u>: Among respondents who completed a core interview in 2004 and were eligible for the psychosocial leave-behind, the response rate is 76.8%. Factoring in the 2004 core response rate of 88.9%, the overall response rate is 68.3%.

2006 Survey Methodology

In 2006, the updated and revised psychosocial questionnaire Participant Lifestyle Questionnaire was administered, but the disability questionnaire (the Participant Questionnaire on Work and Health) was not repeated in 2006. In 2006, HRS respondents received a questionnaire if they were selected for the enhanced FTF interview as long as they were alive and either they or a proxy completed at least part of the interview in person. Telephone follow-ups were conducted with respondents who had not returned a questionnaire after the second reminder notice.

Response rate: In 2006 the response rate of leavebehind questionnaires was about 90% among persons who completed the enhanced face-to-face interview themselves. Among all those assigned to get the enhanced interview who completed any sort of interview, the response rate was about 82%. Factoring in the 2006 core response rate of 90% for those assigned to enhanced face-to-face, the overall response rate was about 74%.

Weighting

Because not all HRS respondents were asked to complete a psychosocial questionnaire, separate respondent-level survey weights have been constructed to adjust for the sample selection. The sample weight for the 2004 questionnaire will be available in the tracker file, with the variable name JWGTR_PSYSOC.

The 2004 psychosocial leave behind respondent weight is the product of two factors: a) the HRS respondent-level weight for the 2004 wave, and b) a non-response adjustment factor. The non-response adjustment factor was obtained from a propensity model predicting the probability of completing the psychosocial leave-behind questionnaire among all eligible cases. The propensity model was estimated by logistic regression and weighted by the HRS respondent-level weight. Predictor variables included age, sex, race/ethnicity, language of interview, coupleness, education, work status, self-rated health, a dichotomous indicator of chronic disease, vision rating, cognitive status, proxy status, and two general indicators of cooperativeness: whether the respondent completed an interview in the prior wave and total number of interviewer calls required to complete the 2004 interview. The inverse of the fitted probabilities of completion formed the non-response adjustment factor. The resulting weight was trimmed at the fifth and ninety-fifth percentiles. This weight is defined for respondents who completed the psychosocial leave-behind questionnaire. We recommend using the psychosocial weight when analyzing data from the psychosocial questionnaire.

The 2006 psychosocial sample weight is still in the development process. Additional details concerning how this weight was constructed will be provided once this weight variable has been released.

Special Methodological Issues to Consider

Response Scales

The Participant Lifestyle Questionnaire is comprised of a variety of items and scales that are described in more detail later in this document. Please note that the response categories in the questionnaire vary across scales, and it is very important to consult the codebook questionnaire (available on the HRS website) to know what the response options were for each item. The specific response scales that are used differ throughout questionnaire in order to maintain comparability with response scales used in other surveys (e.g., ELSA, SHARE, MIDUS), previous research literature, and occasionally due to practical constraints.

Recoding Responses and Negative Wording of Survey Items

Many of the items within measures in the questionnaire will need to be recoded so that higher values correspond with higher levels on a given item or measure. For example, the positive affect items in Question 27 are asked using a scale as follows: 1=All of the time, 2=Most of the time, 3=some of the time, 4=A little of the time, and 5=None of the time. By recoding the values so that 1=None of the time, 2=a little of the time, etc., higher values will correspond to higher levels of positive affect.

In addition, items vary in terms of being positively and negatively worded. This is a practice frequently employed in the assessment of psychosocial issues to combat response sets (e.g., when a respondent circles the same answer for every question). The values for negatively worded items need to be reversed so that a total positively-oriented score may be obtained. For example, Question 22d to assess control reads "I have little control over the things that happen to me." The values on this item will need to be recoded in order to be consistent with other items where higher values indicate having more control when combining values on this item with other items in this scale. Wherever possible, this documentation report provides information and guidance to assist with determining when items need to be reverse-coded.

Who Completed the Questionnaire?

Question 51 was asked at the end of the survey: "Were the questions in this booklet answered by the person whose name is written on the front cover, or did someone else provide their own answers?" This question was asked so that the data collected on this questionnaire can be properly matched with other data files containing information pertaining to the same respondent. For example, if the person to whom the questionnaire was given does not answer the questions and instead another person in the household completes the survey him/herself (rather than as a proxy or on behalf of the person for whom the questionnaire is intended), then information from this survey cannot necessarily be accurately merged with other HRS data files containing information.

A Word to Readers

This report is intended to provide users with a summary of the topics covered in the 2004 and 2006 HRS psychosocial self-administered questionnaires. The questionnaires differ in some respects, such as the inclusion of more topics in 2006 and the different numbering of questions. In order to provide a method for easy comparison between the two questionnaires, the topic section is listed first in the order of the 2006 questionnaire with the 2004 question numbers underneath. Three topics are covered in 2004 that are not addressed in 2006. These sections are provided at the end of the report. Appendix A includes a concordance table that illustrates question numbers and content in the 2004 and 2006 questionnaires.

Survey Content

Q. 1 Social Participation

Q. 1 (2004)

These 8 items are used as indicators of social participation.

Source:

Adapted from ELSA

8 items (Q01a – Q01h) Items: (Which of these statements apply to you?) Q01a I read a daily newspaper. Q01b I have a hobby or a pastime. O01c I have taken a vacation within the US in the last 12 months. I have taken a vacation outside the US in the last 12 months. Q01d Q01e I have gone on a daytrip or outing in the last 12 months. I use the internet and/or email. Q01f Q01g I own a cell phone. Q01h None of these statements apply to me.

Coding: 1=Yes, 5=No

Q. 2 Social Integration

Q. 2 (2004)

This question captures the degree of embeddedness in social networks (clubs, groups, etc.) in terms of the frequency of social interaction within this network.

Items: 1 item (Q02)

(Not including attendance at religious services, how often do you attend meetings or programs of groups, clubs, or organizations that you belong to?)

Coding: 1=More than once a week, 2=Once a week, 3=2 or 3 times a month, 4=About

once a month, 5=Less than once a month, 6=Never. (Note that unless you recode

the scale, higher values will correspond to less social integration.)

Q. 3 Life Satisfaction

Q. 5 (2004)

This is Diener's measure of life satisfaction, an established measure of subjective well-being with extensive evidence of reliability and construct validity. The measure was also included in the 2004 Pilot SAQ (alpha reliability=.90).

Source:

Diener, E., Emmons, R. A., Larsen, R. J., & Griffin, S. (1985). The satisfaction with life scale. *Journal of Personality Assessment*, 49(1), 71-75.

Pavot, W., & Diener, E. (1993). Review of the satisfaction with life scale. *Psychological Assessment*, 5(2), 164-172.

<u>Items:</u> 5 items (Q03a – Q03e)

(Please say how much you agree or disagree with the following statements.)

Q03a In most ways my life is close to ideal.

Q03b The conditions of my life are excellent.

Q03c I am satisfied with my life.

Q03d So far, I have gotten the important things I want in life.

Q03e If I could live my life again, I would change almost nothing

Coding: 1=Strongly disagree, 2=Somewhat disagree, 3=Slightly disagree, 4=Slightly

agree, 5=Somewhat agree, 6=Strongly agree

Scaling: Create in index of life satisfaction by averaging the scores across all 5 items. Set

the final score to missing if there are three or more items with missing values.

Psychometrics: Alpha = .89

Background:

Diener, E., & Seligman, M. E. P. (2004). Beyond money: toward an economy of well-being. *Psychological Science in the Public Interest*, *5*(1), 1-31.

Diener, E., Suh, E. M., Lucas, R. E., & Smith, H. L. (1999). Subjective well-being: three decades of progress. *Psychological Bulletin*, 125(2), 276-302.

Q. 4 – Q. 18 Social Support

Q. 7-Q. 21 (2004)

This is a series of questions assessing social integration (number of social ties) and the quality of interaction with those social ties. Separate questions are asked about spouse/partner (Q.5-6), children (Q.8-10), family (Q. 12-14), and friends (Q. 16-18). For each relationship category there are 3 positively worded items (items a-c) and 4 negatively worded items (items d-g).

Source:

<u>Items:</u>

(Please check the answer which best shows how you feel about each statement.)

Positive Social Support (items a-c)

- a How much do they really understand the way you feel about things?
- b How much can you rely on them if you have a serious problem?
- c How much can you open up to them if you need to talk about your worries?

Negative Social Support (items d-g)

- d How often do they make too many demands on you?
- e How much do they criticize you?
- f How much do they let you down when you are counting on them?
- g How much do they get on your nerves?

Coding: 1=A lot, 2=Some, 3=A little, 4=Not at all.

Scaling: Create an index of social support for each relationship category by

averaging the scores within each dimension. Set the final score to missing if there is more than one item with missing values for the positive social support scale, or more than two items with missing values for the negative

social support scale.

Psychometrics:

Alpha Reliability Across 4 Relationship Categories

	Spouse	Children	Other Family	Friends
Positive Social Support	.81	.83	.86	.84
Negative Social Support	.78	.78	.78	.76

Q. 19 (items a-e) Cynical Hostility

Q. 6 (items t-x) (2004)

These five items from the Cook-Medley Hostility Inventory have been used in several important studies evaluating potential health consequences of hostility. The measure was also included in the 2004 Pilot SAQ (alpha reliability=.85, factor loadings range from .63 to .81).

Source:

Cook, W. W., & Medley, D. M. (1954). Proposed hostility and pharisaic-virtue scales for the MMPI. *The Journal of Applied Psychology*, 38(6), 414-418.

Costa, P. T., Zonderman, A. B., McCrae, R. R., & Williams, R. B. (1986). Cynicism and paranoid alienation in the Cook and Medley HO Scale. *Psychosomatic Medicine*, 48(3/4), 283-285.

Items: 5 items (Q19a-Q19e)

(Please say how much you agree or disagree with the following statements:)

Q19a Most people inwardly dislike putting themselves out to help other people

Q19b Most people will use somewhat unfair means to gain profit or an advantage rather

than lose it.

Q19c No one cares much what happens to you.

Q19d I think most people would lie in order to get ahead.

Q19e I commonly wonder what hidden reasons another person may have for doing

something nice for me.

<u>Coding:</u> 1=Strongly disagree, 2=Somewhat disagree, 3=Slightly disagree,

4=Slightly agree, 5=Somewhat agree, 6=Strongly agree

Scaling: Create an index of cynical hostility by averaging the scores across all

items. Set the final score to missing if there are more than three items with

missing values.

<u>Psychometrics:</u> Alpha = .79

Background:

Eckhardt, C., Norlander, B., & Deffenbacher, J. (2004). The assessment of anger and hostility: A critical review. *Aggression and Violent Behavior*, 9, 17-43.

Q. 19 (items f-k) Optimism/Pessimism

Q. 6 (items n-s) (2004)

These items tap dispositional optimism and pessimism. The measure was also included in the 2004 Pilot SAQ. A slightly modified version appears in SHARE.

Source:

Scheier, M. F., Carver, C. S., & Bridges, M. W. (1994). Distinguishing optimism from neuroticism (and trait anxiety, self-mastery, and self-esteem): A reevaluation of the Life Orientation Test. *Journal of Personality and Social Psychology*, 67(6), 1063-1078.

Items: 6 items (Q19f-Q19k)

(Please say how much you agree or disagree with the following statements:)

Q19f If something can go wrong for me it will. Q19g I'm always optimistic about my future.

Q19h In uncertain times, I usually expect the best.

Q19i Overall, I expect more good things to happen to me than bad.

Q19j I hardly ever expect things to go my way.

Q19k I rarely count on good things happening to me.

Coding: 1=Strongly disagree, 2=Somewhat disagree, 3=Slightly disagree,

4=Slightly agree, 5=Somewhat agree, 6=Strongly agree

Scaling: Create an index of optimism by averaging the scores across items Q19g,

Q19h, and Q19i. Set the optimism score to missing if there is more than

one item with missing values.

Create an index of pessimism by averaging the scores across items Q19f, Q19j, and Q19k. Set the pessimism score to missing if there is more than

one item with missing values.

Psychometrics: Optimism Alpha = .80

Pessimism Alpha = .77

Background:

Peterson, C. (2000). The future of optimism. *American Psychologist*, 55(1), 44-45.

Taylor, S. E., Kemeny, M. E., Reed, G. M., Bower, J. E., & Gruenewald, T. L. (2000). Psychological resources, positive illusions, and health. *American Psychologist*, *55*(1), 99-109.

Q. 19 (items l-o) Hopelessness

Q. 6 (items k-m) (2004)

This measure consists of two items from Everson et al. (Q. 19l-m) and two from Beck et al. (Q19n-o). It was also included in the 2004 Pilot SAQ (alpha reliability = .87).

Source:

Beck, A. T., Weissman, A., Lester, D., & Trexler, L. (1974). The measurement of pessimism: The hopelessness scale. *Journal of Consulting and Clinical Psychology*, 42(6), 861-865.

Everson, S. A., Kaplan, G. A., Goldberg, D. E., Salonen, R., & Salonen, J. T. (1997). Hopelessness and 4-year progression of carotid atherosclerosis: The Kuopio Ischemic Heart Disease Risk Factor Study. *Arteriosclerosis, Thrombosis, and Vascular Biology,* 17, 1490-1495.

<u>Items:</u> 4 items (Q191-Q190)

(*Please say how much you agree or disagree with the following statements:*)

Q191 I feel it is impossible for me to reach the goals that I would like to strive for.

Q19m The future seems hopeless to me and I can't believe that things are changing for

the better.

Q19n I don't expect to get what I really want.

Q190 There's no use in really trying to get something I want because I probably won't

get it.

<u>Coding:</u> 1=Strongly disagree, 2=Somewhat disagree, 3=Slightly disagree,

4=Slightly agree, 5=Somewhat agree, 6=Strongly agree

Scaling: Create an index of hopelessness by averaging the scores across all items.

Set the final score to missing if there are more than two items with missing

values.

Psychometrics: Alpha = .86

Q. 20 Loneliness

Q. 4 (2004)

This measure was developed by Hughes and colleagues in 2004 to assess loneliness in large scale surveys. The measure was also included in the 2004 Pilot SAQ

Source:

Hughes, M. E., Waite, L. J., Hawkley, L. C., & Cacioppo, J. T. (2004). A short scale for measuring loneliness in large surveys: results from two population-based studies. *Research on Aging*, 655-672.

Items: 3 items (Q20a-Q20c)

(The next questions are about how you feel about different aspects of your life. For each one, please say how often you feel that way.)

Q20a How often do you feel you lack companionship?

Q20b How often do you feel left out?

Q20c How often do you feel isolated from others?

<u>Coding:</u> 1=Often, 2=Some of the time, 3=Hardly ever or never

Scaling: Create an index of loneliness by reverse-scoring the 3 items and averaging

the scores across all items. Set the final score to missing if there is more

than one item with missing values.

<u>Psychometrics:</u> Alpha = .82

Background:

Cacioppo, J. T., Hawkley, L. C., Crawford, E., Ernst, J. M., Burleson, M. H., Kowalewski, R. B., et al. (2002). Loneliness and health: potential mechanisms *Psychosomatic Medicine*, 407-417.

Pinquart, M., & Sorensen, S. (2001). Influences on loneliness in older adults: a meta-analysis. *Basic and Applied Social Psychology*, 23(4), 245-266.

Q. 21 Neighborhood Disorder/Neighborhood Social Cohesion

(Not Included in 2004)

The measure taps two dimensions of neighborhood context: (i) physical disorder (vandalism/graffiti, rubbish, vacant/deserted houses, crime); and (ii) social cohesion/social trust (I feel part of this area, trust people, people are friendly, people will help you).

Source: ???

A modified version also appears in ELSA

Items: 8 items (Q21a-Q21h)

(These questions ask how you feel about your local area, that is everywhere within a 20 minute walk or about a mile of your home)

Q21a I really feel part of this area/I feel that I don't belong in this area

Q21b Vandalism and graffiti are a big problem in this area/There is no problem with

vandalism and graffiti in this area

Q21c Most people in this area can be trusted/Most people in this area can't be trusted

Q21d People would be afraid to walk alone in this area after dark/People feel safe

walking alone in this area after dark

Q21e Most people in this area are friendly/Most people in this area are unfriendly

Q21f This area is kept very clean/This area is always full of rubbish and litter

Q21g If you were in trouble, there are lots of people in this area who would help you/If

you were in trouble, there is nobody in this area who would help you

Q21h There are many vacant or deserted houses or storefronts in this area/There are no

vacant or deserted houses or storefronts in this area.

Coding: 7 point scale (range 1-7)

Scaling: Create an index of neighborhood physical disorder (items 21b, 21d, 21f,

21h) by reverse-scoring items 21b, 21d and 21h and averaging the scores across all 4 items. Set the final score to missing if there are more than two

items with missing values.

Create an index of neighborhood social cohesion (items 21a, 21c, 21e, 21g) by reverse-scoring all items and averaging the scores across all 4 items. Set the final score to missing if there are more than two items with

missing values.

<u>Psychometrics:</u> Neighborhood Physical Disorder: Alpha = .64

Neighborhood Social Cohesion: Alpha = .82

Q. 22-23 Sense of Control

(Not Included in 2004)

These measures are based on the Midlife Developmental Inventory (MIDI). Also appears in MIDUS (waves 1 and 2)

Source:

Lachman, M. E., & Weaver, S. L. (1998). The sense of control as a moderator of social class differences in health and well-being. *Journal of Personality and Social Psychology*, 74(3), 763-773.

Pearlin, L. I., & Schooler, C. (1978). The structure of coping. *Journal of Health and Social Behavior*, 19(1), 2-21.

Items: 5 items for constraints (Q22a-Q22e); 5 items for mastery (Q23a-Q23e) (Please say how much you agree or disagree with the following statements.)

Q22a I often feel helpless in dealing with the problems of life.

Q22b Other people determine most of what I can and cannot do.

Q22c What happens in my life is often beyond my control.

Q22d I have little control over the things that happen to me.

Q22e There is really no way I can solve the problems I have.

Q23a I can do just about anything I really set my mind to.

Q23b When I really want to do something, I usually find a way to succeed at it.

Q23c Whether or not I am able to get what I want is in my own hands.

Q23d What happens to me in the future mostly depends on me.

Q23e I can do the things that I want to do.

Coding: 1=Strongly disagree, 2=Somewhat disagree, 3=Slightly disagree,

4=Slightly agree, 5=Somewhat agree, 6=Strongly agree

<u>Scaling:</u> Create an index of Constraints by averaging the scores across items Q22a-

Q22e. Set the final score to missing if there are more than three items with missing values. Create and index of Mastery by averaging the scores across items Q23a-Q23e. Set the final score to missing if there are more

than three items with missing values.

Psychometrics: Constraints: Alpha = .86 Mastery: Alpha = .89

Background:

Skinner, E. A. (1996). Personality processes and individual differences: A guide to constructs of control. Journal of Personality and Social Psychology, 71(3), 549-570.

Q. 24-26 Domain Specific Control

(Not Included in 2004)

Three single-item measures of domain specific control (health (Q24), work (Q25), and finances (Q26) that come directly from MIDUS.

Coding: 10 point scale

Q. 27 Positive and Negative Affect

(Not Included in 2004)

These 12 items are used in MIDUS.

Source:

Mroczek, D. K., & Kolarz, C. M. (1998). The effect of age on positive and negative affect: a developmental perspective on happiness. Journal of Personality and Social Psychology, 75(5), 1333-1349.

<u>Items:</u> 6 items for positive affect (Q.27a-f) and 6 items for negative affect (Q.27i-n). (During the last 30 days, about how often did you feel...?)

Positive Affect

Q27a	cheerful?
Q27b	in good spirits?
Q27c	extremely happy?
Q27d	calm and peaceful?
Q27e	satisfied?
Q27f	full of life?

Negative Affect

Q27i	so depressed that nothing could cheer you up?
Q27j	hopeless?
Q27k	restless or fidgety?
Q271	that everything was an effort?

Q27m worthless? Q27n nervous?

1=All of the time, 2=Most of the time, 3=Some of the time, 4=A little of Coding: the time, 5=None of the time

Scaling: Create an index of positive affect by reverse-coding items Q27a-Q27f and

averaging the scores across all 6 items. Set the final score to missing if

there are more than three items with missing values.

Create and index of negative affect by reverse-coding items Q27i-Q27n and averaging the scores across all 6 items. Set the final score to missing if

there are more than three items with missing values.

<u>Psychometrics:</u> Positive affect: Alpha = .92

Negative affect: Alpha = .88

Additional items in Q27 correspond to the same CES-D items in the core HRS that assess depressive symptoms. The eight psychosocial questionnaire items that map to the HRS core depressive symptoms items are as follows: Q27g, Q27h, Q27i, Q27l, Q27o, Q27p, Q27q, Q27r.

Background:

Watson, D., Wiese, D., Vaidya, J., & Tellegen, A. (1999). The two general activation systems of affect: structural findings, evolutionary considerations, and psychobiological evidence. *Journal of Personality and Social Psychology*, 76(5), 820-838.

Watson, D. (1988). The vicissitudes of mood measurement: effects of varying descriptors, time frames, and response formats on measures of positive and negative affect. *Journal of Personality and Social Psychology*, 55(1), 128-141.

Q. 28-29 Religiosity/Spirituality & Prayer Frequency

(Not Included in 2004)

These 4 items are designed to tap religious beliefs, meaning and values. (*Note: Religious affiliation and attendance are already collected in the Demographics section of the core HRS.*)

Source:

Fetzer Institute. (2003). Brief Multidimensional Measure of Religiousness/Spirituality: 1999. In N. W. Group (Ed.), *Multidimensional measurement of religiousness/spirituality for use in health research: A report of the Fetzer Institute/National Institute on Aging Working Group* (2nd ed., pp. 85-88). Kalamazoo, MI: John E. Fetzer Institute.

Religiosity/Spirituality

Items: 4 items (Q28a-Q28d)

(Please say how much you agree or disagree with each of the following statements)

Q28a I believe in a God who watches over me.

Q28b The events in my life unfold according to a divine or greater plan.

Q28c I try hard to carry my religious beliefs over into all my other dealings in life.

Q28d I find strength and comfort in my religion.

Coding: 1=Strongly disagree, 2=Somewhat disagree, 3=Slightly disagree, 4=Slightly

agree, 5=Somewhat agree, 6=Strongly agree

<u>Scaling:</u> Create an index of religiosity by averaging the scores across all 4 items. Set the

final score to missing if there are more than two items with missing values.

<u>Psychometrics:</u> Alpha = .92

Q. 29 Frequency of Prayer

How often do you pray privately in places other than at church or synagogue?

Coding: 1=More than once a day, 2=Once a day, 3=A few times a week, 4=Once a week

5=A few times a month, 6=Once a month, 7=Less than once a month, 8=Never

<u>Scaling:</u> Reverse-code the score to create a measure of the frequency of prayer.

Q. 30 Everyday Discrimination

(Not Included in 2004)

These 5 items are designed to tap into the hassles and chronic stress associated with perceived everyday discrimination. Q. 31 is a follow-up question which asks about this reason attributed to the discrimination. Similar questions are in MIDUS.

Source:

Williams, D. R., Yu, Y., Jackson, J. S., & Anderson, N. B. (1997). Racial differences in physical and mental health: socio-economic status, stress and discrimination. *Journal of Health Psychology*, 2, 335-351.

Items: 5 items (Q30a-Q30e)

(In your day-to-day life how often have any of the following things happened to you?)

Q30a You are treated with less courtesy or respect than other people.

Q30b You receive poorer service than other people at restaurants or stores.

Q30c People act as if they think you are not smart.

Q30d People act as if they are afraid of you.

Q30e You are threatened or harassed.

Coding: 1=Almost everyday, 2=At least once a week, 3=A few times a month, 4=A

few times a year, 5=Less than once a year, 6=Never

Scaling: Create an index of discrimination by reverse-coding all items and averaging

the scores across all 5 items. Set the final score to missing if there are more

than three items with missing values.

<u>Psychometrics:</u> Alpha = .80

Q. 31 Attributions of Everyday Discrimination

(Not Included in 2004)

(If any of the above have happened to you, what do you think were the reasons why these experiences happened to you? (Mark (X) all that apply.)

Q31M1	Your ancestry or national origin
Q31M2	Your gender
Q31M3	Your race
Q31M4	Your age
Q31M5	Your weight
Q31M6	A physical disability
Q31M7	Other aspect of your physical appearance
Q31M8	Your sexual orientation
Q31M9	Other

Background:

Kessler, R. C., Mickelson, K. D., & Williams, D. R. (1999). The prevalence, distribution, and mental health correlates of perceived discrimination in the United States. *Journal of Health and Social Behavior*, 40(3), 208-230.

Q. 32 Balance/Reciprocity

(Not Included in 2004)

Source: (Also appears in SHARE)

Items: 3 items (Q32a-Q32c)

(The following statements are about people's expectations of each other. Please tell us how much you agree or disagree with each statement for you personally.)

Q32a I have always been satisfied with the balance between what I have given my

partner and what I have received in return

Q32b I have always received adequate appreciation for providing help in my family

Q32c In my current major activity (job, looking after home, voluntary work) I have

always been satisfied with the rewards I received for my efforts

<u>Coding:</u> 1=Strongly disagree, 2=Disagree, 3=Neither agree nor disagree, 4=Agree,

5=Strongly agree, 6=Does not apply

Scaling: Create an index by averaging scores across items. Set the final score to

missing if there is more than one item with missing values.

<u>Psychometrics:</u> Alpha=.73

Q. 33 Personality

(Not Included in 2004)

These 26 items tap the 'Big 5' personality items (Neuroticism, Extraversion, Openness to Experience, Agreeableness, and Conscientiousness).

Source:

Lachman, M. E., & Weaver, S. L. (1997). Midlife Development Inventory (MIDI) personality scales: Scale construction and scoring. Unpublished Technical Report. Brandeis University.(http://www.brandeis.edu/projects/lifespan/scales.html)

Also appears in MIDUS.

<u>Items:</u>	26 items (Q33a-Q33z)				
(Please indica	(Please indicate how well each of the following describes you.)				
Q33a	Outgoing				
Q33b	Helpful				
Q33c	Moody				
Q33d	Organized				
Q33e	Friendly				
Q33f	Warm				
Q33g	Worrying				
Q33h	Responsible				
Q33i	Lively				
Q33j	Caring				
Q33k	Nervous				
Q331	Creative				
Q33m	Hardworking				
Q33n	Imaginative				
Q33o	Softhearted				
Q33p	Calm				
Q33q	Intelligent				
Q33r	Curious				
Q33s	Active				
Q33t	Careless				
Q33u	Broad-minded				
Q33v	Sympathetic				
Q33w	Talkative				
Q33x	Sophisticated				
Q33y	Adventurous				
Q33z	Thorough				

Coding: 1=A lot, 2=Some, 3=A little, 4=Not at all

Scaling:

Reverse-code all items EXCEPT Q33p and Q33t, and average the scores for items within sub-dimensions for Neuroticism (Q33c, Q33g, Q33k, Q33p),

Extroversion (Q33a, Q33e, Q33i, Q33s, Q33w),

Agreeableness (Q33b, Q33f, Q33j, Q33o, Q33v),

Conscientiousness (Q33d, Q33h, Q33m, Q33t, Q33z), and

Openness to Experience (Q331, Q33n, Q33q, Q33r, Q33u, Q33x, Q33y).

Set the final score to missing if more than half of the items have missing values

within each sub-dimension.

<u>Psychometrics:</u> Conscientiousness: Alpha=.67 Agreeableness: Alpha=.78

Neuroticism: Alpha=.70 Openness: Alpha=.79

Extroversion Alpha=.75

Background:

Caspi, A., Roberts, B. W., & Shiner, R. L. (2005). Personality development: Stability and change. *Annual Review of Psychology*, *56*, 453-484.

Mroczek, D. K., Spiro, A., & Griffin, P. W. (2006). Personality and aging. In J. E. Birren & K. W. Schaie (Eds.), *Handbook of the Psychology of Aging* (6th ed., pp. 363-377). Burlington, MA: Elsevier Press.

Ozer, D. J., & Benet-Martinez, V. (2006). Personality and the prediction of consequential outcomes. *Annual Review of Psychology*, *57*, 401-421.

Q. 34 Personality

(*Not Included in 2004*) This measure was included to add additional items to assess conscientiousness and neuroticism.

Source:

Donnellan MB, Oswald FL, Bard BM, Lucas RE. (2006). The Mini-IPIP scales: Tiny-yet-effective measures of the big five factors of personality. *Psychological Assessment*, 18(2), 192-203.

Items: 8 items (Q34a-Q34h)

(Please indicate how accurate each of these descriptions is of you.)

Q34a Get chores done right away. Q34b Have frequent mood swings.

Q34c Often forget to put things back in their proper place.

Q34d Am relaxed most of the time.

Q34e Like order.

Q34f Get upset easily.

Q34g Make a mess of things.

Q34h Seldom feel blue.

<u>Coding:</u> 1=Very Accurate, 2=Moderately Accurate, 3=Neither inaccurate or

accurate, 4=Moderately Inaccurate, 5=Very Inaccurate

Scaling: Reverse-code items Q34c, Q34d, Q34g, Q34h, and average the scores

across items within sub-dimensions for: conscientiousness (Q34a, Q34c,

Q34e, Q34g) and neuroticism (Q34b, Q34d, Q34f, Q34h).

<u>Psychometrics</u>: Initial exploratory factor analysis results do not support the two factors of

conscientiousness and neuroticism, and there appears to be a strong social desirability effect. The measure seems to perform poorly on its own, but it may have value when combined with Q.33. In general, the psychometric properties of the personality items in Q33 indicate stronger support for the

constructs of interest.

Q. 35 Psychological Well-Being

Q. 6 (items f-i) (2004)

These items come from the Ryff Measures of Psychological Well-being (1989). 7 items tap each of the three dimensions of well-being (the original measure assesses 6 dimensions of well-being): Purpose in Life; Personal Growth, and Self Acceptance.

Sources:

Keyes, C. L. M., Shmotkin, D., & Ryff, C. D. (2002). Optimizing well-being: The empirical encounter of two traditions. *Journal of Personality and Social Psychology*, 82(6), 1007-1022.

Ryff, C. D., & Keyes, C. L. M. (1995). The structure of psychological well-being revisited. *Journal of Personality and Social Psychology*, 69(4), 719-727.

Items: 21 items (Q35a-Q35u)

(Please read the statements below and decide the extent to which each statement describes you.)

Purpose in Life Dimension (Q35a-Q35g)

Q35a	I enjoy making plans for the future and working to make them a reality.
Q35b	My daily activities often seem trivial and unimportant to me. (-)
Q35c	I am an active person in carrying out the plans I set for myself.
Q35d	I don't have a good sense of what it is I'm trying to accomplish in life. (-)
Q35e	I sometimes feel as if I've done all there is to do in life. (-)
Q35f	I live life one day at a time and don't really think about the future. (-)
Q35g	I have a sense of direction and purpose in my life.

Personal Growth Dimension (Q35h-Q35n)

Q35h	I am not interested in activities that will expand my horizons. (-)
Q35i	I think it is important to have new experiences that challenge how I think about myself and the world.
Q35j	When I think about it, I haven't really improved much as a person over the years(-)
Q35k	I have the sense that I have developed a lot as a person over time.
Q351	I do not enjoy being in new situations that require me to change my old familiar ways of doing things. (-)
Q35m	I gave up trying to make big improvements in my life a long time ago. (-)
Q35n	For me, life has been a continuous process of learning, changing, and growth.

Self Acceptance Dimension (Q350-Q35u)

Q350 I feel like many of the people I know have gotten more out of life than I have. (-)

Q35p In general, I feel confident and positive about myself.

When I compare myself to friends and acquaintances, it makes me feel good

about who I am.

Q35r My attitude about myself is probably not as positive as most people feel about

themselves. (-)

Q35s In many ways, I feel disappointed about my achievements in life. (-)

When I look at the story of my life, I am pleased with how things have turned

out.

Q35u I like most parts of my personality

Coding: 1=Strongly disagree, 2=Somewhat disagree, 3=Slightly disagree, 4=Slightly

agree, 5=Somewhat agree, 6=Strongly agree

Scaling: Reverse-code the negatively phrased items (-) and then average the scores across

items to create an index of well-being for each dimension (ranging from 1-6), with a high score indicating positive well-being. Set the final score for each dimension to missing if there are more than three items with missing values

within each dimension.

Psychometrics: Purpose in Life: Alpha = .74

Personal Growth: Alpha = .76 Self Acceptance: Alpha = .81

Background:

Ryff, C. D. (1995). Psychological well-being in adult life. *Current Directions in Psychological Science*, *4*, 99-104.

Ryff, C. D., & Singer, B. (1998). The contours of positive human health. *Psychological Inquiry*, *9*(1), 1-28.

Q. 36 Major Experiences of Lifetime Discrimination

(Not Included in 2004)

These 6 items capture major experiences of unfair treatment.

Sources:

Williams, D. R., Yu, Y., Jackson, J. S., & Anderson, N. B. (1997). Racial differences in physical and mental health: socio-economic status, stress and discrimination. *Journal of Health Psychology*, 2, 335-351.

Items: 6 items (Q36a-Q36e)

(For each of the following events, please indicate whether the event occurred <u>AT ANY POINT</u> <u>IN YOUR LIFE</u>. If the event did happen, please indicate the year (age?) in which it happened most recently.)

Q36a	At any time in your life, have you ever been <u>unfairly</u> dismissed from a job?
Q36b	For <u>unfair</u> reasons, have you ever not been hired for a job?
Q36c	Have you ever been <u>unfairly</u> denied a promotion?
Q36d	Have you ever been <u>unfairly</u> prevented from moving into a neighborhood because the landlord or a realtor refused to sell or rent you a house or apartment?
Q36e	Have you ever been <u>unfairly</u> denied a bank loan?
Q36f	Have you ever been <u>unfairly</u> stopped, searched, questioned, physically threatened or abused by the police?

Coding: 1=Yes, 5=No

<u>Scaling:</u> A measure of major discrimination is constructed by summing the number of affirmative responses.

Background:

Kessler, R. C., Mickelson, K. D., & Williams, D. R. (1999). The prevalence, distribution, and mental health correlates of perceived discrimination in the united states. *Journal of Health and Social Behavior*, 40(3), 208-230.

Q. 37 Lifetime Traumas

Q. 27 (2004)

These 10 items come from an ongoing longitudinal study of the health consequences of trauma in older adults (Krause, et al., 2004), which developed the checklist from several sources.

Sources:

Krause, N., Shaw, B. A., & Cairney, J. (2004). A descriptive epidemiology of lifetime trauma and the physical health status of older adults. *Psychology and Aging*, 19(4), 637-648.

<u>Items:</u> 10 items (Q37a-Q37j)

(For each of the following events, please indicate whether the event occurred <u>AT ANY POINT</u> <u>IN YOUR LIFE</u>. If the event did happen, please indicate the year (age?) in which it happened most recently.)

•	
Q37a	Has a child of yours ever died?
Q37b	Have you ever been in a major fire, flood, earthquake, or other natural disaster?
Q37c	Have you ever fired a weapon in combat or been fired upon in combat?
Q37d	Has your spouse, partner, or child ever been addicted to drugs or alcohol?
Q37e	Were you the victim of a serious physical attack or assault in your life?
Q37f	Did you ever have a life-threatening illness or accident?
Q37g	Did your spouse or a child of yours ever have a life-threatening illness or accident?
Q37h	Before you were 18 years old, did you have to do a year of school over again?
Q37i	Before you were 18 years old, did either of your parents drink or use drugs so often that It caused problems in the family?
Q37j	Before you were 18 years old, were you ever physically abused by either of your parents?

Coding: 1=Yes, 5=No

Scaling: The measure can be scored by calculating a simple unweighted sum of all

traumatic events across the life course. A second set of measures can be derived by focusing on trauma arising during developmental age periods (Krause, et al.,

2004).

Background:

Turner, J. R., & Lloyd, D. A. (1995). Lifetime traumas and mental health: The significance of cumulative adversity. *Journal of Health and Social Behavior*, *36*(4), 360-376.

Q. 38 Stressful Life Events

Q. 28 (2004)

These 5 items were also in the 2004 Pilot SAQ. They tap major life events.

Source:

Turner, R. J., Wheaton, B., & Lloyd, D. A. (1995). The epidemiology of social stress. *American Sociological Review*, 60(1), 104-125.

<u>Items:</u>	5 items (Q38a-Q38e)					
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(Now please think about the last 5 YEARS of your life and indicate whether each of the events below occurred in the last 5 years).

below becarred in the last 5 years).		
Q38a	Have you involuntarily lost a job for reasons other than retirement at any point in the past five years?	
Q38b	Have you been unemployed and looking for work for longer than 3 months at some point in the past five years?	
Q38c	Was anyone else in your household unemployed and looking for work for longer than 3 months in the past five years?	
Q38d	Have you moved to a worse residence or neighborhood in the past five years?	
Q38e	Were you robbed or did you have your home burglarized in the past five years?	

Coding: 1=Yes, 5=No

Scaling: An index can be created by summing the number of positive responses to the

items.

Q. 39 Financial Strain

Q. 29 (2004)

These 2 items were in the 2004 Pilot SAQ. (Alpha reliability in 2004 SAQ=.82.)

Source: Items provided by David Williams, Harvard University

Additional reference for Q39b: Williams, Yu, Jackson, & Anderson (1997).

Items: 2 items (Q39a-Q39b)

(Please indicate which of the following choices best describes how you feel about your current financial situation.)

Q39a How satisfied are you with (your/your family's) present financial situation?

Coding: 1=Not at all satisfied, 2=Not very satisfied, 3=Somewhat satisfied, 4=Very

satisfied, 5=Completely satisfied

Q39b How difficult is it for (you/your family) to meet monthly payments on (your /your family's) bills?

Coding: 1=Not at all difficult, 2=Not very difficult, 3=Somewhat difficult, 4=Very

difficult, 5=Completely difficult

Psychometrics: Alpha = .80

Background:

Pearlin, L. I., Menaghan, E. G., Lieberman, M. A., & Mullan, J. T. (1981). The stress process. *Journal of Health and Social Behavior*, 22(4), 337-356.

.

Q. 40 Chronic Stressors

Q. 30 (2004)

These 8 items were also in the 2004 Pilot SAQ. They capture chronic stressors. (Alpha reliability=.71 in 2004 SAQ.)

Source:

Troxel, W. M., Matthews, K. A., Bromberger, J. T., & Sutton-Tyrrell, K. (2003). Chronic stress burden, discrimination, and subclinical carotid artery disease in African American and Caucasian women. *Health Psychology*, 22(3), 300-309.

Items: 8 items (Q40a-Q40h)

(Please read the list below and indicate whether or not any of these are current and ongoing problems that have lasted twelve months or longer. If the problem is happening to you, indicate how upsetting it has been. Check the answer that is most like your current situation)

Q40a	Ongoing health problems (in yourself)
Q40b	Ongoing physical or emotional problems (in spouse or child)
Q40c	Ongoing problems with alcohol or drug use in family member
Q40d	Ongoing difficulties at work
Q40e	Ongoing financial strain
Q40f	Ongoing housing problems
Q40g	Ongoing problems in a close relationship
Q40h	Helping at least one sick, limited, or frail family member or friend on a regular basis

<u>Coding</u>: 1=No, didn't happen, 2=Yes, but not upsetting, 3=Yes, somewhat upsetting, 4=Yes, very upsetting

<u>Scaling:</u> The measure can be scored by calculating a simple unweighted sum of all ongoing problems.

Psychometrics: Alpha = .67, although these items are not necessarily intended to have a high degree of internal consistency.

Background:

Bromberger, J. T., & Matthews, K. A. (1996). A longitudinal study of the effects of pessimism, trait anxiety, and life stress on depressive symptoms in middle-aged women. *Psychology of Aging*, *11*(2), 207-213.

Q. 41 Anxiety

(Not Included in 2004)

Five items were selected from the widely used Beck Anxiety Inventory (BAI). The Beck Inventory has been shown to distinguish symptoms of anxiety from depression and to be valid for use in in older populations

Sources:

Beck, A. T., Epstein, N., Brown, G., & Steer, R. A. (1988). An inventory for measuring clinical anxiety: Psychometric properties. *Journal of Consulting and Clinical Psychology*, 56(6), 893-897.

Wetherell, J. L., & Areán, P. A. (1997). Psychometric evaluation of the Beck Anxiety Inventory with older medical patients. *Psychological Assessment*, *9*(2), 136-144.

Items: 5 items (Q41a-Q41e)

(Now I am going to read some statements about how people sometimes feel. After each statement, please indicate how often you felt that way DURING THE PAST WEEK. Again, the best answer is usually the one that comes to your mind first, so do not spend too much time on any one statement.)

Q41a I had fear of the worst happening.

Q41b I was nervous.

Q41c I felt my hands trembling.

Q41d I had a fear of dying.

Q41e I felt faint.

<u>Coding:</u> 1= Never, 2= Hardly ever, 3=Some of the time, 4=Most of the time

Scaling: Responses to the 5 items are averaged to produce an index of anxiety

ranging from 1-4. Set the final score to missing if more than two of the

items have missing values.

<u>Psychometrics:</u> Alpha = .81

Background:

Brenes, G. A., Guralnik, J. M., Williamson, J., Fried, L. P., & Penninx, B. W. J. H. (2005). Correlates of anxiety symptoms in physically disabled older women. *American Journal of Geriatric Psychiatry*, 13(1), 15-22.

Q. 42 Anger

(Not Included in 2004)

The Spielberger Anger Expression Scale (STAX) measures anger along two dimensions: state anger and trait anger. Trait anger (anger-in) refers to a more stable predisposition to respond to a range of situations with an angry response; while state anger (anger-out) represents a more temporary angry reaction usually expressed through behavior.

Source:

Forgays, D. K., Spielberger, C. D., Ottaway, S. A., & Forgays, D. G. (1998). Factor structure of the state-trait anger expression inventory for middle-aged men and women. *Assessment*, *5*, 141-155.

<u>Items:</u> 4 items for the Anger-In scale (items 42a-42d), 7 items for the Anger-Out scale (items 42e-42k)

(Here are some statements that describe how people react or behave when they are feeling angry or mad. Thinking of the times you feel angry, for each statement please indicate how often you react or behave this way)

	• '
Q42a	When I am feeling angry or mad, I keep things in.
Q42b	When I am feeling angry or mad, I withdraw from people.
Q42c	When I am feeling angry or mad, I am irritated more than people are aware.
Q42d	When I am feeling angry or mad, I am angrier than I am willing to admit.
Q42e	When I am feeling angry or mad, I argue with others.
Q42f	When I am feeling angry or mad, I strike out at whatever infuriates me.
Q42g	When I am feeling angry or mad, I say nasty things.
Q42h	When I am feeling angry or mad, I lose my temper.
Q42i	I am quick tempered.
Q42j	I have a fiery temper.
Q42k	I fly off the handle.

Coding: 1=Almost never, 2=Sometimes, 3=Often, 4=Almost always

Scaling: Create an index of Anger-In by averaged the scores for items 42a-42d (range 1-4). Set the final score to missing if more than two of the items have missing values.

Create an index of Anger-Out by averaged the scores for items 42e-42k (range 1-4). Set the final score to missing if more than three of the items

have missing values.

<u>Psychometrics:</u> Anger In: Alpha = .78

Anger Out: Alpha = .88

Background:

Eckhardt, C., Norlander, B., & Deffenbacher, J. (2004). The assessment of anger and hostility: A critical review. *Aggression and Violent Behavior*, *9*, 17-43.

Matthews, K. A., Owens, J. F., Edmundowicz, D., Lee, L., & Kuller, L. H. (2006). Positive and negative attributes and risk for coronary and aortic calcification in healthy women. *Psychosomatic Medicine*, *68*, 355-361.

Q. 43-44 Ladder

Q. 24-25 (2004)

The ladder is designed to capture relative deprivation.

Source: (Also appears in ELSA)

Scoring: Continuous measure (1-10)

Q. 46-47 Work/Family Priorities

(Not Included in 2004)

Asked only among respondents who are currently working, these questions tap the balance between work and family.

Source: Families and Work Institute. 2002 National Study of the Changing Workforce.

http://www.familiesandwork.org/site/work/workforce/2002nscw.html

Q.46 How often do you feel that you put your JOB before your FAMILY?

Q.47 How often do you feel that you put your FAMILY before your JOB?

<u>Coding:</u> 1=Very often, 2=Sometimes, 3=Rarely, 4=Never

Background:

Bond, J. T., Thompson, C., Galinsky, E., & Prottas, D. (2003). *Highlights of the National Study of the Changing Workforce*. New York: Families and Work Institute.

Q. 48 Work/Non-work Interference and Enhancement

(Not Included in 2004)

Asked only among respondents who are currently working, this set of items assesses the extent to which work has a positive and negative effect on one's personal life and vice-versa.

Source:

MacDermid, SM, Barnett, R, Crosby, F, Greenhaus, J, Koblenz, M, Marks, S, Perry-Jenkins, M, Voydanoff, P, Wethington, E, Sabbatini-Bunch, L. (2000). The measurement of work/life tension: Recommendations of a virtual think tank. Boston, MA: Alfred P Sloan Foundation.

Items: 12 items (Q48a-Q481)

(Please use the scale below to answer the next set of questions.)

Q48a My work schedule makes it difficult to fulfill personal responsibilities.

Q48b Because of my job, I didn't have the energy to do things with my family or other important people in my life.

Q48c Job worries or problems distract me when I am not at work.

Q48d My home life kept me from getting work done on time on my job.

Q48e My family or personal life drained me of the energy I needed to do my job.

Q48f I was preoccupied with personal responsibilities while I was at work.

Q48g My work left me enough time to attend to my personal responsibilities.

Q48h My work gave me energy to do things with my family and other important people in my life.

Q48i Because of my job, I was in a better mood at home.

Q48j My personal responsibilities left me enough time to do my job.

Q48k My family or personal life gave me energy to do my job.

Q481 I was in a better mood at work because of my family or personal life.

Coding: 1=Rarely, 2=Sometimes, 3=Often, 4=Most of the time

<u>Scaling:</u> There are four separate dimensions to assess the work/non-work interface: Items

should be averaged for each of the four dimensions by combining items as

follows:

Work interference with personal life (Q48a, Q48b, Q48c),

Personal life interference with work (Q48d, Q48e, Q48f)

Work enhancement of personal life (Q48g, Q48h, Q48i)

Personal life enhancement with work (Q48i, Q48k, Q48l).

Psychometrics:

Work → Personal Life Interference/Conflict	Alpha=.70
Personal Life → Work Interference/Conflict	Alpha=.68
Work → Personal Life Facilitation	Alpha=.78
Personal Life → Work Facilitation	Alpha=.81

Q. 49 Chronic Work Discrimination

(Not Included in 2004)

These items are designed to assess chronic discrimination experienced at work. These questions are only asked of respondents who are currently working.

Source:

Williams, D. R., Yu, Y., Jackson, J. S., & Anderson, N. B. (1997). Racial differences in physical and mental health: socio-economic status, stress and discrimination. *Journal of Health Psychology*, 2, 335-351.

Items: 6 items (Q49a-Q49f)

(Here are some situations that can arise at work. Please tell me how often you have experienced them during the <u>LAST 12 MONTHS.</u>)

Q49a How often are you <u>UNFAIRLY</u> given the tasks at work that no one else wants to

Q49b How often are you watched more closely than others?

Q49c How often are you bothered by your supervisor or coworkers making slurs or

jokes about women or racial or ethnic groups?

Q49d How often do you feel that you have to work twice as hard as others at work?

Q49e How often do you feel that you are ignored or not taken seriously by your boss?

Q49f How often have you been unfairly humiliated in front of others at work?

Coding: 1=Never, 2=Less than once a year, 3=A few times a year, 4=A few times a month,

5=At least once a week, 6=Almost every day

Scaling: Create an index of perceived work discrimination by averaging the scores across

all items (range 1-6). Set the final score to missing if more than three of the items

have missing values.

Psychometrics: Alpha=.81

Background:

Harrell, S. P. (2000). A multidimensional conceptualization of racism-related stress: Implications for the well-being of people of color. *American Journal of Orthopsychiatry*, 70(1), 42-57.

Williams, D. R., Neighbors, H. W., & Jackson, J. S. (2003). Racial/ethnic discrimination and health: Findings from community studies. *American Journal of Public Health*, 93(2), 200-208.

Q. 50 Job Stressors and Job Satisfaction

Q. 23 (2004)

These 15 items capture job stress and job satisfaction. (The same 15 items were included in the 2004 Pilot SAQ.) These questions are only asked of respondents who are currently working. Based on the demand/control model of stress (Karasek, 1979) and items like those contained in the Quinn and Staines Quality of Employment Survey (1977), items were chosen and adapted to assess multiple facets of job satisfaction and multiple work stressors. Psychometric analysis of data on these items in the 2004 pilot study indicated that these items do show two factors: job satisfaction and job stressors.

Source:

Karasek, R. (1979). Job demands, job decision latitude, and mental strain: Implications for job re-design. *Administrative Science Quarterly*, 24, 285-306.

Quinn, R. P. & Staines, G. L. The 1977 quality of employment survey. Ann Arbor, MI: Institute for Social Research.

Items: 15 items (Q50a-Q50o)

(Please say how much you agree or disagree with each of the following statements)

Q50a All things considered I am satisfied with my job.

Q50b My job is physically demanding.

Q50c I receive the recognition I deserve for my work.

Q50d My salary is adequate.

Q50e My job promotion prospects are poor.

Q50f My job security is poor.

Q50g I am under constant time pressure due to a heavy workload.

Q50h I have very little freedom to decide how I do my work.

Q50i I have the opportunity to develop new skills.

Q50j I receive adequate support in difficult situations.

Q50k At work, I feel I have control over what happens in most situations.

Q50l Considering the things I have to do at work, I have to work very fast.

Q50m I often feel bothered or upset in my work.

Q50n In my work I am free from conflicting demands that others make.

Q50o The demands of my job interfere with my personal life.

Coding in 2006: 1=Strongly Disagree, 2=Disagree, 3=Agree, 4=Strongly Agree Coding in 2004: 1=Strongly Agree, 2=Agree, 3=Disagree, 4=Strongly Disagree

(Please note that the coding differs between the 2004 and 2006 versions of the questionnaire. This was done in order to make the order of the code categories consistent across measures within the 2006 questionnaire.)

Scaling: Items are scored on a 4 point scale and averaged to produce an index

ranging from 1-4 for job satisfaction (items Q50a, Q50c, Q50d, Q50e, Q50f, Q50i, Q50j, Q50k, Q50n, reverse coding items Q50e and Q50f) and

job stress (items Q50b, Q50g, Q50h, Q50l, Q50m, Q50o).

In constructing a scale score for the measure in 2004, it will be necessary to reverse-code the items so that higher values indicate higher levels of job stressors and job satisfaction. Reverse coding all of the items in 2004 compared to 2006 will result in creating comparable measures for 2004 and 2006.

<u>Psychometrics:</u> Job Satisfaction: Alpha=.80

Job Stressors: Alpha=.75

2004 Topics Not Included in 2006 Survey Content

Q. 3 Quality of Life (CASP 19)

Source:

Higgs, P., Hyde, M., Wiggins, R. D., & Blane, D. B. (2003). Researching quality of life in early old age: The importance of the sociological dimension. *Social Policy and Administration* 37(3), 239-252.

Hyde, M., Wiggins, R. D., Higgs, P., & Blane, D. B. (2003). A measure of quality of life in early old age: The theory, development and properties of a needs satisfaction model (CASPI-19). *Aging and Mental Health*, 7(3), 186-194.

Items: 19 items (Q3a-Q3s)

(Here is a list of statements that people have used to describe their lives or how they feel. We would like to how often, if at all, you feel this way.)

Q3a My age prevents me from doing the things I would like to do.
Q3b I feel that what happens to me is out of my control.

Q3c I feel free to plan for the future.

Q3d I feel left out of things.

Q3e I can do the things I want to do.

Q3f Family responsibilities prevent me from doing what I want to do.

Q3g I feel that I can do as I please.

Q3h My health stops me from doing the things I want to do.

Q3i Shortage of money stops me from doing the things I want to do.

Q3j I look forward to each day. Q3k I feel that my life has meaning.

Q31 I enjoy the things that I do.

Q3m I enjoy being in the company of others.

Q3n On balance, I look back on my life with a sense of happiness.

Q3o I feel full of energy these days.

Q3p I choose to do things that I have never done before. Q3q I feel satisfied with the way my life has turned out.

Q3r I feel that life is full of opportunities.

Q3s I feel that the future looks good for me.

<u>Coding:</u> 1=Often, 2=Sometimes, 3=Not Often, 4=Never

Background:

Blane, D. B., Higgs, P., Hyde, M., & Wiggins, R. D. (2003). Life course influences on quality of life in early old age. *Social Science and Medicine*, 58(11), 2171-2179.

Q. 6 (items a-b) Control/Mastery

Items: 2 items (Q6a-Q6b)

(Here are some questions about how you feel about your life in general. Please say how much you agree or disagree with the following statements.)

Q6a At home, I feel I have control over what happens in most situations.

Q6b I feel that what happens in life is often determined by factors beyond my control.

<u>Coding:</u> 1=Strongly agree, 2=Moderately agree, 3=Slightly agree, 4=Slightly disagree,

5=Moderately disagree, 6=Strongly disagree

Q. 26 Rating of Aging Experience

Items: 1 item (Q26)

(Check one.)

On the whole has growing older been a positive or negative experience?

<u>Coding:</u> 1=Very positive, 2=Mainly positive, 3=Neither positive nor negative, 4=Mainly

negative, 5=Very negative

Additional HRS Documentation for Psychosocial Data

Additional information about the HRS psychosocial data is available in the Data Descriptions and Codebooks:

HRS 2004 Data Description:

http://hrsonline.isr.umich.edu/meta/2004/core/desc/h04dd.pdf

(See section 8K on page 19)

HRS 2004 Codebook for the Psychosocial Questionnaire:

http://hrsonline.isr.umich.edu/meta/2004/core/codebook/h04lb_ri.htm

(Note: the 2004 data section includes data for both the disability vignettes and psychosocial questionnaire.)

HRS 2006 Data Description:

http://hrsonline.isr.umich.edu/meta/2006/core/desc/h06dd.pdf

HRS 2006 Codebook:

http://hrsonline.isr.umich.edu/meta/2006/core/codebook/h06_00.html

Other Related Studies

English Longitudinal Study of Ageing (ELSA)

http://www.ifs.org.uk/elsa

The English Longitudinal Study of Ageing is an interdisciplinary data resource on health, economic position and quality of life as people age.

Survey of Health, Ageing, and Retirement in Europe (SHARE)

http://www.share-project.org/

The Survey of Health, Ageing and Retirement in Europe (SHARE) is a multidisciplinary and cross-national database of micro data on health, socio-economic status and social and family networks of individuals aged 50 or over. Thus far, eleven countries have contributed data to the 2004 SHARE baseline study. SHARE is coordinated centrally at the Mannheim Research Institute for the Economics of Aging. It has been designed after the role models of the U.S. Health and Retirement Study (HRS) and the English Longitudinal Study of Ageing (ELSA).

 $\label{eq:Appendix A: Psychosocial Measure Concordance between 2004 and 2006 Questionnaires}$

<u>Topic</u>	<u>2006</u>	2004	<u>Notes</u>
Social Participation	Q. 1	Q. 1	
Social Integration	Q. 2	Q. 2	
Life Satisfaction	Q. 3	Q. 5	
Social Support	Q. 4 – Q. 18	Q. 7 – Q. 21	Added additional item in 2006
			"How often do they make too
			many demands on you?"
Cynical Hostility	Q. 19.	Q. 6	
	(items a-e)	(items t-x)	
Optimism/Pessimism	Q. 19	Q. 6	
	(items f-k)	(items n-s)	
Hopelessness	Q. 19.	Q. 6	
	(items 1-o)	(items k-m)	
Loneliness	Q. 20.	Q. 4	
Neighborhood	Q. 21.	(not	
Disorder/Neighborhood Social		included)	
Cohesion			
Sense of Control	Q. 22-23	(not	
		included)	
Domain Specific Control	Q. 24–Q.	(not	
	26	included)	
Control/Mastery	(not	Q. 6 (a-b)	
	included)		
Positive and Negative Affect	Q. 27	(not	
		included)	
Religiosity/Spirituality &	Q. 28-29	(not	
Prayer Frequency		included)	
Everyday Discrimination	Q. 30	(not	
	0.01	included)	
Attributions of Everyday	Q. 31	(not	
Discrimination	0.22	included)	
Balance/Reciprocity	Q. 32	(not	
D 11.	0.22.24	included)	
Personality	Q. 33-34	(not	
D 11 ' 137 H D '	0.25	included)	0 '
Psychological Well-Being	Q. 35	Q. 6	Some items included in 2004,
		(items f-i)	but not complete overlap
Major Experiences of Lifetime	0.26	(not	compared to 2006
Major Experiences of Lifetime Discrimination	Q. 36	(not included)	
Lifetime Traumas	0.27	included)	Some items (2006 O27s, s, f
Lifetime Traumas	Q. 37	Q. 27	Some items (2006 Q37a, e, f,
			g) were also asked in 2004,

			but not complete overlap compared to 2006.
Stressful Life Events	Q. 38	Q. 28	
Financial Strain	Q. 39	Q. 29	
Chronic Stressors	Q. 40	Q. 30	
Anxiety	Q. 41	(not included)	
Anger	Q. 42	(not included)	
Ladder	Q. 43-44	Q. 24-25	
Work status	Q. 45	Q. 22	
Work/Family Priorities	Q. 46-47	(not included)	
Work/Non-work Interference and Enhancement	Q. 48	(not included)	
Chronic Work Discrimination	Q. 49	(not included)	
Job Stressors and Job Satisfaction	Q. 50.	Q. 23	
Quality of Life (CASP 19)	(not included)	Q. 3	Hyde, Wiggins, Higgs, & Blane (2003)
Rating of Aging Experience	(not included)	Q. 26	
Who Completed the Questionnaire?	Q. 51	Q. 31	