Add Health Parent Study:
Adding **Parents** to **Add Health** to Study Aging Processes & Intergenerational Linkages

V. Joseph Hotz

Add Health User's Conference

July 23, 2018

Add Health Parent Study (AHPS) funding:

R21 AG042663-01, *Locating the Parents of Add Health*, K. M. Harris, V. J. Hotz, & J. A. Seltzer, PIs.

R01 AG042794-01, *Add Health Parent Study: Phase I*, V. J. Hotz & K. M. Harris, PIs.

AHPS Research Team

PIs:

Kathleen Mullan Harris, PI, UNC

V. Joseph Hotz, PI, Duke

Co-PIs:

Suzanne Bianchi (1952-2013)

Jason Boardman, Colorado

Virginia Chang, NYU

Angela Duckworth, Penn

Jack Iwashyna, Michigan

Hedwig Lee, Washington U-St. Louis

Shelly Lundberg, UCSB

Matt McQueen, Colorado

Candice Odgers, UC-Irvine

Lisa Pearce, UNC

Seth Sanders, Duke

Judith A. Seltzer, UCLA

Karen Sugden, Duke

Eric Whitsel, UNC

Emily Wiemers, U. Mass-Boston

Yang Claire Yang, UNC

Staff:

Francesca Florey, Project Manager, Duke

Mandy Monath, Data Manager, UNC

Katsuya Oi, Post-Doc, Duke

- A new data source to study aging processes in 2 generations & intergenerational linkages in health, behaviors & relationships.

Origins of
Add Health Parent Study

- **Add Health Parent Study** leverages **Add Health Study**:
  - Nationally-representative, prospective cohort study
  - Rich longitudinal social, environmental, biological, genetic data.

- In **Wave I** (1994-95) of **Add Health Study**, a *parent* (mostly mothers) of each **Add Health Sample Member (AHSM)** was interviewed.

- Parents referred to as *Wave I Parent* (**WIP**).

- These data referred to as *Parents Phase 1*.
  - Asked about their (then adolescent) children, their relationships with them and their own health.
  - Much of data collected parallels that collected in previous (& current) Waves of **Add Health Study**.

Data Collected on Parents in Wave I of Add Health Study

A: About themselves

- Age, race, ethnicity
- Marital status
- Religion, church attendance
- Education
- Work, disability
- Income, material hardship
- Neighborhood conditions
- Marital history
- Life happiness
- **General health**
- **Health behaviors (alcohol & tobacco use)**

B: About then Spouse/Partner

- Sex, age, race, ethnicity
- Religion
- Education
- Work, disability
- Public assistance
- Relationship satisfaction
- Life happiness
- **General health**
- **Health behaviors (alcohol & tobacco use)**

C: About their AHSM Child(ren)

- Relationship to child
- Presence of bio parents in household
- Child's friends
- Educational expectations
- Involvement in child's school and schoolwork
- **Relationship with child**
- **Cognitive functioning**
- **Health, health insurance**
- **Birthweight**
- **Health behaviors**
- Communication about sex
- Child's social life
- **Family health history (child, bio mother, bio father)**
- Disability
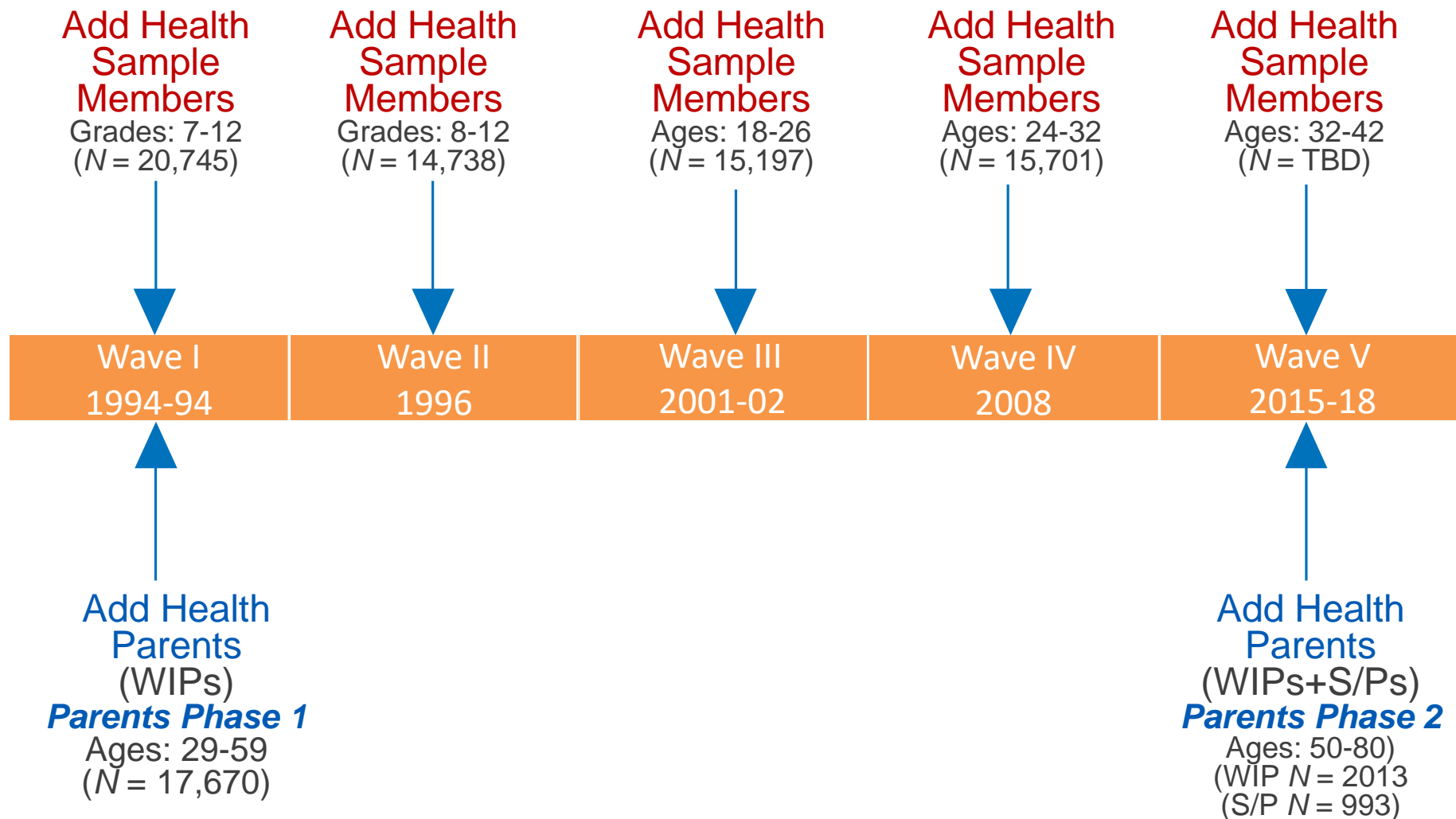- For twins: determination of fraternal vs identical

Add Health Parent Study (*Parents Phase 2*)

Sample Design & Data Collection

What is the
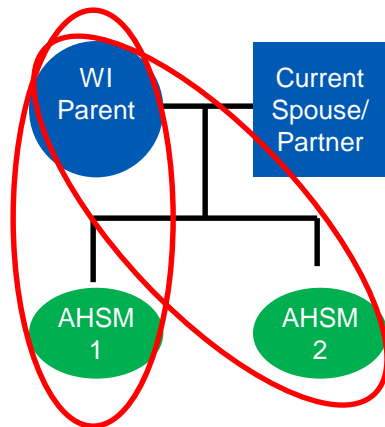# Add Health Parent Study?

- **Add Health Parent Study** is 20-year *follow-up interview* of a subset of Wave I parents.

- Data collected about their
  - *Health & health behaviors*
  - *Cognition, Personality & Preferences*
  - *Family Relationships & Nature of Family Network*
  - *Economic Capacities & Well-Being*

- Same data also collected from *current spouse/partners* of these parents

- These data referred to as *Parents Phase 2*.

AHPS & Add Health Surveys Timeline

Add Health Sample Members
Grades: 7-12
($N = 20,745$)

Add Health Sample Members
Grades: 8-12
($N = 14,738$)

Add Health Sample Members
Ages: 18-26
($N = 15,197$)

Add Health Sample Members
Ages: 24-32
($N = 15,701$)

Add Health Sample Members
Ages: 32-42
($N = $ TBD)

Wave I 1994-94	Wave II 1996	Wave III 2001-02	Wave IV 2008	Wave V 2015-18

Add Health Parents
(WIPs)
Parents Phase 1
Ages: 29-59
($N = 17,670$)

Add Health Parents
(WIPs+S/Ps)
Parents Phase 2
Ages: 50-80)
(WIP $N = 2013$
(S/P $N = 993$)

AHPS - Add Health WI "Family Clusters"
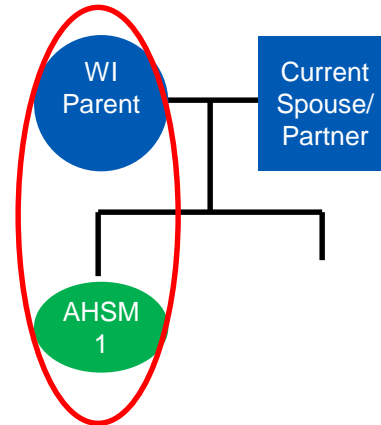

WI Family Cluster A — 2 AHSM – WI Parent **Pairs**; 2 **Parent-Figures** (WI Parent & Current Spouse/Partner)
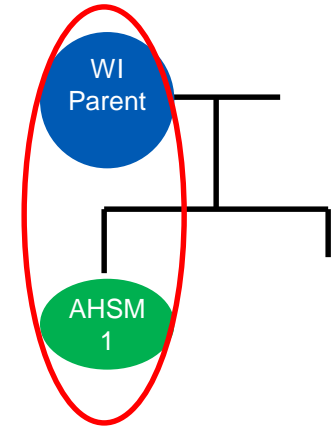
WI Family Cluster B — 1 AHSM – WI Parent **Pair**; 2 **Parent-Figures** (WI Parent & Current Spouse/Partner)

WI Family Cluster C — 1 AHSM – WI Parent **Pair**; 1 **Parent-Figure** (WI Parent))

- Some Family Clusters include both biological parent-figures of AHSMs; Others include bio parent & step-parent.

- AHSMs in multiple-AHSM Family Clusters include twins, non-twin full sibs &/or half-sibs.

AHPS Sample Targets & Completed Interviews

Target Wave 1 Parents (W1Ps)	3,108
Target Spouse/Partners (60% of interviewed W1Ps	1,492
Add Health Sample Members of Targeted W1 Parents	3,416
Completed Sample:	
Wave 1 Parents (W1Ps)	2,013
Spouse/Partners	993
Add Health Sample Members of Completed W1 Parents	2,247

Content of AHPS In-Person Interviews

- **Health and Health Conditions**
  - Physical and mental health, medications inventory (**Add Health**, **HRS, NSHAP**)
  - Health insurance, access to care (**HRS**)
  - Health behaviors (**Add Health**, **HRS, NSHAP**)
  - Chronic disease, disability, acute health shocks (**Add Health**; **HRS**)
  - Social integration, support, strain and stress (**NSHAP, HRS, MIDUS**)

- **Personality, Cognitive Processing & Preferences**
  - Big 5 (**Add Health**, Wave IV)
  - Duckworth Grit Index (**New**)
  - Word Recall Tests (**Add Health**, Wave IV)
  - Counting Backwards (**HRS**)
  - Risk & Patience/Time Preferences (**GSOEP**)

- **Relationships btwn generations**
  - Gathering Family Rosters (one up, one down) (**PSID**)
  - Time & Money Transfers (**PSID**)
  - Long Term Transfers & Financial Help (**PSID**)
  - Notions of Safety Net provided & expected (**New**)
  - Parents' Perceptions & Knowledge of (Adult) Child's situations & behaviors (**New**)

- **Economic & time capabilities**
  - Employment (**HRS**)
  - Labor Market Earnings (**HRS**)
  - Retirement: Pensions received & expected (**HRS**)
  - Housing (**HRS, PSID**)
  - Assets & Income from Assets (**HRS**)
  - Debt (**HRS, PSID**)

Additional Data Collected

- Consents to link ***Administrative Records*** (present, past & future)
  - ***Medicare & Medicaid***
  - ***Housing valuations*** & foreclosures of place-of-residence
- Collection of ***Family Health Histories*** with leave-behind questionnaire
  - Ask about health conditions & age-of-death for deceased parents.
  - So we have ***health data*** on ***3-generations***.
- Option in future to use ***place-of-residence*** info to link:
  - Economic, demographic status of neighborhoods
  - Food environments
 - Environments for exercise, etc.
  - Others.

  Such possibilities for adding linked contextual data through ***Add Health Ancillary Data Process***.

AHPS & **Add Health** Linked Data:

A Brief Look at the Data

- Majority of AHPS WIPs interviewed at Wave I (97%) are **female** & all **had children**.

- We **compare** data for **WIPs** from **Parents Phase 2 with** women with at least one child & same age range in **HRS** & **NHANES**.
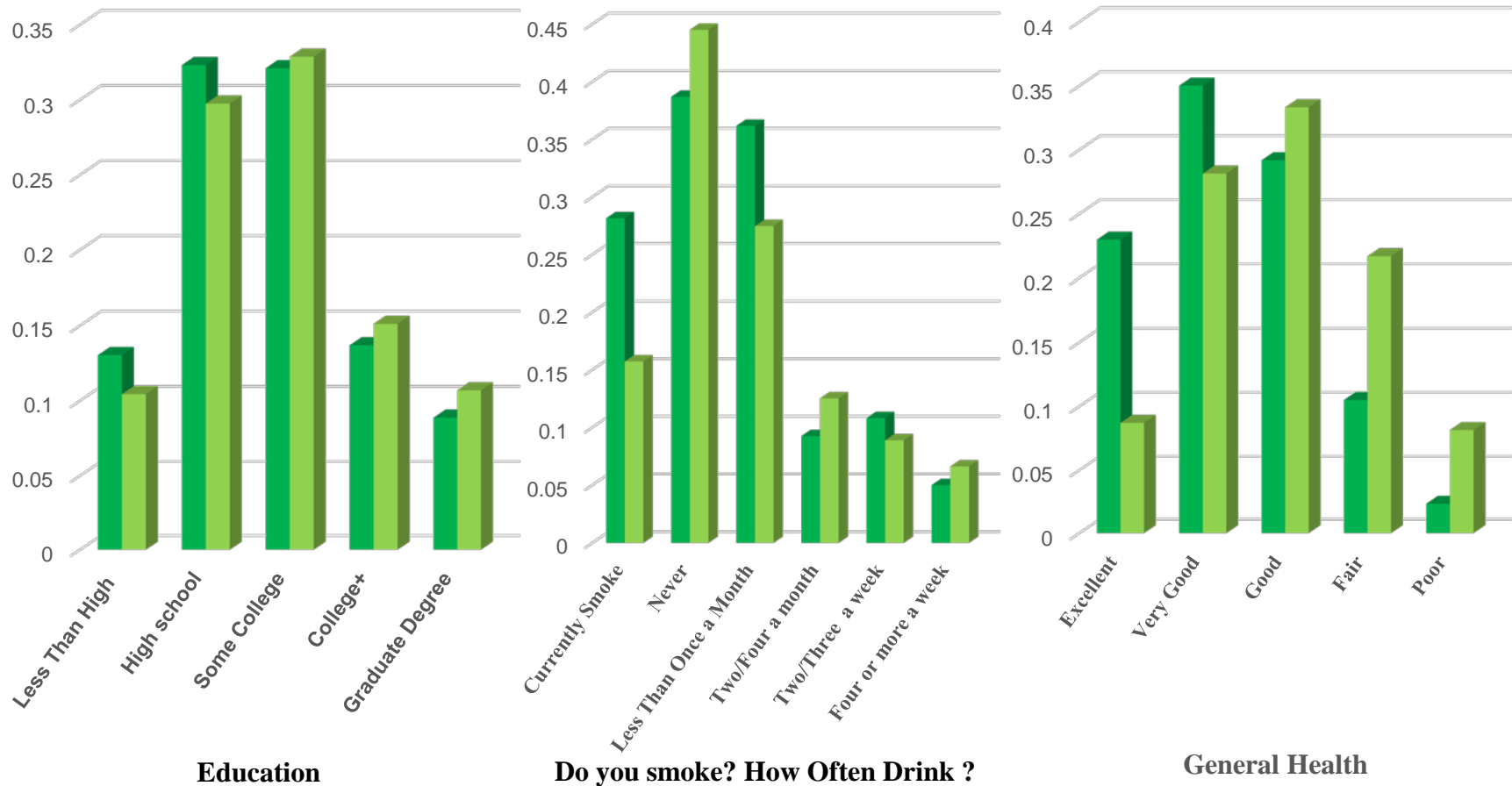
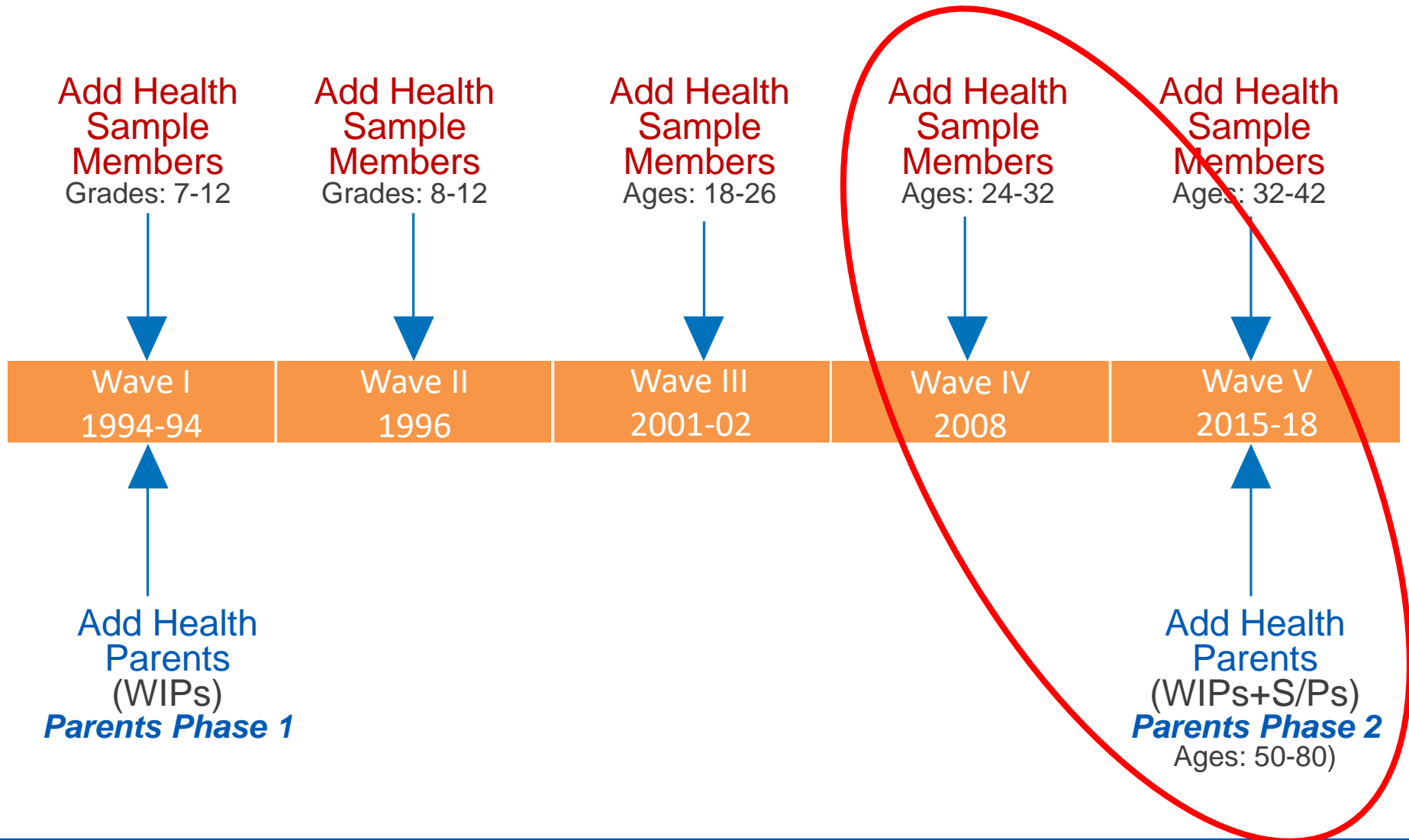Race/ethnicity   Education
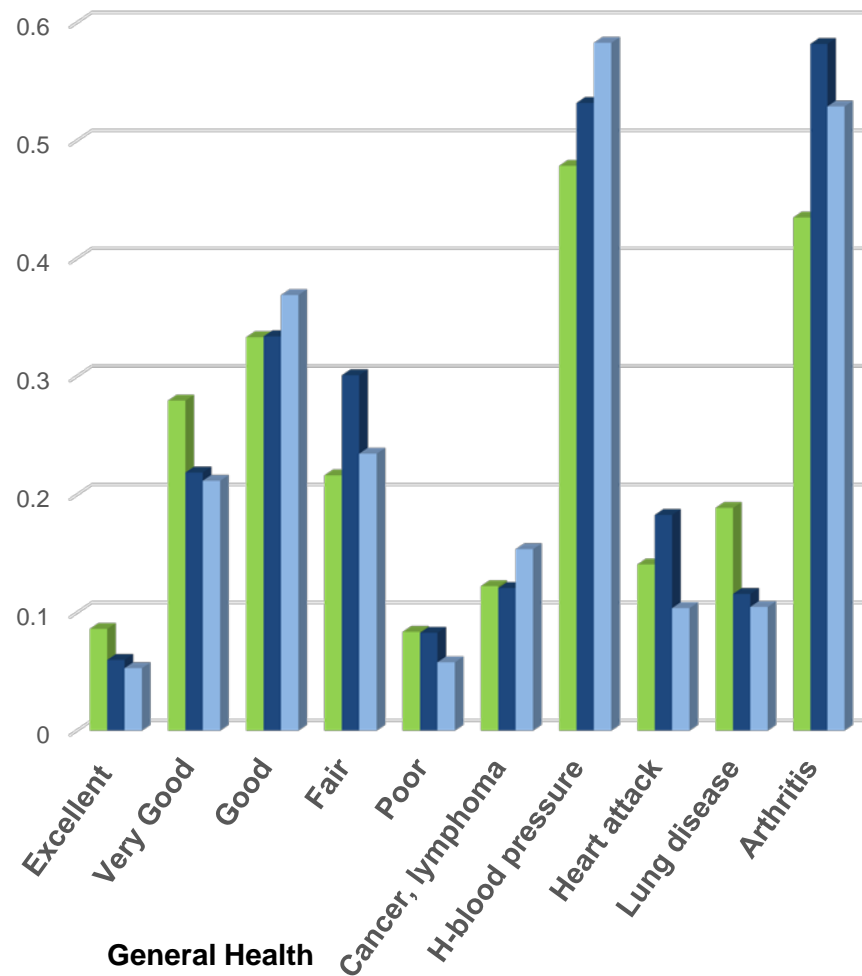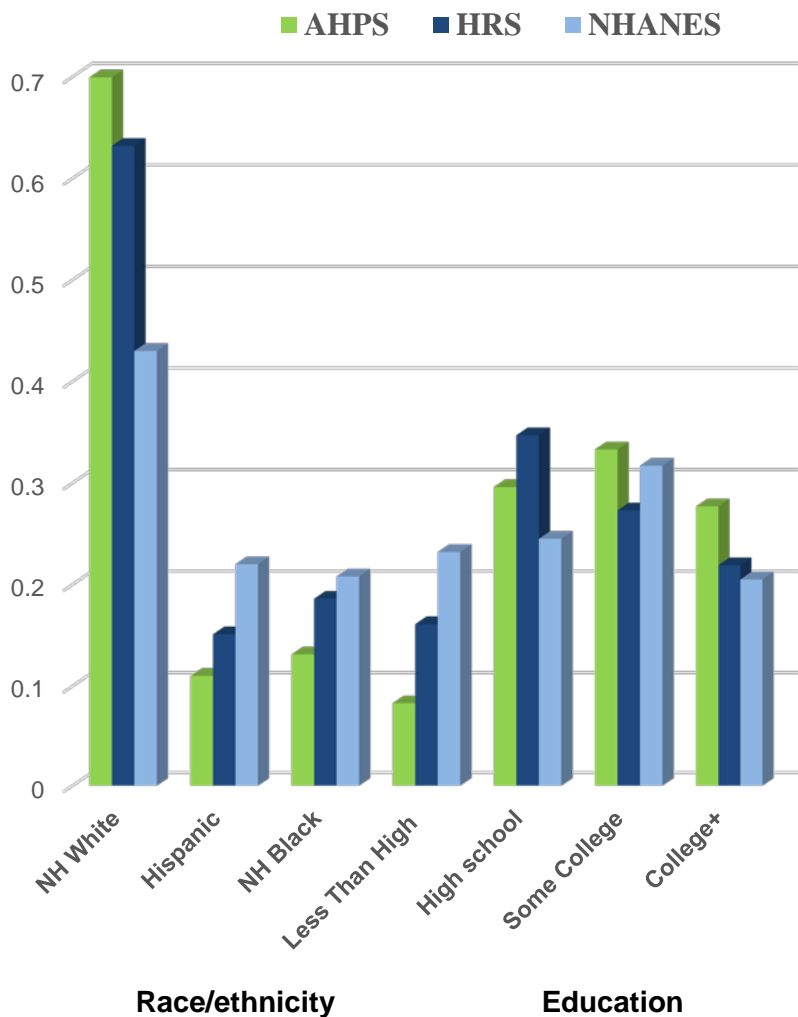
General Health

- ***Two waves*** of data on parents (***Parents Phase 1*** & ***Parents Phase 2***) contain ***same measures*** of general health, health behaviors & some other outcomes at ***ages 29-59*** & ***at 50-80***.

- Thus, one can use parents data to assess how these outcomes ***change with age***.

Longitudinal Comparisons of Parents
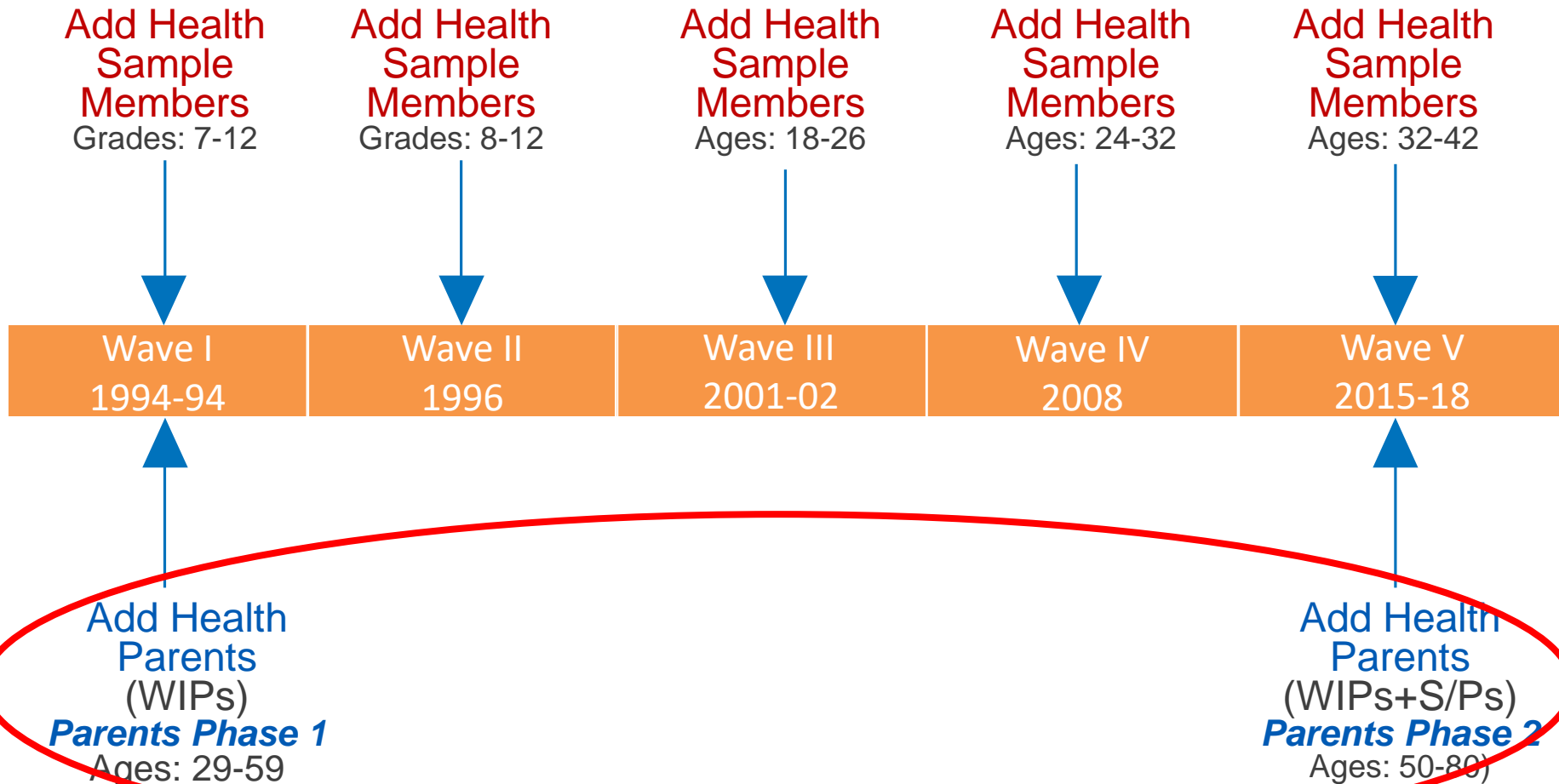
■ **1995 Add Health Wave I**
■ **2016-2017 AHPS**

Education

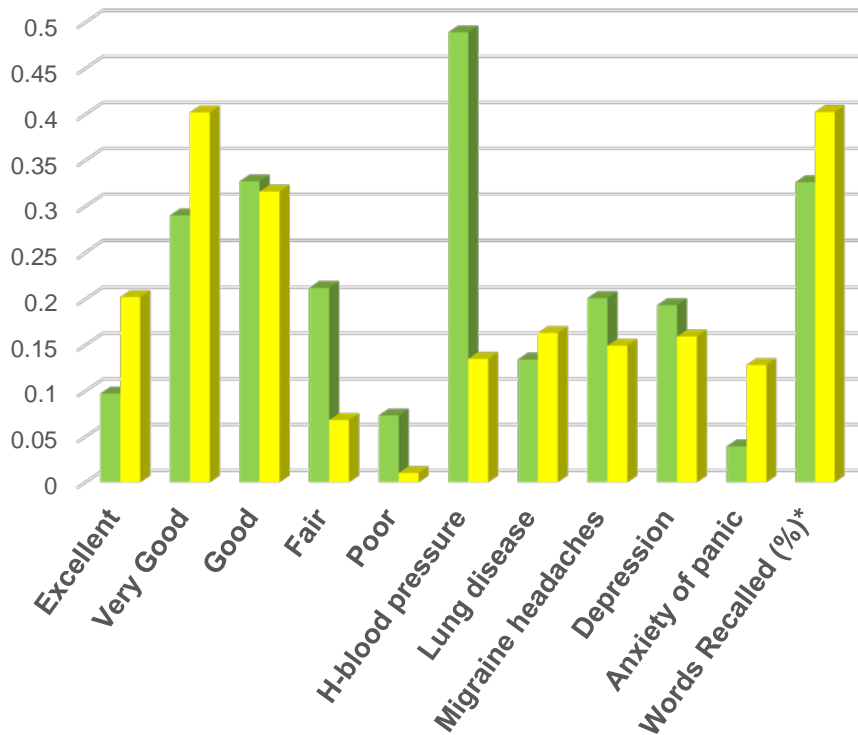**Do you smoke? How Often Drink ?**

General Health

- ***Comparable measures*** for ***parents*** (in **AHPS**) & their ***children*** – especially when adults – (in **Add Health**) allow one to analyze ***intergenerational linkages & relationships*** in
    - *Health & health behaviors*
    - *Cognition*
    - *Relationships*
    - *Economic capacities*
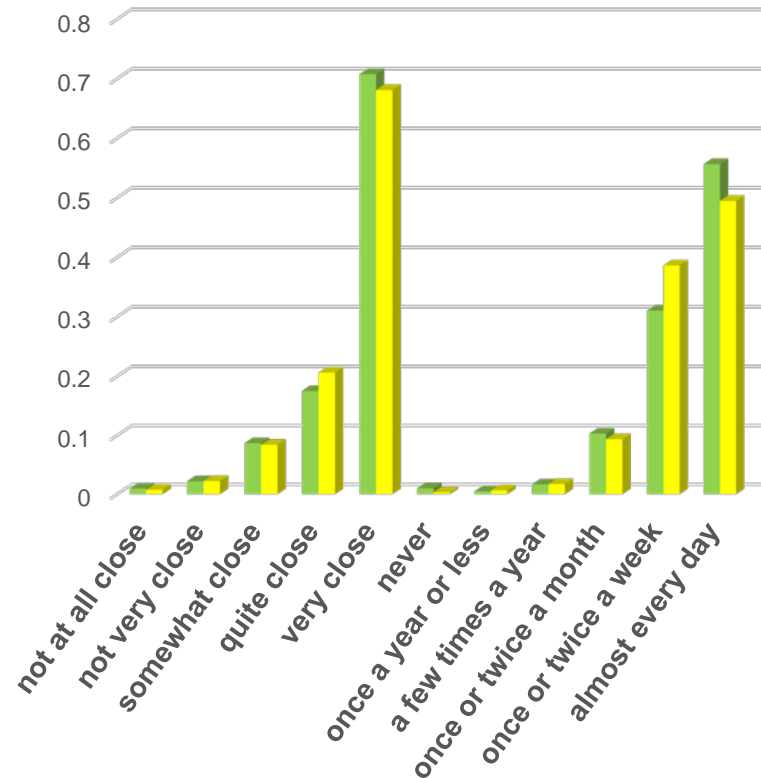
Generational Comparisons

Generational Comparisons

Legend: AHPS, Add Health IV Sample

Left chart categories (Race/Ethnicity): NH White, Hispanic, NH Black, Asian, NativeAmerican, Others

Left chart categories (Education): Less Than High, High school, Some College, College, GraduateDegree, Native-born

Race/Ethnicity

Education
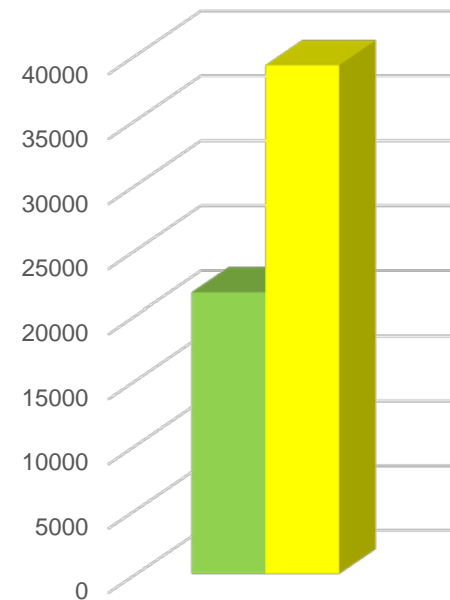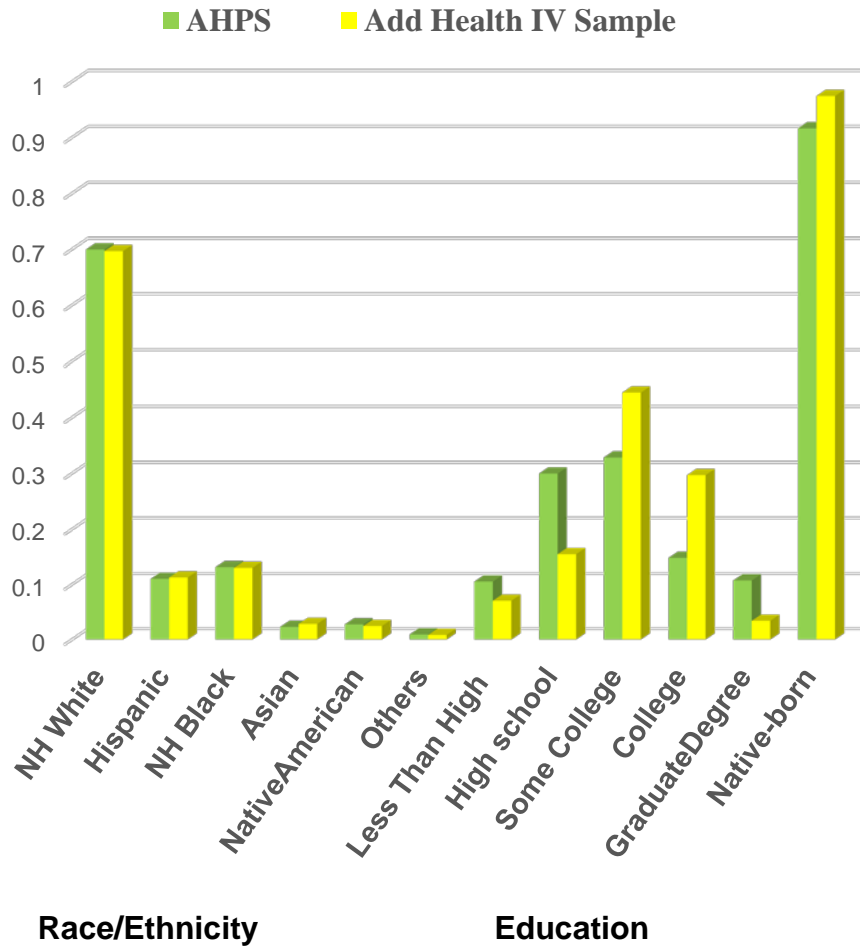
Earnings in 2016 nominal US Dollars

Available in
Posted Slides

Further Research Questions using **Linked**

Add Health Parent – Add Health

Data

- Many **health conditions & behaviors** run in families:
  - **Cardiovascular disease** (CVD)
  - **Obesity**
  - **Substance abuse**, e.g., alcoholism, smoking, drugs.

- How can we use **parents' health** to **better understand** their (adult) **children's health trajectories**?

- How do **changes in parents' health & behaviors** influence & predict their **children's health trajectories**?

Cognition, Personality & Preferences

- ***Cognitive ability*** (e.g., IQ) ***predictive*** of range of ***outcomes***, include ***health***, ***education***, etc.

- Growing evidence that ***non-cognitive skills, personality traits*** & ***aversion to risk*** & ***impatience*** also ***predictors*** of ***behaviors***, e.g., personal finances, marriage & divorce, etc.

- Are these skills & traits ***correlated across generations***?

- Do they help account for ***commonalities*** & ***differences*** in ***health & well-being across*** the 2 ***generations***?

Intergenerational Relationships

- Substantial evidence that **social connectedness** (or **loneliness**) is correlated with many **aspects of health**.

    – How important is the **connectedness** (or **estrangement**) **of family members** on **health** & **well-being**?

- Does **quality** of **parent-(teen)child** relationships **predict parent-(adult)child** relationships?

    – Do **parent-(teen)child** relationships **predict later life health** & **well-being** of **each generation**?

- ***Caring for Baby Boomer Generation***

  – ***Family members*** are important source of ***caregiving*** for ***elderly*** who are ***ill & disabled***

  – *Will this **care continue** for those of us in Baby Boomer Generation?*

  – *And, given the incidence of **divorce** among Boomers, will our kids take care of their **step-parent**s?*

Intergenerational Mobility

- Growing evidence that **what parents do** & **don't do** for **young children** and **adolescents** is important for whether **initial inequality** *in* **economic** & **social status** and **health** is **perpetuated**.

- Does **what parents do** & **don't do** in a child's **adult life continue to matter**?

- Can & do *families help support each other financially,* in *good times* & in *bad times*?

  – This depends on *financial* & *economic situations* of *each generation* & *nature of ties* between them.

  – It also depends on each generation's *knowledge* of the other generations needs & circumstances.

Getting the Data

- **AHPS Parents Phase 2** data is *now available* through a *Restricted-Use* Data Contract.

- Apply for the above data, as well as the **AHPS Parents Phase 1** & **Add Health** data, through the **CPC Data Portal**.

- *Public release* version of data will be available at later date via *ICPSR* & *Dataverse*.

- Data on *therapeutic measures* from medications log & from *family health history* will be available at later date.

- Possible to add *contextual data* in future through *Add Health ancillary study process*.

- To *keep informed* about data releases *sign up* for the Add Health list serve by emailing addhealth@unc.edu.