

New or Modified Data Collection Instruments Submitted for OMB Approval:

New for current revision:

Attachment C24: Social Inventory: This questionnaire contains items tapping into Social competence, social networking, self-efficacy, and coping with ADHD medication use. Social network items are based on the Lubben Social Network Scale 6-Item Version (Lubben, Blozik, Gillmann, et al., 2006). The self-efficacy questions were adapted from the Self-Efficacy for Diabetes Scale (Grossman & Brink, 1987). Items on coping with ADHD were adapted from Issues in Coping with Diabetes Scale (Kovacs, Iyengar, Goldston, Stewart, Obrosky, & Marsh, 1990). Social competence is assessed using the Valkenburg and Peter Social Competence Scale (Valkenburg & Peter, 2008). This measure will be administered to children of High School age (14+ years).

Attachment C25: Olweus Bullying Questionnaire: (OBQ, Olweus, 2007). The Olweus Bullying Questionnaire is a standardized, validated, multiple-choice questionnaire designed to measure a number of aspects of bullying problems in schools, including bullying behavior, bullying victimization, feelings and attitudes about bullying, friends and general satisfaction with school. The scale consists of forty-two questions and will be administered to children of High School age (14+ years).

Attachment C18: Child Conflict in Adolescent Dating Relationships Inventory (CADR, Wolfe et al., 2001). The CADR is a survey that consists of a dating history section and 35 items about conflicts and argument with a steady boyfriend or girlfriend. The survey consists of the following scales: physical abuse, verbal abuse, and threatening behavior. This measure will be administered to older adolescents (16+ years).

Modified previously approved instruments:

Attachment C28: Child Youth Demographic Survey: (for adolescent 16 years and older) In addition to work status and living status which were addressed in the previously approved version, the expanded form includes items to capture educational aspirations and plans past high school completion.

Attachment C20: Child Health Risk Behavior Survey (high school) (HRBS). This measure is an adaptation of the Youth Risk Behavior Survey. In addition to the previously approved version, the supplemental questions address driving behavior, medication misuse for studying, and social media use. Questions about driving were adapted from the National Young Driver Survey. This measure will be administered to children of High School age (14+ years).

Attachment C30: Diagnostic Interview Schedule for Children IV (DISC; Parent and Child Versions) . The Wave 4-5 assessment will include the following modules: Social Phobia, Panic Disorder, Eating Disorder, and Trichotillomania, because these disorders become more prevalent in middle to late adolescence. These modules will be assessed in addition to the modules that were included in the Wave 1-3 data collection to diagnose the following conditions: ADHD, Oppositional Defiant Disorder, Conduct Disorder, Generalized Anxiety Disorder, Major Depression/Dysthymia, Obsessive Compulsive Disorder, Post Traumatic Stress Disorder, Mania/Hypomania, and Tic Disorders. The DISC-IV is a highly structured diagnostic interview schedule developed by the National Institute of Mental Health. It is intended for use in research settings to provide a definitive diagnosis of psychiatric conditions such as ADHD as indicated by confirmation of the clinical features and diagnostic criteria for childhood disorders reported by

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Attachment C2 Description of New or Modified Data Collection Instruments

parents up to age 17 and with additional reporting by children ages 8 and older. It is designed to assign a variety of psychiatric diagnoses in children according to criteria of the Diagnostic and Statistical Manual of Mental Disorders, 4th edition (DSM-IV⁴), the most recent diagnostic criteria for mental disorders. Additionally, the DISC-IV gives a more complete symptom profile and a precise diagnostic picture of comorbidity than is possible with screening instruments or rating scales. In terms of the ADHD sub-module, it assesses symptom presence, impairment in multiple settings, and age of onset; all clinical features of ADHD required for diagnosis. The DISC-IV has been used widely in government research studies and in situations where ease of administration by non-clinical staff is important but a clinical diagnosis is desired.