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Background Information

The pages below contain information on how mental health disorders were measured via the administration of several modules from the World Health Organization’s (WHO) Composite International Diagnostic Interview (CIDI; Robins et al., 1998; Kessler and Üstün 2004) that were included as part of the Moving to Opportunity (MTO) final, or long-term, surveys. The CIDI modules measure mental health disorders using criteria from the fourth edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV; American Psychiatric Association, 2000). The CIDI is the most widely used epidemiological interview for mental disorders in the world and has been used in the WHO World Mental Health Survey Initiative, the world’s largest series of coordinated epidemiological surveys of mental disorders, as well as in the U.S. National Comorbidity Surveys (Kessler et al., 1994, 2005). Ronald Kessler and his team at the Harvard Medical School adapted the disorder modules from the National Comorbidity Survey Replication (NCSR) for use in the MTO study, and the NCSR is referenced throughout this document. Dr. Kessler’s modifications to the MTO version of the modules mostly consisted of the removal of questions to make the overall survey instrument as short as possible without sacrificing the diagnostic integrity of the NCSR modules.¹

Both the adult and youth surveys included NCSR modules for the following disorders: major depression, bipolar and related disorders, generalized anxiety disorder (GAD), intermittent explosive disorder (IED), panic attack and panic disorder, and post-traumatic stress disorder (PTSD). The youth surveys also included oppositional defiant disorder (ODD).

The sections below list the criteria for each disorder, referring to specific questions from the MTO surveys (e.g. HDE6b_D22b from the adult depression module or YGA5_G5 from the youth GAD module). The survey instruments themselves (including the text of each survey question), as well as additional background information, can be found at www.mtoresearch.org/instruments/final_adult.pdf and www.mtoresearch.org/instruments/final_youth.pdf.

The question numbering convention for the MTO long-term surveys labeled each question with a three-letter acronym that corresponds to the survey module name followed by an individual question number. Adult survey module acronyms begin with “H” because the adult survey is a household-level survey (the adults answered questions about themselves but also many questions about the household and its members), whereas the youth survey modules begin with “Y”. The second and third letters of the acronym correspond to the survey module, e.g. “GA” for the GAD module. The full list of survey module acronyms is as follows:

<table>
<thead>
<tr>
<th>Disorder</th>
<th>Module Acronym</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depression</td>
<td>HDE</td>
</tr>
<tr>
<td>Mania²</td>
<td>HMA</td>
</tr>
<tr>
<td>GAD</td>
<td>HGA</td>
</tr>
<tr>
<td>IED</td>
<td>HIE</td>
</tr>
<tr>
<td>Panic</td>
<td>HPD</td>
</tr>
<tr>
<td>PTSD³</td>
<td>HCV</td>
</tr>
<tr>
<td>ODD</td>
<td>N/A</td>
</tr>
</tbody>
</table>

¹ Criteria described as “not operationalized” in the sections below indicate where the MTO modules diverge from NCSR.
² The mania module contained questions used to measure bipolar and related disorders.
³ The PTSD modules’ acronyms are “CV” because they included questions about crime victimization that were replicated from the MTO interim evaluation survey and adapted from other studies in addition to the NCSR PTSD module questions.
Questions within each module are numbered (restarting with 1 at the beginning of each module), and in some cases questions in a sequence use the same number and are unique by letter (e.g. HED5a, HED5b, HED5c, etc.). In the case of NCSR survey questions that comprise the MTO mental health disorder modules, the module acronyms and question numbers are followed by an underscore and the survey question number from NCSR. For example, MTO survey question HGA3_G4 is item G4 from NCSR’s GAD module.

The only other survey questions referenced in the sections below are from the NCSR mental health screener that was also adapted for the MTO surveys (HSC for adults, YSC for youth). The screener asked a series of high-level symptom questions corresponding to the disorders in the modules that followed, and respondents who did not endorse the high-level symptom were assumed not to ever have had the corresponding disorder and therefore were skipped past the module entirely. For example, adult respondents who did not endorse any of the three depression symptoms in the screener (HSC6_SC21, HSC7_SCSC22, and HSC8_SC23) skipped the depression (HDE) module. In some cases, the screener questions serve as criteria for the disorder, and they are therefore referenced in some of the sections below.

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4 The only exception is a short series of questions at the beginning of the NCSR ODD module that replicate risky behavior items from the MTO interim youth survey. Those questions are numbered YOD1a-YOD1k, and some of them are very similar to questions from the NCSR sequence and therefore were included as symptoms in the criteria for ODD below.
References


Adult Major Depressive Episode

A. Five (or more) of the following symptoms have been present during the same 2-week period and represent a change from previous functioning; at least one of the symptoms is either (1) depressed mood or (2) loss of interest or pleasure. Note: DSM-IV states that children and adolescents may be “irritable rather than sad”. This is not operationalized when examining adults who report symptoms from childhood.

Part 1 AND Part 2.

Part 1. Symptoms have been present during the same 2-week period and at least one of the symptoms is either (1) depressed mood or (2) loss of interest or pleasure.

\[(HDE6b_{D22b} \geq 2 \text{ weeks} \text{ OR } HDE6e_{D22d} \geq 2 \text{ weeks}) \text{ AND} \]
\[(HDE7a_{D24a} \text{ is } \text{Yes}(1) \text{ OR } HDE7b_{D24c} \text{ is } \text{Yes}(1) \text{ OR } HDE7c_{D24e} \text{ is } \text{Yes}(1) \text{ OR } HDE7d_{D24f} \text{ is } \text{Yes}(1))\]

Note: D24b, D24d, D39 are deleted from NCSR.

Part 2. At least five of the following symptoms must be present and represent a change from previous functioning:

Note: “change from previous functioning” is implicit in the item corresponding to each symptom (e.g. “more than usual”, “less than usual”).

1. depressed mood most of the day, nearly every day, as indicated by either subjective report (e.g., feels sad or empty) or observation made by others.

\[HDE7a_{D24a} \text{ is } \text{Yes}(1) \text{ OR } HDE7b_{D24c} \text{ is } \text{Yes}(1).\]

Note D24b, D24d are deleted from NCSR.

2. markedly diminished interest or pleasure in all, or almost all, activities most of the day, nearly every day (as indicated by either subjective account or observation made by others).

\[HDE7c_{D24e} \text{ is } \text{Yes}(1) \text{ OR } HDE7d_{D24f} \text{ is } \text{Yes}(1).\]

3. significant weight loss when not dieting or weight gain (e.g., a change of more than 5% of body weight in a month), or decrease or increase in appetite nearly every day.

\[HDE9a_{D26a} \text{ is } \text{Yes}(1) \text{ OR } HDE9b_{D26b} \text{ is } \text{Yes}(1) \text{ OR } HDE9c_{D26c} \text{ is } \text{Yes}(1) \text{ OR } HDE9d_{D26e} \text{ is } \text{Yes}(1).\]

Note D26d, D26f (weight gain, loss) deleted from NCSR.

4. insomnia or hypersomnia nearly every day.

\[HDE9e_{D26g} \text{ is } \text{Yes}(1) \text{ OR } HDE9f_{D26h} \text{ is } \text{Yes}(1).\]

5. psychomotor agitation or retardation nearly every day (observable by others, not merely subjective feelings of restlessness or being slowed down).

\[HDE9i_{D26m} \text{ is } \text{Yes}(1) \text{ OR } HDE9k_{D26o} \text{ is } \text{Yes}(1).\]

6. fatigue or loss of energy nearly every day.

\[HDE9g_{D26j} \text{ is } \text{Yes}(1).\]

7. feelings of worthlessness or excessive or inappropriate guilt (which may be delusional) nearly every day (not merely self-reproach or guilt about being sick)

\[HDE9o_{D26u} \text{ is } \text{Yes}(1).\]
Adult Major Depressive Episode

A. Part 2.

8. diminished ability to think or concentrate, or indecisiveness, nearly every day (either by subjective account or as observed by others)

HDE9l_D26p is Yes(1) OR HDE9m_D26r is Yes(1) OR HDE9n_D26s is Yes(1).

9. recurrent thoughts of death (not just fear of dying), recurrent suicidal ideation without a specific plan, or a suicide attempt or a specific plan for committing suicide.

HDE9p_D26aa is Yes(1) OR HDE9q_D26bb is Yes(1) OR HDE9r_D26cc is Yes(1).

Note: Respondents leave D24, D26 series after 5 of the following symptoms endorsed:

1) IF HDE7a_D24a OR HDE7b_D24c IS CODED ‘1’ (YES) INCREMENT COUNT BY ONE.
2) IF HDE7c_D24e OR HDE7d_D24f IS CODED ‘1’ (YES) INCREMENT COUNT BY ONE.
3) IF HDE9a_D26a OR HDE9b_D26b IS CODED ‘1’ (YES) INCREMENT COUNT BY ONE.
4) IF HDE9c_D26c OR HDE9d_D26d IS CODED ‘1’ (YES) INCREMENT COUNT BY ONE.
5) IF HDE9e_D26e OR HDE9f_D26f IS CODED ‘1’ (YES) INCREMENT COUNT BY ONE.
6) IF HDE9g_D26g IS CODED ‘1’ (YES) INCREMENT COUNT BY ONE.
7) IF HDE9i_D26i OR HDE9j_D26j IS CODED ‘1’ (YES) INCREMENT COUNT BY ONE.
8) IF HDE9l_D26p OR HDE9m_D26r OR HDE9n_D26s IS CODED ‘1’ (YES) INCREMENT COUNT BY ONE.
9) IF HDE9p_D26aa IS CODED ‘1’ (YES) INCREMENT COUNT BY ONE.
10) IF HDE9q_D26bb OR HDE9r_D26cc IS CODED ‘1’ (YES) INCREMENT COUNT BY ONE.

If respondent has 4 of 9 DSM-IV Criteria A part 2 symptoms and
sum(HDE9a_D26a = 1 or HDE9b_D26b = 1, HDE9c_D26c = 1 or HDE9d_D26d = 1) = 2 and
HDE9p_D26aa is missing then respondent meets Criteria A Part 2.

B. The symptoms do not meet criteria for a Mixed Episode

Not operationalized.

Part 1 OR Part 2.

Part 1. The symptoms cause clinically significant distress.

HDE12_D17 is (2,3,4).

Note: D18, D19, D24b deleted from NCSR.

Part 2. The symptoms cause clinically significant impairment in social, occupational, or other important areas of functioning.

HDE11_D28 is (3,4,5)

Note D28a, D66a-d deleted from NCSR.

D. The symptoms are not due to the direct physiological effects of a substance (e.g., a drug of abuse, a medication), or are not due to a general medical condition. NOTE: D29b is used as an initial screener only. All open ended items are reviewed by a clinician to determine organic exclusion.

Note: D29a, D29b deleted from NCSR, criteria not operationalized.
Adult Major Depressive Episode

E. Part 1 OR Part 2 OR Part 3

Part 1. The symptoms are not better accounted for by Bereavement.
Not operationalized.
Part 2. If the symptoms are associated with bereavement, they persist for longer than two months
Not operationalized
Part 3. If the symptoms are associated with bereavement, they are characterized by (a) marked functional impairment, (b) morbid preoccupation with worthlessness, (c) suicidal ideation, (d) psychotic symptoms, or (e) psychomotor retardation. At least one of a-e must be present.
Not operationalized

NOTE: D23 was deleted from the instrument therefore the bereavement criteria could not be operationalized.

Adult Major Depressive Disorder with hierarchy

Note: Frequency specification (single episode/recurrent) not operationalized.

A. Presence of a Major Depressive Episode.

Major Depressive Episode is Yes(1)

B. The Major Depressive Episode is not better accounted for by Schizoaffective Disorder and is not superimposed on Schizophrenia, Schizophrenia-form Disorder, Delusional Disorder, or Psychotic Disorder Not Otherwise specified.

Not Operationalized

C. There has never been a Manic Episode, a Mixed Episode, or a Hypomanic Episode. Note: This exclusion does not apply if all of the manic-like, mixed-like, or hypomanic-like episodes are substance or treatment induced or are due to the direct physiological effects of a general medical condition.

Note: Mixed Episode not operationalized.

NOT(Mania OR Hypomania)
**Adult Bipolar and Related Disorders**

**Adult Manic Episode (Old Version) – DSM-IV Criteria (MH_MAN_OLD)**

Part 1 AND Part 2

Part 1. A distinct period of abnormally and persistently elevated, expansive, or irritable mood.

\[ \text{HSC9\_SC24} = \text{Yes}(1) \text{ OR } \text{HSC11\_SC25a} = \text{Yes}(1). \]

Part 2. A distinct period of abnormally and persistently elevated, expansive, or irritable mood lasting at least 1 week (or any duration if hospitalization is necessary).

\[ (\text{HMA2b\_M3b} \geq 1 \text{ week}) \text{ OR } (\text{HMA2e\_M3d} \geq 1 \text{ week}) \text{ OR } (\text{HMA6b\_M6b} \geq 1 \text{ week}) \text{ OR } (\text{HMA6e\_M6d} \geq 1 \text{ week}). \]

Note: M20, M22, M48 from NCSR are deleted.

B. During the mood disturbance, three (or more) of the following symptoms have persisted (four if the mood is only irritable) and have been present to a significant degree:

Mood is only irritable: \[ \text{HSC11\_SC25a} \text{ is Yes}(1) \text{ AND } (\text{HSC9\_SC24} \text{ is NOT Yes}(1)) \]

1. inflated self-esteem or grandiosity

\[ \text{HMA7n\_M7n} \text{ is Yes}(1) \text{ OR } \text{HMA7o\_M7o} \text{ is Yes}(1). \]

2. decreased need for sleep (e.g., feels rested after only 3 hours of sleep)

\[ \text{HMA7j\_M7j} \text{ is Yes}(1). \]

3. more talkative than usual or pressure to keep talking

\[ \text{HMA7f\_M7f} \text{ is Yes}(1). \]

4. flight of ideas or subjective experience that thoughts are racing

\[ \text{HMA7i\_M7i} \text{ is Yes}(1). \]

5. distractibility (i.e., attention too easily drawn to unimportant or irrelevant external stimuli)

\[ \text{HMA7g\_M7g} \text{ is Yes}(1) \text{ OR } \text{HMA7h\_M7h} \text{ is Yes}(1). \]

6. increase in goal-oriented activity (either socially, at work or school, or sexually) or psychomotor agitation.

\[ \text{HMA7a\_M7a} \text{ is Yes}(1) \text{ OR } \text{HMA7b\_M7b} \text{ is Yes}(1) \text{ OR } \text{HMA7c\_M7c} \text{ is Yes}(1) \text{ OR } \text{HMA7e\_M7e} \text{ is Yes}(1). \]

7. excessive involvement in pleasurable activities that have a high potential for painful consequences (e.g., engaging in unrestrained buying sprees, sexual indiscretions, or foolish business investments)

\[ \text{HMA7k\_M7k} \text{ is Yes}(1) \text{ OR } \text{HMA7l\_M7l} \text{ is Yes}(1) \text{ OR } \text{HMA7m\_M7m} \text{ is Yes}(1). \]
Adult Manic Episode (Old Version) – DSM-IV Criteria(DSM_MAN_OLD)

C. The symptoms do not meet criteria for a Mixed Episode

   Not Operationalized

D. Part 1 OR Part 2 OR Part 3

Part 1. The mood disturbance is sufficiently severe to cause marked impairment in occupational functioning or in usual social activities or relationships with others.

   HMA9_M9 is (4,5).

   Note: M9a, M27a-d, M29, M33 from NCSR are deleted.

Part 2. The mood disturbance is sufficiently severe to necessitate hospitalization to prevent harm to self.

   Note M48 from NCSR is deleted, criteria not operationalized.

Part 3. There are psychotic features

   HMA7o_M7o is Yes(1).

E. The symptoms are not due to the direct physiological effects of a substance (e.g., a drug of abuse, a medication, or other treatment) or a general medical condition (e.g., hyperthyroidism)

   Note M10a, M10b from NCSR are deleted, criteria not operationalized.

MTO Bipolar I Old (F_MH_BIPOLARI_OLD)

   MH_MAN_OLD is Yes(1).
Adult Hypomanic Episode (Old version) – DSM-IV Criteria(MH_HYP_OLD)

A. Part 1 AND Part 2

Part 1. A distinct period of abnormally and persistently elevated, expansive, or irritable mood.

   HSC9_SC24 is Yes(1) OR HSC11_SC25a is Yes(1).

Part 2. A distinct period of abnormally and persistently elevated, expansive, or irritable mood lasting at least 4 days, that is clearly different from the usual nondepressed mood.

   HSC9_SC24 is Yes(1) OR (HMA2b_M3b >= 4 days) OR (HMA2e_M3d >= 4 days) OR (HMA6b_M6b >= 4 days) OR HMA6e_(M6d >= 4 days).

   Note: M20, M22 from NCSR are deleted.

B. During the mood disturbance, three(or more) of the following symptoms have persisted(four if the mood is only irritable) and have been present to a significant degree:

   Mood is only irritable: HSC11_SC25a is Yes(1) and (HSC9_SC24 is NOT Yes(1))
   1. inflated self-esteem or grandiosity
      HMA7n_M7n is Yes(1) OR HMA7o_M7o is Yes(1).
   2. decreased need for sleep(e.g., feels rested after only 3 hours of sleep)
      HMA7j_M7j is Yes(1).
   3. more talkative than usual or pressure to keep talking
      HMA7f_M7f is Yes(1).
   4. flight of ideas or subjective experience that thoughts are racing
      HMA7i_M7i is Yes(1).
   5. distractibility (i.e., attention too easily drawn to unimportant or irrelevant external stimuli)
      HMA7g_M7g is Yes(1) OR HMA7h_M7h is Yes(1).
   6. increase in goal-oriented activity(either socially, at work or school, or sexually) or psychomotor agitation.
      HMA7a_M7a is Yes(1) OR HMA7b_M7b is Yes(1) OR HMA7c_M7c is Yes(1) OR HMA7e_M7e is Yes(1).
   7. excessive involvement in pleasurable activities that have a high potential for painful consequences(e.g., engaging in unrestrained buying sprees, sexual indiscretions, or foolish business investments)
      HMA7k_M7k is Yes(1) OR HMA7l_M7l is Yes(1) OR HMA7m_M7m is Yes(1).

C. The episode is associated with an unequivocal change in functioning that is uncharacteristic of the person when not symptomatic.

   HMA9_M9 is (3,4,5).

   Note: M9a, M27a-d, M29, M33 from NCSR are deleted.

D. The disturbance in mood and the change in functioning are observable by others.

   Not Operationalized
Adult Hypomanic Episode (Old version) – DSM-IV Criteria(MH_HYP_OLD)


Note: By strict DSM criteria, those people who meet all criteria for mania but have a duration of 4 to 6 days without hospitalization are excluded from a diagnosis of hypomania. (See mania criterion A,D and hypomania criterion E). We have defined these people as meeting hypomania. This is implemented by suppressing Criterion E for those with a duration of 4 to 6 days and without hospitalization.

Part 1. The mood disturbance is not severe enough to cause marked impairment in occupational functioning or in usual social activities or relationships with others.

Not (HMA9_M9 is (4,5)).

Note: M9a, M27a-d, M29, M33 from NCSR are deleted.

Part 2. The mood disturbance is not severe enough to necessitate hospitalization to prevent harm to self.

Note M48 from NCSR is deleted, criteria not operationalized.

Part 3. There are no psychotic features

HMA7o_M7o is No(5).

F. The symptoms are not due to the direct physiological effects of a substance (e.g., a drug of abuse, a medication, or other treatment) or a general medical condition (e.g. hyperthyroidism)

Note M10a, M10b from NCSR are deleted, criteria not operationalized.

Adult Bipolar II Old (F_MH_BIPOLARII_OLD)

A. Presence (or history) of one or more Major Depressive Episodes

f_mh_mde_evr_ad is Yes(1)

B. Presence (or history) of at least one Hypomanic Episode

mh_hyp_old is Yes(1)

C. There has never been a Manic Episode or Mixed Episode

mh_man_old is NOT Yes(1)

E. The symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.

HMA9_M9 is (3,4,5).

Note: M9a, M27a-d, M29, M33 from NCSR are deleted.
Adult (Bipolar I/II/Sub), Mania, Hypomania

Bipolar I

mh_man_old is Yes (1) AND at least 6 symptoms in the HMA7_M7 series(MH_MAN_OLD Criteria B1-B7) AND at least two of the following symptoms: HMA7b_M7b, HMA7c_M7c, HMA7k_M7k, HMA7l_M7l, HMA7o_M7o is 1(yes).

Bipolar II

NOT Bipolar I AND

(f_mh_bipolar I old is Yes (1) AND f_mh_dep_evr_ad = 1 AND HMA1_M1 = 1 AND HMA7i_M7i = 1) *** these are the people who meet criteria for our old bipolar I definition (mania) but no longer meet criteria with the new definition, and have a major depressive episode and euphoria and racing thoughts ***

OR

(f_mh_bipolarII_old is Yes(1) AND (HMA3b_M3b >= 14 days OR HMA3d_M3d >= 14 days OR HMA6b_M6b >= 14 days OR HMA6e_M6d >= 14 days) AND at least 2 of the following symptoms (HMA7b_M7b, HMA7c_M7c, HMA7k_M7k, HMA7l_M7l, HMA7o_M7o) )

Note: M20, M22 from NCSR are deleted.

***This is our old definition of bipolar II (in blue text) tightened up to include a duration of at least 14 days and at least 2 of the “super” symptoms in terms of concordance

Bipolar Sub

*** anyone left with old mania/hypomania who did not meet criteria for bipolar I and bipolar II above***

Not Bipolar I or Bipolar II as defined above AND (mh_man_old is Yes(1) OR mh_hyp_old is Yes(1)).

Mania(dsm_man)

Bipolar I is Yes(1).

Hypomania(dsm_hyp)

Bipolar II is Yes(1) OR (Bipolar Sub is Yes(1) AND mh_hyp_old is Yes(1)).

Sub-Hypomania(dsm_hypsub)

Bipolar Sub is Yes(1) AND (f_mh_bipolarIII Old is Yes(1) OR mh_hyp_old is Yes(1)).
Adult Generalized Anxiety Disorder (GAD)

Part 1 AND Part 2 AND Part 3

Part 1. Excessive anxiety and worry (apprehensive expectation)

HSC12_SC26 is Yes(1) OR HSC13_SC26a is Yes(1) OR HSC14_SC26b is Yes(1).

Part 2. Anxiety occurring more days than not for at least 6 months

HGA5_G5 is at least 6 months.

Note G30, G31 from the NCSR are deleted.

Part 3. Anxiety about a number of events or activities (such as work or school performance).

At least 2 worries from HGA1_G1__S series.

B. The person finds it difficult to control the worry.

HGA3_G4 is (1,2).

C. The anxiety and worry are associated with three (or more) of the following six symptoms (with at least some symptoms present for more days than not for the past 6 months) (1. restlessness or feeling keyed up or edge, 2. being easily fatigued, 3. difficulty concentrating or mind going blank, 4. irritability, 5. muscle tension, 6. sleep disturbance.)

Note: “at least some symptoms present for more days than not” is not operationalized

At least 3 of (HGA7a_G9a, HGA7b_G9b, HGA7c_G9c, HGA7d_G9d, HGA7e_G9e, HGA7f_G9f) are Yes(1).

The focus of the anxiety and worry is not confined to features of an Axis 1 disorder.

At least 1 value of 1-10, 13, 20-32 in HGA1_G1__S series.

Note: DSM IV states “the anxiety and worry should not occur exclusively during PTSD”. This part of criteria D is not operationalized.

Part 1 OR Part 2

Part 1. The anxiety, worry, or physical symptoms cause clinically significant distress.

HGA4_G4a is(1,2) OR HGA9_G15 is (3,4,5).

Part 2. The anxiety, worry, or physical symptoms cause clinically significant impairment in social, occupational, or other important areas of functioning.

HGA10_G17 is (3,4,5).

F. Part 1 AND Part 2

Part 1. The disturbance is not due to the direct physiological effects of a substance (e.g. a drug of abuse, a medication) or due to a general medical condition (e.g., hyperthyroidism).

Note: G18a, G18b from NCSR are deleted, criteria not operationalized.
**Adult GAD - DSM-IV Criteria**

Part 2. The disturbance does not occur exclusively during a Mood Disorder, a Psychotic Disorder, or a Pervasive Developmental Disorder.

Note: Psychotic Disorder and Pervasive Developmental Disorder hierarchies are not operationalized.

\[(\text{Major Depression} = \text{No}(5) \ \text{AND} \ \text{Minor Depression} = \text{No}(5) \ \text{AND} \ \text{Mania} = \text{No}(5))\]  
\[\text{OR}\]

\[
(\text{Major Depression} = \text{Yes}(1) \ \text{OR} \ \text{Minor Depression} = \text{Yes}(1) \ \text{OR} \ \text{Mania} = \text{Yes}(1)) \ \text{AND} \\
(\text{GAD onset} < \text{Mood onset}) \ \text{OR} \\
(\text{GAD recency} > \text{Mood recency}) \]

\[\text{OR}\]
Adult Intermittent Explosive Disorder (IED)

A. Several discrete episodes of failure to resist aggressive impulses that result in serious assaultive acts or destruction of property

\[3 \leq HIE1_{IED3} \leq 9997 \text{ AND } HIE4_{IED6} \text{ is Yes(1).}\]

B. The degree of aggressiveness expressed during the episodes is grossly out of proportion to any precipitating psychosocial Stressors

\[HIE2_{IED5} \text{ is Yes(1) OR } HIE3a_{IED5a} \text{ is Yes(1) OR } HIE3b_{IED5b} \text{ is Yes(1)}\]

C. Part 1 AND Part 2

Part 1. The aggressive episodes are not better accounted for by another mental disorder

Part a and part b and part c and part d

Part a. IF IED9a = 5 and LT DSM-IV alcohol or drug abuse or dependence is yes and the ages of onset and recency of IED fall within the ages of onset and recency of alc-drug disorders, then R should be coded as not having IED with diagnostic hierarchy rules. This excludes cases due to drinking and drugs.

Alcohol, drug disorders not created, criteria not operationalized.

Part b. IF IED10b = 5, then R should be coded as not having IED with diagnostic hierarchy rules. This excludes cases due to physical illness or medication for physical illness.

\[\text{Not}(HIE6a_{IED10b} = 5)\]

Part c. IF IED11a = 5 and lifetime MDE is yes and AOO and recency of IED falls within the ages of onset and recency of MDE, then R should be coded as not having IED with diagnostic hierarchy rules. This excludes cases due to MDE.

\[\text{NOT}(HIE7a_{IED11a} = 5 \text{ and } f\_mh\_dep\_evr\_ad = 1 \text{ and} \ (f\_mh\_dep\_aoo\_ad \leq ied\_on \leq f\_mh\_dep\_rec\_ad) \text{ and} \ (f\_mh\_dep\_aoo\_ad \leq ied\_on \leq f\_mh\_dep\_rec\_ad) \text{ and} \ (f\_mh\_dep\_aoo\_ad \leq ied\_rec \leq f\_mh\_dep\_rec\_ad))\]

Part d. The above three were the only ones explicitly asked about in the IED section. We should have also included a question about mania, but we did not. To make up for this, we want to impose the following additional requirement. We want to recode a person as not having IED with hierarchy if he meets all of the following requirements:

If (i) lifetime manic episode or hypomanic episode are yes

\[\text{NOT}(f\_mh\_man\_evr\_ad = 1 \text{ or } f\_mh\_hyp\_evr\_ad = 1)\]

(ii) the AOO and recency of IED fall within the ages of onset and recency of manic or hypomanic episode

\[\text{NOT} (\min(f\_mh\_man\_aoo\_ad,f\_mh\_hyp\_aoo\_ad) \leq ied\_on \leq \max(f\_mh\_man\_rec\_ad,f\_mh\_hyp\_rec\_ad) \text{ AND} \ \min(f\_mh\_man\_aoo\_ad,f\_mh\_hyp\_aoo\_on) \leq ied\_rec \leq \max(f\_mh\_man\_rec\_ad,f\_mh\_hyp\_rec\_ad))\]

(iii) the number of years in M23 is greater than or equal to the number of years in IED19 (i.e., lifetime # of years with manic or hypomanic episodes is GTE lifetime # of years with IED). Note: that in cases where R says DK/REF for either M23 or IED19, we want to assume that years with mania is GTE years with IED).

Note: M23 removed from NCSR questionnaire, criteria not operationalized.

Criterion C Part 2. The aggressive episodes are not due to the direct physiological effects of a substance or a general medical condition.

\[(\text{HIE5}_{IED9} \text{ is No(5) or HIE5a}_{IED9a} \text{ is Yes(1)) AND} \ (\text{HIE6}_{IED10} \text{ is No(5) or HIE6a}_{IED10b} \text{ is Yes(1))}\]

Measuring DSM-IV Mental Disorders in the MTO Final Evaluation, Page 15
Adult Panic Attack

A. A discrete period of intense fear or discomfort.
   HSC1_SC20 is Yes(1) OR HSC2_SC20a is Yes(1).

B. Four or more of the following symptoms occur:
   1. palpitations, pounding heart, or accelerated heart rate.
      HPD1a_PD1a is Yes(1).
   2. sweating.
      HPD1e_PD1e is Yes(1).
   3. trembling or shaking.
      HPD1f_PD1f is Yes(1).
   4. sensation of shortness of breath or smothering.
      HPD1b_PD1b is Yes(1).
   5. feeling of choking.
      HPD1h_PD1h is Yes(1).
   6. chest pain or discomfort.
      HPD1i_PD1i is Yes(1).
   7. nausea or abdominal distress.
      HPD1c_PD1c is Yes(1).
   8. feeling dizzy, unsteady, lightheaded, or faint.
      HPD1d_PD1d is Yes(1) OR HPD1m_PD1m is Yes(1).
   9. derealization (feelings of unreality) or depersonalization (being detached from oneself).
      HPD1k_PD1k is Yes(1) OR HPD1l_PD1l is Yes(1).
10. fear of losing control or going crazy.
       HPD1j_PD1j is Yes(1).
11. fear of dying.
       HPD1n_PD1n is Yes(1).
12. paresthesias (numbing or tingling sensations).
       HPD1p_PD1p is Yes(1).
13. chills or hot flushes.
       HPD1o_PD1o is Yes(1).

3 Symptoms and HPD1g_PD1g is Yes(1) added to meet Criteria

C. The symptoms developed abruptly and reached a peak within 10 minutes.
   HPD2_PD3 is (1,3).
Adult Panic Disorder

Part 1 AND Part 2.


(Panic Attack is Yes(1)) AND (1 < HPD3_PD4 < 998) AND (4 <=HPD4a_PD17a < 998).

Part 2. At least one of the attacks has been followed by 1 month (or more) of one (or more) of the following:

persistent concern about having additional attacks.

HPD8a_PD13a is Yes(1).

worry about the implications of the attack or its consequences(e.g., losing control, having a heart attack, “going crazy”)

HPD8b_PD13b is Yes(1).

a significant change in behavior related to the attacks.

HPD8c_PD13c is Yes(1) OR HPD8d_PD13d is Yes(1).

Note: PD42 from the NCSR is deleted.

The presence or the absence of Agoraphobia

Not Operationalized

The Panic Attacks are not due to the direct physiological effects of a substance(e.g., a drug of abuse, a medication) or a general medical condition(e.g., hyperthyroidism).

PD25a, PD25b from the NCSR are deleted.

D. The Panic Attacks are not better accounted for by another mental disorder, such as Social Phobia (e.g., occurring on exposure to feared social situations), Specific Phobia (e.g., on exposure to a specific phobic situation), Obsessive Compulsive Disorder (e.g., on exposure to dirt in someone with an obsession about contamination), Posttraumatic Stress Disorder(e.g., in response to stimuli associated with a severe stressor), or Separation Anxiety Disorder (e.g., in response to being away from home or close relatives).

Note: This criterion is operationalized by focusing in criterion A on “out of the blue” attacks. By excluding all panic attacks triggered by fear or real danger we have thereby excluded all attacks associated with Social Phobia, Specific Phobia, Obsessive Compulsive Disorder, Posttraumatic Stress Disorder, Separation Anxiety Disorder.
Adult Post-Traumatic Stress Disorder (PTSD)

A. Worst Event: (Part 1 AND Part 2 Worst Event)
   Random Event: (Part 1 AND Part 2 Worst Event)

   Part 1. The person has been exposed to a traumatic event in which the person experienced, witnessed, or was confronted with an event or events that involved actual or threatened death or serious injury, or a threat to the physical integrity of self or others.

   Combat Experience/Relief Worker in War Zone/Civilian in War Zone/Civilian in region of Terror/Refugee:
   
   PT29, PT30, PT31, PT32, PT33 from NCSR was deleted, criteria not operationalized.

   Kidnapped:
   
   PT34 from NCSR was deleted, criteria not operationalized.

   Toxic Exposure:
   
   PT35 from NCSR was deleted, criteria not operationalized.

   Automobile Accident:
   
   PT36 from NCSR was deleted, criteria not operationalized.

   Other Life Threatening Accident:
   
   PT37 from NCSR was deleted, criteria not operationalized.

   Natural Disaster:
   
   PT38 from NCSR was deleted, criteria not operationalized.

   Man-made Disaster:
   
   PT39 from NCSR was deleted, criteria not operationalized.

   Life Threatening Illness:
   
   PT40 from NCSR was deleted, criteria not operationalized.

   Beaten up as Child by Caregiver:
   
   HCV1_PT13 is Yes(1).

   Beaten by Spouse or Romantic Partner:
   
   HCV2_PT14 is Yes(1).

   Beaten by Other:
   
   HCV3_PT15 is Yes(1).

   Raped:
   
   HCV5_PT17 is Yes(1).

   Sexually Assaulted:
   
   HCV6_PT18 is Yes(1).
A. Part 1. (continued)

Mugged or Threatened with a Weapon:

   HCV4_PT16 is Yes(1).

Stalked:

   PT47 from NCSR was deleted, criteria not operationalized.

Unexpected Death of a Loved One:

   HCV7_PT20 is Yes(1).

Child with Serious Illness:

   PT49 from NCSR was deleted, criteria not operationalized.

Traumatic Event to Loved One:

   HCV8_PT22 is Yes(1).

Witnessed physical fights at home:

   HCV9_PT22_1 is Yes(1).

Witnessed Death or Dead Body, or Saw Someone Seriously Hurt:

   HCV10_PT23 is Yes(1).

Accidentally Caused Serious Injury or Death

   PT52 from NCSR was deleted, criteria not operationalized.

Purposely Injured, Tortured, or Killed Someone.

   PT53 from NCSR was deleted, criteria not operationalized.

Saw Atrocities:

   PT54 from NCSR was deleted, criteria not operationalized.

Some Other Event:

   HCV11_PT27 is Yes(1).

Private Event:

   PT57 from NCSR was deleted, criteria not operationalized.

Part 2. The person has been exposed to a traumatic event in which the person’s response involved intense fear, helplessness, or horror.

   PT67, PT67a-c, PT207, PT207a-c from NCSR were deleted, criteria not operationalized.
**Adult DSM-IV Post-Traumatic Stress Disorder**

B. Worst Event: (Part 1 Worst Event AND Part 2 Worst Event)  
Random Event: (Part 1 Random Event AND Part 2 Random Event)

Part 1. The traumatic event is experienced in one (or more) of the following ways:

1. recurrent and intrusive distressing recollections of the event, including images, thoughts, or perceptions.
   
   PT86, PT222 from NCSR were deleted, criteria not operationalized.

2. recurrent distressing dreams of the event.
   
   PT87, PT223 from NCSR were deleted, criteria not operationalized.

3. acting or feeling as if the traumatic event were recurring (includes a sense of reliving the experience, illusions, hallucinations, and dissociative flashback episodes, including those that occur on awakening or when intoxicated).
   
   PT88, PT224 from NCSR were deleted, criteria not operationalized.

4. intense psychological distress at exposure to internal or external cues that symbolize or resemble an aspect of the traumatic event.
   
   PT89, PT225 from NCSR were deleted, criteria not operationalized.

5. physiological reactivity on exposure to internal or external cues that symbolize or resemble an aspect of the traumatic event.
   
   PT90, PT226 from NCSR were deleted, criteria not operationalized.

Part 2. The traumatic event is persistently reexperienced.

PT113, PT230 from NCSR were deleted, criteria not operationalized.


Part 1. Avoidance of stimuli associated with the trauma and numbing of general responsiveness (not present before the trauma), as indicated by three(or more) of the following:

1. efforts to avoid thoughts, feelings, or conversations associated with the trauma
   
   PT68, PT208 from NCSR were deleted, criteria not operationalized.

2. efforts to avoid activities, places, or people that arouse recollections of the trauma
   
   HCV21_PT275 is Yes(1) OR HCV30_PT275 is Yes(1).

3. inability to recall an important aspect of the trauma
   
   PT70, PT210 from NCSR were deleted, criteria not operationalized.

4. markedly diminished interest or participation in significant activities
   
   HCV15_PT269 is Yes(1) OR HCV24_PT269 is Yes(1).

5. feeling of detachment or estrangement from others
   
   HCV16_PT270 is Yes(1) OR HCV25_PT270 is Yes(1).
Adult DSM-IV Post-Traumatic Stress Disorder

C. Part 1. (continued)

6. restricted range of affect (e.g., unable to have loving feelings)
   HCV17_PT271 is Yes(1) OR HCV26_PT271 is Yes(1).

7. sense of a foreshortened future (e.g., does not expect to have a career, marriage, children, or a normal life span)
   HCV18_PT272 is Yes(1) OR HCV27_PT272 is Yes(1).

Part 2. Persistence avoidance of stimuli associated with the trauma and numbing of general responsiveness (not present before the trauma).
   PT113, PT219 from NCSR were deleted, criteria not operationalized.


Part 1. Symptoms of increased arousal (not present before the trauma), as indicated by two (or more) of the following:

1. difficulty falling or staying asleep.
   HCV19_PT273 is Yes(1) OR HCV28_PT273 is Yes(1).

2. irritability or outbursts of anger.
   PT103, PT234 from NCSR were deleted, criteria not operationalized.

3. difficulty concentrating.
   PT104, PT235 from NCSR were deleted, criteria not operationalized.

4. hypervigilance.
   PT105, PT236 from NCSR were deleted, criteria not operationalized.

5. exaggerated startle response.
   HCV20_PT274 is Yes(1) OR HCV29_PT274 is Yes(1).

Part 2. Persistent symptoms of increased arousal (not present before the trauma).
   PT113, PT241 from NCSR were deleted, criteria not operationalized.

E. Duration of the disturbance (symptoms in Criteria B, C, and D) is more than 1 month.
   PT110, PT218, PT229, PT240 from NCSR were deleted, criteria not operationalized.

F. The disturbance causes clinically significant distress or impairment in social, occupational, or other important areas of functioning.
   PT114, PT115, PT220, PT221, PT231, PT232, PT242, PT243, PT246, PT278 from NCSR were deleted, criteria not operationalized.

We used the above algorithm to create an upper bound for the diagnosis. Because only criteria A1, C1, and D were assessed in the MTO, we used the NCSR data to generate a predicted probability of meeting the disorder among those who meet A, C, and D in the MTO. The predicted probability was used to generate a yes/no dx for each respondent who meet A, C, and D in the MTO.
Youth Major Depressive Episode

A. Five (or more) of the following symptoms have been present during the same 2-week period and represent a change from previous functioning; at least one of the symptoms is either (1) depressed mood or (2) loss of interest or pleasure. **Note:** DSM-IV states that children and adolescents may be “irritable rather than sad”. This is not operationalized when examining adults who report symptoms from childhood.

Part 1 AND Part 2.

Part 1. Symptoms have been present during the same 2-week period and at least one of the symptoms is either (1) depressed mood or (2) loss of interest or pleasure.

\[(YDE6b_D22b \geq 2 \text{ weeks} \text{ OR } YDE6e_D22d \geq 2 \text{ weeks}) \text{ AND} \]
\[(YDE7a_D24a \text{ is Yes(1)} \text{ OR } YDE7b_D24c \text{ is Yes(1)} \text{ OR } YDE7c_D24e \text{ is Yes(1)} \text{ OR } YDE7d_D24f \text{ is Yes(1)})\]

Note: D24b, D24d, D39 are deleted from NCSR.

Part 2. At least five of the following symptoms must be present and represent a change from previous functioning:

Note: “change from previous functioning” is implicit in the item corresponding to each symptom (e.g. “more than usual”, “less than usual”).

1. depressed mood most of the day, nearly every day, as indicated by either subjective report (e.g., feels sad or empty) or observation made by others.

\[YDE7a_D24a \text{ is Yes(1)} \text{ OR } YDE7b_D24c \text{ is Yes(1)}.\]

Note D24b, D24d are deleted from NCSR.

2. markedly diminished interest or pleasure in all, or almost all, activities most of the day, nearly every day (as indicated by either subjective account or observation made by others)

\[YDE7c_D24e \text{ is Yes(1)} \text{ OR } YDE7d_D24f \text{ is Yes(1)}.\]

3. significant weight loss when not dieting or weight gain (e.g., a change of more than 5% of body weight in a month), or decrease or increase in appetite nearly every day.

\[YDE9a_D26a \text{ is Yes(1)} \text{ OR } YDE9b_D26b \text{ is Yes(1)} \text{ OR } YDE9c_D26c \text{ is Yes(1)} \text{ OR } YDE9d_D26e \text{ is Yes(1)}.\]

Note D26d, D26f (weight gain, loss) deleted from NCSR.

4. insomnia or hypersomnia nearly every day.

\[YDE9e_D26g \text{ is Yes(1)} \text{ OR } YDE9f_D26h \text{ is Yes(1)}.\]

5. psychomotor agitation or retardation nearly every day (observable by others, not merely subjective feelings of restlessness or being slowed down).

\[YDE9i_D26m \text{ is Yes(1)} \text{ OR } YDE9k_D26o \text{ is Yes(1)}.\]

6. fatigue or loss of energy nearly every day.

\[YDE9g_D26j \text{ is Yes(1)}.\]

7. feelings of worthlessness or excessive or inappropriate guilt (which may be delusional) nearly every day (not merely self-reproach or guilt about being sick)

\[YDE9o_D26u \text{ is Yes(1)}.\]
Youth Major Depressive Episode

A. Part 2.

8. diminished ability to think or concentrate, or indecisiveness, nearly every day (either by subjective account or as observed by others)

YDE9l_D26p is Yes(1) OR YDE9m_D26r is Yes(1) OR YDE9n_D26s is Yes(1).

9. recurrent thoughts of death (not just fear of dying), recurrent suicidal ideation without a specific plan, or a suicide attempt or a specific plan for committing suicide.

YDE9p_D26aa is Yes(1) OR YDE9q_D26bb is Yes(1) OR YDE9r_D26cc is Yes(1).

Note: Respondents leave D24, D26 series after 5 of the following symptoms endorsed:

(1) IF YDE7a_D24a OR YDE7b_D24c IS CODED ‘1’ (YES) INCREMENT COUNT BY ONE.
(2) IF YDE7c_D24e OR YDE7d_D24f IS CODED ‘1’ (YES) INCREMENT COUNT BY ONE.
(3) IF YDE9a_D26a OR YDE9b_D26b IS CODED ‘1’ (YES) INCREMENT COUNT BY ONE.
(4) IF YDE9c_D26c OR YDE9d_D26d IS CODED ‘1’ (YES) INCREMENT COUNT BY ONE.
(5) IF YDE9e_D26g OR YDE9f_D26h IS CODED ‘1’ (YES) INCREMENT COUNT BY ONE.
(6) IF YDE9g_D26i IS CODED ‘1’ (YES) INCREMENT COUNT BY ONE.
(7) IF YDE9h_D26j IS CODED ‘1’ (YES) INCREMENT COUNT BY ONE.
(8) IF YDE9l_D26p OR YDE9m_D26r OR YDE9n_D26s IS CODED ‘1’ (YES) INCREMENT COUNT BY ONE.
(9) IF YDE9o_D26u IS CODED ‘1’ (YES) INCREMENT COUNT BY ONE.
(10) IF YDE9p_D26aa OR YDE9q_D26bb OR YDE9r_D26cc IS CODED ‘1’ (YES) INCREMENT COUNT BY ONE.

If respondent has 4 of 9 DSM-IV Criteria A part 2 symptoms and
\[ \text{sum(YDE9a_D26a = 1 or YDE9b_D26b = 1, YDE9c_D26c = 1 or YDE9d_D26e = 1) = 2 and YDE9p_D26aa is missing} \]
then respondent meets Criteria A Part 2.

B. The symptoms do not meet criteria for a Mixed Episode

Not operationalized.

Part 1 OR Part 2.

Part 1. The symptoms cause clinically significant distress.

YDE12_D17 is (2,3,4).

Note: D18, D19, D24b deleted from NCSR.

Part 2. The symptoms cause clinically significant impairment in social, occupational, or other important areas of functioning.

YDE11_D28 is (3,4,5)

Note D28a, D66a-d deleted from NCSR.

D. The symptoms are not due to the direct physiological effects of a substance (e.g., a drug of abuse, a medication), or are not due to a general medical condition. NOTE: D29b is used as an initial screener only. All open ended items are reviewed by a clinician to determine organic exclusion.

Note: D29a, D29b deleted from NCSR, criteria not operationalized.
Youth Major Depressive Episode

E. Part 1 OR Part 2 OR Part 3

Part 1. The symptoms are not better accounted for by Bereavement.
   Not operationalized.

Part 2. If the symptoms are associated with bereavement, they persist for longer than two months
   Not operationalized

Part 3. If the symptoms are associated with bereavement, they are characterized by (a) marked functional impairment, (b) morbid preoccupation with worthlessness, (c) suicidal ideation, (d) psychotic symptoms, or (e) psychomotor retardation. At least one of a-e must be present.
   Not operationalized

NOTE: D23 was deleted from the instrument therefore the bereavement criteria could not be operationalized.
Youth Bipolar and Related Disorders

Youth Manic Episode (Old Version) – DSM-IV Criteria (DSM_MAN_OLD)

A. Part 1 AND Part 2

Part 1. A distinct period of abnormally and persistently elevated, expansive, or irritable mood.

\[ \text{YSC9\_SC24} = \text{Yes}(1) \text{ OR } \text{YSC11\_SC25a} = \text{Yes}(1). \]

Part 2. A distinct period of abnormally and persistently elevated, expansive, or irritable mood lasting at least 1 week (or any duration if hospitalization is necessary).

\[ (\text{YMA2b\_M3b} \geq 1 \text{ week}) \text{ OR } (\text{YMA2e\_M3d} \geq 1 \text{ week}) \text{ OR } (\text{YMA6b\_M6b} \geq 1 \text{ week}) \text{ OR } (\text{YMA6e\_M6d} \geq 1 \text{ week}). \]

Note: M20, M22, M48 from NCSR are deleted.

B. During the mood disturbance, three (or more) of the following symptoms have persisted (four if the mood is only irritable) and have been present to a significant degree:

Mood is only irritable: YSC11\_SC25a is Yes(1) AND (YSC9\_SC24 is NOT Yes(1))

1. inflated self-esteem or grandiosity

\[ \text{YMA7n\_M7n} = \text{Yes}(1) \text{ OR } \text{YMA7o\_M7o} = \text{Yes}(1). \]

2. decreased need for sleep (e.g., feels rested after only 3 hours of sleep)

\[ \text{YMA7j\_M7j} = \text{Yes}(1). \]

3. more talkative than usual or pressure to keep talking

\[ \text{YMA7f\_M7f} = \text{Yes}(1). \]

4. flight of ideas or subjective experience that thoughts are racing

\[ \text{YMA7i\_M7i} = \text{Yes}(1). \]

5. distractibility (i.e., attention too easily drawn to unimportant or irrelevant external stimuli)

\[ \text{YMA7g\_M7g} = \text{Yes}(1) \text{ OR } \text{YMA7h\_M7h} = \text{Yes}(1). \]

6. increase in goal-oriented activity (either socially, at work or school, or sexually) or psychomotor agitation.

\[ \text{YMA7a\_M7a} = \text{Yes}(1) \text{ OR } \text{YMA7b\_M7b} = \text{Yes}(1) \text{ OR } \text{YMA7c\_M7c} = \text{Yes}(1) \text{ OR } \text{YMA7e\_M7e} = \text{Yes}(1). \]

7. excessive involvement in pleasurable activities that have a high potential for painful consequences (e.g., engaging in unrestrained buying sprees, sexual indiscretions, or foolish business investments)

\[ \text{YMA7k\_M7k} = \text{Yes}(1) \text{ OR } \text{YMA7l\_M7l} = \text{Yes}(1) \text{ OR } \text{YMA7m\_M7m} = \text{Yes}(1). \]
Youth Manic Episode (Old Version) – DSM-IV Criteria (DSM_MAN_OLD)

C. The symptoms do not meet criteria for a Mixed Episode

   Not Operationalized

D. Part 1 OR Part 2 OR Part 3

Part 1. The mood disturbance is sufficiently severe to cause marked impairment in occupational functioning or in usual social activities or relationships with others.

   YMA9_M9 is (4,5).

   Note: M9a, M27a-d, M29, M33 from NCSR are deleted.

Part 2. The mood disturbance is sufficiently severe to necessitate hospitalization to prevent harm to self.

   Note M48 from NCSR is deleted, criteria not operationalized.

Part 3. There are psychotic features

   YMA7o_M7o is Yes(1).

E. The symptoms are not due to the direct physiological effects of a substance (e.g., a drug of abuse, a medication, or other treatment) or a general medical condition (e.g. hyperthyroidism)

   Note M10a, M10b from NCSR are deleted, criteria not operationalized.

Bipolar I Old (F_MH_BIPOLARI_OLD)

   MH_MAN_OLD is Yes(1).
Youth Hypomanic Episode (Old version) – DSM-IV Criteria(MH_HYP_OLD)

A. Part 1 AND Part 2

Part 1. A distinct period of abnormally and persistently elevated, expansive, or irritable mood.

\[ \text{YSC9\_SC24 is Yes(1) OR YSC11\_SC25a is Yes(1).} \]

Part 2. A distinct period of abnormally and persistently elevated, expansive, or irritable mood lasting at least 4 days, that is clearly different from the usual nondepressed mood.

\[ \text{YSC9\_SC24 is Yes(1) OR (YMA2b\_M3b >= 4 days) OR (YMA2e\_M3d >= 4 days) OR (YMA6b\_M6b >= 4 days) OR YMA6e\_M6d >= 4 days).} \]

Note: M20, M22 from NCSR are deleted.

B. During the mood disturbance, three(or more) of the following symptoms have persisted(four if the mood is only irritable) and have been present to a significant degree:

Mood is only irritable: \( \text{YSC11\_SC25a is Yes(1) and (YSC9\_SC24 is NOT Yes(1))} \)

1. inflated self-esteem or grandiosity

\[ \text{YMA7n\_M7n is Yes(1) OR YMA7o\_M7o is Yes(1).} \]

2. decreased need for sleep(e.g., feels rested after only 3 hours of sleep)

\[ \text{YMA7j\_M7j is Yes(1).} \]

3. more talkative than usual or pressure to keep talking

\[ \text{YMA7f\_M7f is Yes(1).} \]

4. flight of ideas or subjective experience that thoughts are racing

\[ \text{YMA7i\_M7i is Yes(1).} \]

5. distractibility (i.e., attention too easily drawn to unimportant or irrelevant external stimuli)

\[ \text{YMA7g\_M7g is Yes(1) OR YMA7h\_M7h is Yes(1).} \]

6. increase in goal-oriented activity(either socially, at work or school, or sexually) or psychomotor agitation.

\[ \text{YMA7a\_M7a is Yes(1) OR YMA7b\_M7b is Yes(1) OR YMA7c\_M7c is Yes(1) OR YMA7e\_M7e is Yes(1).} \]

7. excessive involvement in pleasurable activities that have a high potential for painful consequences(e.g., engaging in unrestrained buying sprees, sexual indiscretions, or foolish business investments)

\[ \text{YMA7k\_M7k is Yes(1) OR YMA7l\_M7l is Yes(1) OR YMA7m\_M7m is Yes(1).} \]

C. The episode is associated with an unequivocal change in functioning that is uncharacteristic of the person when not symptomatic.

\[ \text{YMA9\_M9 is (3,4,5).} \]

Note: M9a, M27a-d, M29, M33 from NCSR are deleted.

D. The disturbance in mood and the change in functioning are observable by others.

Not Operationalized
Youth Hypomanic Episode (Old version) – DSM-IV Criteria(MH_HYP_OLD)


Note: By strict DSM criteria, those people who meet all criteria for mania but have a duration of 4 to 6 days without hospitalization are excluded from a diagnosis of hypomania. (See mania criterion A,D and hypomania criterion E). We have defined these people as meeting hypomania. This is implemented by suppressing Criterion E for those with a duration of 4 to 6 days and without hospitalization.

Part 1. The mood disturbance is not severe enough to cause marked impairment in occupational functioning or in usual social activities or relationships with others.

\[\text{NOT(YMA9\_M9 is (4,5)).}\]

Note: M9a, M27a-d, M29, M33 from NCSR are deleted.

Part 2. The mood disturbance is not severe enough to necessitate hospitalization to prevent harm to self.

Note M48 from NCSR is deleted, criteria not operationalized.

Part 3. There are no psychotic features

\[\text{YMA7o\_M7o is No(5).}\]

F. The symptoms are not due to the direct physiological effects of a substance(e.g., a drug of abuse, a medication, or other treatment) or a general medical condition (e.g. hyperthyroidism)

Note M10a, M10b from NCSR are deleted, criteria not operationalized.

Youth Bipolar II Old(F_MH_BIPOLARII_OLD)

A. Presence (or history) of one or more Major Depressive Episodes

\[\text{f\_mh\_mde\_evr\_ad is Yes(1)}\]

B. Presence (or history) of at least one Hypomanic Episode

\[\text{mh\_hyp\_old is Yes(1)}\]

C. There has never been a Manic Episode or Mixed Episode

\[\text{mh\_man\_old is NOT Yes(1)}\]

D. The symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.

\[\text{YMA9\_M9 is (3,4,5).}\]

Note: M9a, M27a-d, M29, M33 from NCSR are deleted.
Youth (Bipolar I/II/Sub), Mania, Hypomania

Bipolar I

mh_man_old is Yes (1) AND at least 6 symptoms in the YMA7_M7 series (MH_MAN_OLD Criteria B1-B7) AND at least two of the following symptoms: YMA7b_M7b, YMA7c_M7c, YMA7k_M7k, YMA7l_M7l, YMA7o_M7o is 1 (yes).

Bipolar II

NOT Bipolar I AND

(f_mh_bipolar I old is Yes (1) AND f_mh_dep_evr_ad = 1 AND YMA1_M1 = 1 AND YMA7i_M7i = 1) *** these are the people who meet criteria for our old bipolar I definition (mania) but no longer meet criteria with the new definition, and have a major depressive episode and euphoria and racing thoughts ***

OR

(f_mh_bipolarII_old is Yes (1) AND
(YMA3b_M3b >= 14 days OR YMA3d_M3d >= 14 days OR YMA6b_M6b >= 14 days OR YMA6e_M6d >= 14 days) AND
at least 2 of the following symptoms (YMA7b_M7b, YMA7c_M7c, YMA7k_M7k, YMA7l_M7l, YMA7o_M7o)

Note: M20, M22 from NCSR are deleted.

***This is our old definition of bipolar II (in blue text) tightened up to include a duration of at least 14 days and at least 2 of the "super" symptoms in terms of concordance

Bipolar Sub

*** anyone left with old mania/hypomania who did not meet criteria for bipolar I and bipolar II above***

Not Bipolar I or Bipolar II as defined above AND (mh_man_old is Yes(1) OR mh_hyp_old is Yes(1)).

Mania(dsm_man)

Bipolar I is Yes(1).

Hypomania(dsm_hyp)

Bipolar II is Yes(1) OR (Bipolar Sub is Yes(1) AND mh_hyp_old is Yes(1)).

Sub-Hypomania(dsm_hypsub)

Bipolar Sub is Yes(1) AND (f_mh_bipolarIII_Old is Yes(1) OR mh_hyp_old is Yes(1)).

Youth Major Depressive Disorder with hierarchy

Note: Frequency specification (single episode/recurrent) not operationalized.

A. Presence of a Major Depressive Episode.

Major Depressive Episode is Yes(1)

B. The Major Depressive Episode is not better accounted for by Schizoaffective Disorder and is not superimposed on Schizophrenia, Schizophrenia-form Disorder, Delusional Disorder, or Psychotic Disorder Not Otherwise specified.

Not Operationalized

C. There has never been a Manic Episode, a Mixed Episode, or a Hypomaniac Episode. Note: This exclusion does not apply if all of the manic-like, mixed-like, or hypomaniac-like episodes are substance or treatment induced or are due to the direct physiological effects of a general medical condition.

Note: Mixed Episode not operationalized.

NOT(Mania OR Hypomania)
Youth Generalized Anxiety Disorder (GAD)

A. Part 1 AND Part 2 AND Part 3

Part 1. Excessive anxiety and worry (apprehensive expectation)

YSC12.SC26 is Yes(1) OR YSC13.SC26a is Yes(1) OR YSC14.SC26b is Yes(1).

Part 2. Anxiety occurring more days than not for at least 6 months

YGA5.G5 is at least 6 months.

Note G30, G31 from the NCSR are deleted.

Part 3. Anxiety about a number of events or activities (such as work or school performance).

At least 2 worries from YGA1.G1._S series.

B. The person finds it difficult to control the worry.

YGA3.G4 is (1,2).

C. The anxiety and worry are associated with one (or more) of the following six symptoms (with at least some symptoms present for more days than not for the past 6 months) (1. restlessness or feeling keyed up or edge, 2. being easily fatigued, 3. difficulty concentrating or mind going blank, 4. irritability, 5. muscle tension, 6. sleep disturbance.)

Note: “at least some symptoms present for more days than not” is not operationalized.

Note: Adolescent 1 symptom requirement was used.

At least 3 of (YGA7a.G9a, YGA7b.G9b, YGA7c.G9c, YGA7d.G9d, YGA7e.G9e, YGA7f.G9f) are Yes(1).

The focus of the anxiety and worry is not confined to features of an Axis 1 disorder.

At least 1 value of 1-10, 13, 20-32 in YGA1.G1._S series.

Note: DSM IV states “the anxiety and worry should not occur exclusively during PTSD”. This part of criteria D is not operationalized.

Part 1 OR Part 2

Part 1. The anxiety, worry, or physical symptoms cause clinically significant distress.

YGA4.G4a is(1,2) OR YGA9.G15 is (3,4,5).

Part 2. The anxiety, worry, or physical symptoms cause clinically significant impairment in social, occupational, or other important areas of functioning.

YGA10.G17 is (3,4,5).

F. Part 1 AND Part 2

Part 1. The disturbance is not due to the direct physiological effects of a substance (e.g. a drug of abuse, a medication) or due to a general medical condition (e.g., hyperthyroidism).

Note: G18a, G18b from NCSR are deleted, criteria not operationalized.
Youth GAD - DSM-IV Criteria

F.

Part 2. The disturbance does not occur exclusively during a Mood Disorder, a Psychotic Disorder, or a Pervasive Developmental Disorder.

Note: Psychotic Disorder and Pervasive Developmental Disorder hierarchies are not operationalized.

(Major Depression = No(5) AND Minor Depression = No(5) AND Mania = No(5))

OR

((Major Depression = Yes(1) OR Minor Depression = Yes(1) OR Mania = Yes(1)) AND
 ((GAD onset < Mood onset) OR
  (GAD recency > Mood recency)) OR

Measuring DSM-IV Mental Disorders in the MTO Final Evaluation, Page 31
Youth Intermittent Explosive Disorder (IED)

A. Several discrete episodes of failure to resist aggressive impulses that result in serious assaultive acts or destruction of property

\[ 3 \leq \text{YIE1}_{\text{IED3}} \leq 9997 \text{ AND YIE4}_{\text{IED6}} \text{ is Yes(1)}. \]

B. The degree of aggressiveness expressed during the episodes is grossly out of proportion to any precipitating psychosocial Stressors

\[ \text{YIE2}_{\text{IED5}} \text{ is Yes(1)} \text{ OR YIE3a}_{\text{IED5a}} \text{ is Yes(1)} \text{ OR YIE3b}_{\text{IED5b}} \text{ is Yes(1)}. \]

C. Part 1 AND Part 2

Part 1. The aggressive episodes are not better accounted for by another mental disorder

Part a and part b and part c and part d

Part a. IF IED9a = 5 and LT DSM-IV alcohol or drug abuse or dependence is yes and the ages of onset and recency of IED fall within the ages of onset and recency of alc-drug disorders, then R should be coded as not having IED with diagnostic hierarchy rules. This excludes cases due to drinking and drugs.

Part b. IF IED10b = 5, then R should be coded as not having IED with diagnostic hierarchy rules. This excludes cases due to physical illness or medication for physical illness.

\[ \text{Not(YIE6a}_{\text{IED10b}} = 5) \]

Part c. IF IED11a = 5 and lifetime MDE is yes and AOO and recency of IED falls within the ages of onset and recency of MDE, then R should be coded as not having IED with diagnostic hierarchy rules. This excludes cases due to MDE.

\[ \text{NOT(YIE7a}_{\text{IED11a}} = 5 \text{ and f_mh}_\text{dep}_\text{evr}_\text{ad} = 1 \text{ and} \]
\[ (\text{f_mh}_\text{dep}_\text{aoon}_\text{ad} \leq \text{ied}_\text{on} \leq \text{f_mh}_\text{dep}_\text{rec}_\text{ad}) \text{ AND} \]
\[ (\text{f_mh}_\text{dep}_\text{aoon}_\text{ad} \leq \text{ied}_\text{on} \leq \text{f_mh}_\text{dep}_\text{rec}_\text{ad}) \text{ AND} \]
\[ (\text{f_mh}_\text{dep}_\text{aoon}_\text{ad} \leq \text{ied}_\text{on} \leq \text{f_mh}_\text{dep}_\text{rec}_\text{ad})) \]

Part d. The above three were the only ones explicitly asked about in the IED section. We should have also included a question about mania, but we did not. To make up for this, we want to impose the following additional requirement. We want to recode a person as not having IED with hierarchy if he meets all of the following requirements:

If (i) lifetime manic episode or hypomanic episode are yes

\[ \text{NOT(f_mh}_\text{man}_\text{evr}_\text{ad}= 1 \text{ or f_mh}_\text{hyp}_\text{evr}_\text{ad} = 1) \]

(ii) the AOO and recency of IED fall within the ages of onset and recency of manic or hypomanic episode

\[ \text{NOT (min(f_mh}_\text{man}_\text{aoon}_\text{ad},f_mh}_\text{hyp}_\text{aoon}_\text{ad}) \leq \text{ied}_\text{on} \leq \max(f_mh}_\text{man}_\text{rec}_\text{ad},f_mh}_\text{hyp}_\text{rec}_\text{ad}) \text{ AND} \]
\[ \text{min}(f_mh}_\text{man}_\text{aoon}_\text{ad},f_mh}_\text{hyp}_\text{aoon}_\text{ad}) \leq \text{ied}_\text{rec} \leq \max(f_mh}_\text{man}_\text{rec}_\text{ad},f_mh}_\text{hyp}_\text{rec}_\text{ad})) \]

(iii) the number of years in M23 is greater than or equal to the number of years in IED19 (i.e., lifetime # of years with manic or hypomanic episodes is GTE lifetime # of years with years with IED). Note: that in cases where R says DK/REF for either M23 or IED19, we want to assume that years with mania is GTE years with IED).

Note: M23 removed from NCSR questionnaire, criteria not operationalized.

Criterion C Part 2. The aggressive episodes are not due to the direct physiological effects of a substance or a general medical condition.

\[ (\text{YIE5}_{\text{IED9}} \text{ is No(5) or YIE5a}_{\text{IED9a}} \text{ is Yes(1)) AND (YIE6}_{\text{IED10}} \text{ is No(5) or YIE6a}_{\text{IED10b}} \text{ is Yes(1))} \]

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Youth Panic Attack

A. A discrete period of intense fear or discomfort.
   YSC1_SC20 is Yes(1) OR YSC2_SC20a is Yes(1).

B. Four or more of the following symptoms occur:
   1. palpitations, pounding heart, or accelerated heart rate.
      YPD1a_PD1a is Yes(1).
   2. sweating.
      YPD1e_PD1e is Yes(1).
   3. trembling or shaking.
      YPD1f_PD1f is Yes(1).
   4. sensation of shortness of breath or smothering.
      YPD1b_PD1b is Yes(1).
   5. feeling of choking.
      YPD1h_PD1h is Yes(1).
   6. chest pain or discomfort.
      YPD1i_PD1i is Yes(1).
   7. nausea or abdominal distress.
      YPD1c_PD1c is Yes(1).
   8. feeling dizzy, unsteady, lightheaded, or faint.
      YPD1d_PD1d is Yes(1) OR YPD1m_PD1m is Yes(1).
   9. derealization (feelings of unreality) or depersonalization (being detached from oneself).
      YPD1k_PD1k is Yes(1) OR YPD1I_PD1I is Yes(1).
  10. fear of losing control or going crazy.
      YPD1j_PD1j is Yes(1).
  11. fear of dying.
      YPD1n_PD1n is Yes(1).
  12. paresthesias (numbing or tingling sensations).
      YPD1p_PD1p is Yes(1).
  13. chills or hot flushes.
      YPD1o_PD1o is Yes(1).

  3 Symptoms and HPD1g_PD1g is Yes(1) added to meet Criteria

C. The symptoms developed abruptly and reached a peak within 10 minutes.
   YPD2_PD3 is (1,3).
**Youth Panic Disorder**


(Panic Attack is Yes(1)) AND (1 < YPD3_PD4 < 998) AND (4 <= YPD4a_PD17a < 998).

Part 2. At least one of the attacks has been followed by 1 month (or more) of one (or more) of the following:

1. persistent concern about having additional attacks.
   
   YPD8a_PD13a is Yes(1).

2. worry about the implications of the attack or its consequences (e.g., losing control, having a heart attack, “going crazy”)
   
   YPD8b_PD13b is Yes(1).

3. a significant change in behavior related to the attacks.
   
   YPD8c_PD13c is Yes(1) OR YPD8d_PD13d is Yes(1).

   Note: PD42 from the NCSR is deleted.

B. The presence of or the absence of Agoraphobia

   Not Operationalized

C. The Panic Attacks are not due to the direct physiological effects of a substance (e.g., a drug of abuse, a medication) or a general medical condition (e.g., hyperthyroidism).

   PD25a, PD25b from the NCSR are deleted.

D. The Panic Attacks are not better accounted for by another mental disorder, such as Social Phobia (e.g., occurring on exposure to feared social situations), Specific Phobia (e.g., on exposure to a specific phobic situation), Obsessive Compulsive Disorder (e.g., on exposure to dirt in someone with an obsession about contamination), Posttraumatic Stress Disorder (e.g., in response to stimuli associated with a severe stressor), or Separation Anxiety Disorder (e.g., in response to being away from home or close relatives).

   Note: This criterion is operationalized by focusing in criterion A on “out of the blue” attacks. By excluding all panic attacks triggered by fear or real danger we have thereby excluded all attacks associated with Social Phobia, Specific Phobia, Obsessive Compulsive Disorder, Posttraumatic Stress Disorder, Separation Anxiety Disorder.
Youth Post-Traumatic Stress Disorder (PTSD)

A. Worst Event: (Part 1 AND Part 2 Worst Event)
   Random Event: (Part 1 AND Part 2 Worst Event)

   Part 1. The person has been exposed to a traumatic event in which the person experienced, witnessed, or was confronted with an event or events that involved actual or threatened death or serious injury, or a threat to the physical integrity of self or others.

   Combat Experience/Relief Worker in War Zone/Civilian in War Zone/Civilian in region of Terror/Refugee:
   
   PT29, PT30, PT31, PT32, PT33 from NCSR was deleted, criteria not operationalized.

   Kidnapped:
   
   PT34 from NCSR was deleted, criteria not operationalized.

   Toxic Exposure:
   
   PT35 from NCSR was deleted, criteria not operationalized.

   Automobile Accident:
   
   PT36 from NCSR was deleted, criteria not operationalized.

   Other Life Threatening Accident:
   
   PT37 from NCSR was deleted, criteria not operationalized.

   Natural Disaster:
   
   PT38 from NCSR was deleted, criteria not operationalized.

   Man-made Disaster:
   
   PT39 from NCSR was deleted, criteria not operationalized.

   Life Threatening Illness:
   
   PT40 from NCSR was deleted, criteria not operationalized.

   Beaten up as Child by Caregiver:
   
   YCV1_PT13 is Yes(1).

   Beaten by Spouse or Romantic Partner:
   
   YCV2_PT14 is Yes(1).

   Beaten by Other:
   
   YCV3_PT15 is Yes(1).

   Raped:
   
   YCV5_PT17 is Yes(1).

   Sexually Assaulted:
   
   YCV6_PT18 is Yes(1).
Youth Post-Traumatic Stress Disorder

A. Part 1. (continued)

Mugged or Threatened with a Weapon:

YCV4_PT16 is Yes(1).

Stalked:

PT47 from NCSR was deleted, criteria not operationalized.

Unexpected Death of a Loved One:

YCV7_PT20 is Yes(1).

Child with Serious Illness:

PT49 from NCSR was deleted, criteria not operationalized.

Traumatic Event to Loved One:

YCV8_PT22 is Yes(1).

Witnessed physical fights at home:

YCV9_PT22_1 is Yes(1).

Witnessed Death or Dead Body, or Saw Someone Seriously Hurt:

YCV10_PT23 is Yes(1).

Accidentally Caused Serious Injury or Death

PT52 from NCSR was deleted, criteria not operationalized.

Purposely Injured, Tortured, or Killed Someone.

PT53 from NCSR was deleted, criteria not operationalized.

Saw Atrocities:

PT54 from NCSR was deleted, criteria not operationalized.

Some Other Event:

YCV11_PT27 is Yes(1).

Private Event:

PT57 from NCSR was deleted, criteria not operationalized.

Part 2. The person has been exposed to a traumatic event in which the person’s response involved intense fear, helplessness, or horror.

PT67, PT67a-c, PT207, PT207a-c from NCSR were deleted, criteria not operationalized.
Youth Post-Traumatic Stress Disorder

B. Worst Event: (Part 1 Worst Event AND Part 2 Worst Event)
   Random Event: (Part 1 Random Event AND Part 2 Random Event)

Part 1. The traumatic event is experienced in one (or more) of the following ways:

1. recurrent and intrusive distressing recollections of the event, including images, thoughts, or perceptions.
   PT86, PT222 from NCSR were deleted, criteria not operationalized.

2. recurrent distressing dreams of the event.
   PT87, PT223 from NCSR were deleted, criteria not operationalized.

3. acting or feeling as if the traumatic event were recurring (includes a sense of reliving the experience, illusions, hallucinations, and dissociative flashback episodes, including those that occur on awakening or when intoxicated).
   PT88, PT224 from NCSR were deleted, criteria not operationalized.

4. intense psychological distress at exposure to internal or external cues that symbolize or resemble an aspect of the traumatic event.
   PT89, PT225 from NCSR were deleted, criteria not operationalized.

5. physiological reactivity on exposure to internal or external cues that symbolize or resemble an aspect of the traumatic event.
   PT90, PT226 from NCSR were deleted, criteria not operationalized.

Part 2. The traumatic event is persistently reexperienced.
   PT113, PT230 from NCSR were deleted, criteria not operationalized.


Part 1. Avoidance of stimuli associated with the trauma and numbing of general responsiveness (not present before the trauma), as indicated by three(or more) of the following:

1. efforts to avoid thoughts, feelings, or conversations associated with the trauma
   PT68, PT208 from NCSR were deleted, criteria not operationalized.

2. efforts to avoid activities, places, or people that arouse recollections of the trauma
   YCV21_PT275 is Yes(1) OR YCV30_PT275 is Yes(1).

3. inability to recall an important aspect of the trauma
   PT70, PT210 from NCSR were deleted, criteria not operationalized.

4. markedly diminished interest or participation in significant activities
   YCV15_PT269 is Yes(1) OR YCV24_PT269 is Yes(1).

5. feeling of detachment or estrangement from others
   YCV16_PT270 is Yes(1) OR YCV25_PT270 is Yes(1).
Youth Post-Traumatic Stress Disorder

C. Part 1. (continued)
   6. restricted range of affect (e.g., unable to have loving feelings)
      YCV17_PT271 is Yes(1) OR YCV26_PT271 is Yes(1).
   7. sense of a foreshortened future (e.g., does not expect to have a career, marriage, children, or a normal life span)
      YCV18_PT272 is Yes(1) OR YCV27_PT272 is Yes(1).

Part 2. Persistence avoidance of stimuli associated with the trauma and numbing of general responsiveness (not present before the trauma).

   PT113, PT219 from NCSR were deleted, criteria not operationalized.


   Part 1. Symptoms of increased arousal (not present before the trauma), as indicated by two (or more) of the following:
   1. difficulty falling or staying asleep.
      YCV19_PT273 is Yes(1) OR YCV28_PT273 is Yes(1).
   2. irritability or outbursts of anger.
      PT103, PT234 from NCSR were deleted, criteria not operationalized.
   3. difficulty concentrating.
      PT104, PT235 from NCSR were deleted, criteria not operationalized.
   4. hypervigilance.
      PT105, PT236 from NCSR were deleted, criteria not operationalized.
   5. exaggerated startle response.
      YCV20_PT274 is Yes(1) OR YCV29_PT274 is Yes(1).

   Part 2. Persistent symptoms of increased arousal (not present before the trauma).

   PT113, PT241 from NCSR were deleted, criteria not operationalized.

E. Duration of the disturbance (symptoms in Criteria B, C, and D) is more than 1 month.

   PT110, PT218, PT229, PT240 from NCSR were deleted, criteria not operationalized.

F. The disturbance causes clinically significant distress or impairment in social, occupational, or other important areas of functioning.

   PT114, PT115, PT220, PT221, PT231, PT232, PT242, PT243, PT246, PT278 from NCSR were deleted, criteria not operationalized.

We used the above algorithm to create an upper bound for the diagnosis. Because only criteria A1, C1, and D were assessed in the MTO, we used the NCSR data to generate a predicted probability of meeting the disorder among those who meet A, C, and D in the MTO. The predicted probability was used to generate a yes/no dx for each respondent who meet A, C, and D in the MTO.
Youth Oppositional Defiant Disorder (ODD)

A. A pattern of negativistic, hostile, and defiant behavior lasting at least 6 months, during which four (or more) of the following are present:

1. often loses temper.
   
   YOD1f is Yes(1) OR YOD2a_OD1a is Yes(1).

2. often argues with adults.
   
   YOD2b_OD1b is Yes(1).

3. often actively defies or refuses to comply with adult’s requests or rules.
   
   YOD1d is Yes(1) OR YOD1i is Yes(1) OR YOD2c_OD1c is Yes(1) OR YOD2d_OD1d is Yes(1).

4. often deliberately annoys people.
   
   YOD2g_OD1g is Yes(1).

5. often blames others for his or her mistakes or misbehavior.
   
   YOD2h_OD1h is Yes(1).

6. is often touchy or easily annoyed by others.
   
   YOD2j_OD1j is Yes(1) OR YOD2k_OD1k is Yes(1).

7. is often angry and resentful.
   
   YOD2e_OD1e is Yes(1).

8. is often spiteful and vindictive.
   
   YOD2i_OD1i is Yes(1).

   If 4 OD1 series questions are Yes, rest of OD1 series are skipped. If YOD2d1_OD1d1_chkpt = 1 OR YOD2e1_OD1e1_chkpt = 1 OR YOD2f1_OD1f1_chkpt = 1 OR YOD2g1_OD1g1_chkpt = 1 OR YOD2h1_OD1h1_chkpt = 1 OR YOD2i1_OD1i1_chkpt = 1 OR YOD2j1_OD1j1_chkpt = 1 then Criteria is met.

B. The disturbance in behavior causes clinically significant impairment in social, academic or occupational functioning.
   
   YOD5_OD6 is (3,4,5).

   Note: OD8 series, OD10, OD12 from NCSR are deleted.

C. The behaviors do not occur exclusively during the course of a Psychotic or Mood Disorder.
   
   Note: Psychotic Disorder not operationalized
   
   (Major Depression = No(5) AND Minor Depression = No(5) AND Mania = No(5)) OR
   ((Major Depression = Yes(1) OR Minor Depression = Yes(1) OR Mania = Yes(1)) AND
   ((Oppositional Defiance onset < Mood onset) OR
   ((Oppositional Defiance recency > Mood recency)))

   Note: Mood onset = earliest onset of mood disorder
   Mood recency = most recent mood disorder

D. Criteria are not met for Conduct Disorder, and if the individual is age 18 years or older, criteria are not met for Antisocial Personality Disorder.

   Note: Conduct Disorder not in MTO, criteria not operationalized.