

**The University of North Carolina at Chapel Hill, Carolina Population Center
National Longitudinal Study of Adolescent Health
Restricted Use Data Contract**

General Information and Checklists

***Please read the entire package and return this completed checklist
to ensure that you have included all of the required contract forms and supporting documents.***

Checklist for contract forms

- Investigator Information
- Agreement for the Use of Restricted-Use Data
- Investigator and Institutional Signatures Page
- Attachment A: Sensitive Data Security Plan
- Attachment B: Data File Order Form
 - Include explanations for requested constructed datasets
- Attachment C: Supplemental Agreement with Research Staff
signed by Investigator and each Research Staff person
- Attachment D: Security Pledge(s) – one for each Research Staff person, signed
- Attachment E: List of Funding Agencies
- Attachment F: Description of Deductive Disclosure Risk

Checklist for supporting documents

- IRB approval of Sensitive Data Security Plan and the research project
- Nonrefundable processing fee (\$850) payable by check to “The University of North Carolina at Chapel Hill” and sent to the address below

A FULLY EXECUTED CONTRACT WILL BE RETURNED TO YOU UPON APPROVAL.

Please allow a minimum of four weeks for processing.

Send completed package to:

Add Health
The University of North Carolina at Chapel Hill
Carolina Population Center
206 West Franklin Street
Chapel Hill, NC 27516-2524

Contact:

Kayla Sauls
Email: addhealth_contracts@unc.edu

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Investigator Information

DATE	
NAME OF INVESTIGATOR	
INVESTIGATOR'S DEGREE	
INVESTIGATOR'S POSITION	
INVESTIGATOR'S INSTITUTION	
DEPARTMENT	
STREET ADDRESS	Note: <i>Because data CDs will be shipped by 2nd-day traceable delivery, we cannot accept P.O. BOXES.</i>
CITY/STATE/ZIP CODE	
TELEPHONE	
FAX	
EMAIL	
TITLE OF RESEARCH PROJECT	

**The University of North Carolina at Chapel Hill, Carolina Population Center
National Longitudinal Study of Adolescent Health
Restricted Use Data Contract**

Agreement for the Use of Restricted-Use Data

I. Definitions

- A. "The National Longitudinal Study of Adolescent Health" (hereinafter referred to as "Add Health") is the program project undertaken by the Carolina Population Center of The University of North Carolina at Chapel Hill (hereafter referred to as UNC-Chapel Hill) under Grant No. P01-HD31921 from the Eunice Kennedy Shriver National Institute of Child Health and Human Development.
- B. "Investigator" is the person primarily responsible for supervision of the research project, security of the data, and use of sensitive data obtained through this Agreement.
- C. "Research Staff" are all persons, excluding Investigator, who will have access to sensitive data obtained through this Agreement.
- D. "Institution" is the university or research institution that employs Investigator and that is the signatory to this Agreement on behalf of Investigator.
- E. "Representative of Institution" is a person authorized to enter into contractual agreements on behalf of Institution.
- F. "Sensitive Data" includes any data from Add Health that might compromise the anonymity or privacy of respondents to that study. Because of the school-based study design, Add Health respondents (adolescents, parents, and schools) are at higher risk of deductive disclosure than randomly sampled individuals. Therefore, all data collected from Add Health are considered to be sensitive.
- G. "Data File" includes any form of data, whether on paper or electronic media.
- H. "Funding Agency" is a federal office or institute that provided funding for Add Health. Funding agencies are only the offices or institutes providing the funding; other divisions or institutes within the larger organization are not considered funding agencies.
- I. "Contract Period" is the three (3)-year period that begins and ends on the dates specified on page 11 .
- J. "Processing Fee" is a nonrefundable payment of \$850 that covers the expenses of producing and shipping Data Files and codebooks, of consulting, and of administering this Agreement.

II. Requirements of Investigators

Investigators must meet the following criteria:

- A. Have a PhD or other terminal degree; and
- B. Hold a faculty appointment or research position at Institution

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III. Requirements of Institution

Institution must meet the following criteria:

- A. Be an institution of higher education, a research organization, or a government agency
- B. Have a demonstrated record of using sensitive data according to commonly accepted standards of research ethics

IV. Obligations of Add Health

In consideration of the promises made in Section V of this Agreement and of receipt of the monies noted in Section V. I., Add Health agrees to the following, once a copy of the completed contract has been received and Attachment A has been approved:

- A. To submit for review by the appropriate officials of UNC-Chapel Hill the original of this Agreement.
- B. To return one fully signed original to Investigator by first-class mail.
- C. To assign the effective dates of the three (3)-year Contract Period on the Institutional Signatures page. The initiation date will be within 15 working days of receipt of the signed originals from appropriate UNC-Chapel Hill officials.
- D. To provide the Data Files requested by Investigator in the Data File Order within a reasonable time frame following execution of this Agreement by appropriate officials of UNC-Chapel Hill and to send the requested Data Files to Investigator on a CD-ROM by second-day trackable delivery. All Data Files will be compressed and encrypted.
- E. To provide codebooks which contain the origins, form, and general content of the Data Files sent to Investigator within the same time frame and manner as specified in paragraph D regarding the Data Files.
- F. To provide one (1) hour of consultation to Investigator and/or Research Staff regarding the origins, form, and general content of the Data Files, and regarding required and preferred techniques for data management of those Data Files. Further consultation is available for an additional fee.

V. Obligations of the Investigator, Research Staff, and Institution

Data provided under this Agreement shall be held by the Investigator, Research Staff, and Institution in strictest confidence and can be disclosed only in compliance with the terms of this Agreement.

In consideration of the promises contained in Section IV of this agreement, and for use of Data Files from Add Health, the Investigator, Research Staff, and Institution agree:

- A. That the Data Files will be used solely for statistical analyses: that no attempt will be made to identify specific individuals, families, households, schools, institutions, or geographic locations not provided by Add Health; and that no list of Sensitive Data at the individual or family level will be published or otherwise distributed.

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- B. That if the identity of any person, family, household, school, institution or geographic location should be discovered inadvertently, then:
1. No use will be made of this knowledge;
 2. Add Health will be advised of the incident within one (1) business day of Investigator's, Research Staff's, or Institution's discovery of the incident;
 3. The information that would identify the person, family, household, school, or institution will be safeguarded or destroyed as requested by Add Health and a written certification of destruction provided to Add Health; and
 4. No one else will be informed of the discovered identity.
- C. To avoid inadvertent disclosure of persons, families, or households by using the following guidelines in the release of statistics derived from the Data Files.
1. In no table should all cases in any row or column be found in a single cell.
 2. In no case should the total for a row or column of a cross-tabulation be fewer than three (3).
 3. In no case should a cell frequency of a cross-tabulation be fewer than three (3) cases.
 4. In no case should a quantity figure be based on fewer than three (3) cases.
 5. Data released should never permit disclosure when used in combination with other known data.
- D. That no persons other than those identified in this Agreement, or in amendments subsequent to this agreement, as Investigator or Research Staff, be permitted access to the contents of Data Files or any files derived from sensitive Data Files.
1. That within one (1) business day of becoming aware of any unauthorized access, use, or disclosure of Sensitive Data, the unauthorized access, use, or disclosure of Sensitive Data will be reported in writing to Add Health.
- E. To comply fully with the Sensitive Data Security Plan, which is included as Attachment A to this Agreement. The Sensitive Data Security Plan expires at the end of the Contract Period.
- F. To respond fully and in writing within ten (10) working days after receipt of any inquiry from Add Health regarding compliance with this Agreement or the expected date of completion of work with the Sensitive Data and any data derived therefrom.
- G. To make available for inspection by Add Health, during business hours, the physical housing and handling of all Data Files and any other information, written or electronic, relating to this Agreement.

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- H. To supply Add Health with a copy of each of the following:
1. Investigator Information form
 2. Agreement for the Use of Sensitive Data, each with original Institutional Signatures page
 3. Sensitive Data Security Plan (Attachment A)
 4. Data File Order with specific files requested, and explanatory statements for constructed datasets (if requested) (Attachment B)
 5. Supplemental Agreement with Research Staff for the Use of Sensitive Data signed by each Research Staff person (Attachment C)
 6. Security Pledges for the Investigator and each Research Staff person (Attachment D)
 7. List of Funding Agencies (Attachment E)
 8. Description of Deductive Disclosure Risk (Attachment F)
 9. A copy of the document, originated by the Investigator and signed by Institution's Institutional Review Board (IRB), approving the research project AND the secure use, storage, and handling of the Add Health Data Files outlined in the Sensitive Data Security Plan.
- I. To provide to UNC-Chapel Hill a nonrefundable processing fee in the amount of \$850. Payment may be made by check, payable to "The University of North Carolina at Chapel Hill." The nonrefundable processing fee will be used to cover the expenses of producing and shipping Data Files and codebooks, of consulting, and of administering this Agreement.

An exemption to the nonrefundable processing fee may be made if the request for Data Files is from an Investigator at one of the Add Health funding agencies or institutes. To request a waiver of the nonrefundable processing fee, please include a letter from the head of the funding agency requesting that the fee be waived.

- J. To include in each written report or other publication based on analysis of Sensitive Data from Add Health, the following statement:

This research uses data from Add Health, a program project designed by J. Richard Udry, Peter S. Bearman, and Kathleen Mullan Harris, and funded by a grant P01-HD31921 from the Eunice Kennedy Shriver National Institute of Child Health and Human Development, with cooperative funding from 17 other agencies. Special acknowledgment is due Ronald R. Rindfuss and Barbara Entwisle for assistance in the original design. Persons interested in obtaining Data Files from Add Health should contact Add Health, The University of North Carolina at Chapel Hill, Carolina Population Center, 206 W. Franklin Street, Chapel Hill, NC 27516-2524 (addhealth_contracts@unc.edu). No direct support was received from grant P01-HD31921 for this analysis.

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**Agreement for the Use of Restricted-Use Data
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- K. That all journal articles based on analysis of Confidential Data from Add Health receive a PubMed Central reference number (PMCID). Journal articles must be submitted to PubMed Central to receive a PMCID. The method of PubMed Central submission and Investigator responsibility for submission depend on the journal and journal publisher.
1. Some journals automatically submit published articles to PubMed Central. For a list of journals that submit articles to PubMed Central please visit the NIH website:
http://publicaccess.nih.gov/submit_process_journals.htm
 2. Some journal publishers may submit the articles to PubMed Central automatically or upon request by the author. For a list of journal publishers that submit articles to PubMed Central please visit the NIH website: http://publicaccess.nih.gov/select_deposit_publishers.htm#b
 3. If neither the journal nor the journal publisher will submit the article to PubMed Central, the Investigator will be responsible to submit the final peer-reviewed manuscript to PubMed Central via the NIH Manuscript Submission System (NIHMS). For detailed instructions on the process of submitting a journal article to PubMed Central, please see the NIH website:
http://publicaccess.nih.gov/submit_process.htm
 4. If you have any problems with this process, please contact the NIHMS or PubMed help desk.
- L. To complete the following protocol upon separation from Institution or the expiration of Investigator's contract:
1. Destroy all Data Files at the originally approved site
 2. Submit a letter stating that all Add Health Data Files have been securely erased with the secure erasure program listed in the security plan for the originally approved site.
 3. Return all CDs containing Data Files, within thirty (30) days of the expiration of the Contract Period, as specified on the Institutional Signatures page, or to submit a renewal application.

Add Health shall be able to visit within a year of contract termination, to confirm the data have been destroyed. This obligation of destruction shall not apply to Investigator's scholarly work produced during the Contract Period that is based upon or that incorporates the Restricted-Use Data.

- M. To notify Add Health in the event Investigator plans to separate from Institution during the Contract Period. Such notification must be in writing and must be received by Add Health at least six (6) weeks prior to Investigator's last day of employment with Institution. Investigator's separation from Institution will terminate this Agreement. Investigator may, however, reapply to receive Data Files from Add Health in Investigator's capacity as an employee of his or her new institution. No fee will be charged for the administration of this process.

Concurrent with Investigator's notice to Add Health regarding a pending separation from Institution, Investigator must:

1. Return the Data File CDs to Add Health at the following address:

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Add Health
Carolina Population Center
206 W. Franklin St.
Chapel Hill, NC 27516-2524

2. Destroy all electronic and paper files at the originally approved site prior to the date of relocation and submit a letter stating that all Add Health files have been securely erased with the secure erasure program listed in the security plan for the originally approved site. This obligation of destruction shall not apply to Investigator's scholarly work produced during the Contract Period that is based upon or that incorporates the Sensitive Data.
- N. To obtain approval from Add Health prior to transferring this Agreement to another Investigator at the same Institution. No fee will be charged for the administration of this process. In order to obtain such approval, Investigator must:
1. Inform Add Health in writing six (6) weeks prior to the proposed date of transfer.
 2. Submit a complete copy of this Agreement in the name of the new Investigator signed by an official representative of Investigator's new institution.
 3. Maintain responsibility for the security of all Data File CDs until the transfer contract has been approved.
- O. To submit annual reports to Add Health on or before each anniversary of the initial date of the Contract Period. Such reports must include:
1. A copy of the annual IRB approval for the research project
 2. A list of public presentations at professional meetings using results based on the Data Files
 3. A list of papers accepted for publication using these Data Files, with complete citations
 4. A list of grants that have been awarded for use of the Add Health Data Files
 5. A list of graduate students using the Add Health Data Files for dissertations or theses, the titles of these papers, and the dates of completion
 6. A current data user roster including the names of all research staff member(s) who have access to Data Files and their relationship(s) to the project

Such reports shall be signed by Investigator. Add Health reserves the right to terminate this Agreement in the event that the reports are not timely submitted.

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- P. That Investigator and Institution hereby acknowledge that any breach of the confidentiality provisions herein will result in irreparable harm to The University of North Carolina at Chapel Hill that are not adequately compensable by money damages. Investigator, Research Staff, and Institution hereby agree to the imposition of injunctive relief in the event of breach, in addition to money damages. Should Investigator, Research Staff, or Institution commit a material breach of this agreement that is not cured within thirty (30) days after Investigator or Institution receives notice of such breach from Add Health, Add Health reserves the right to terminate the Agreement, in which case all electronic and paper files will be securely erased; a letter will be submitted by the Investigator, stating that all Add Health files have been securely erased with the secure erasure program listed in the security plan; and CDs containing Data Files are to be returned. Investigator, Research Staff, and Institution understand and agree that a violation of any of the terms and conditions of this Agreement may constitute a violation of state and federal statutes and may subject Investigator, Research Staff, and/or Institution to the criminal, civil, and administrative penalties associated with violations of those statutes, in addition to constituting a material breach of this Agreement with attendant legal liabilities.
- Q. That Investigator and Institution agree to indemnify, defend, and hold harmless The University of North Carolina at Chapel Hill, Add Health, and the sources of Sensitive Data from any or all claims and losses accruing to any person, organization, or other legal entity as a result of Investigator's, Research Staff's and/or Institution's acts, omissions, or breaches of this Agreement.
- R. That Institution shall ensure that Research Staff comply with the provisions of this Agreement.

VI. Certificate of Confidentiality

Research subjects who participated in Add Health are protected by a certificate of confidentiality issued by the Department of Health and Human Services in accordance with the provisions of section 301(d) of the Public Health Service Act (42 U.S.C. § 241(d)). Institution is considered to be a contractor or cooperating agency of UNC-Chapel Hill under the terms of the Confidentiality Certificate; as such, Institution, Investigator, and Research Staff are authorized to protect the privacy of the individuals who are the subjects of Add Health by withholding their identifying characteristics from all persons not connected with the conduct of the study. Identifying characteristics are all Add Health Data Files which are defined as sensitive under the terms of this contract.

VII. Incorporation by Reference

The parties agree that the following documents are incorporated into this Agreement by reference:

- A. A copy of the IRB approval of the research project, taking into special consideration deductive disclosure risks.
- B. The Sensitive Data Security Plan proposed by Investigator and approved by Add Health.
- C. The Department of Health and Human Services Confidentiality Certificate, a copy of which will be sent with the signed contract.

VIII. Attachments

- A. Sensitive Data Security Plan for the Use of Restricted-Use Data from the National Longitudinal Study of Adolescent Health

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- B. Data File Order for the Use of Sensitive Data from the National Longitudinal Study of Adolescent Health
- C. Supplemental Agreement with Research Staff for the Use of Sensitive Data from the National Longitudinal Study of Adolescent Health
- D. Security Pledge for the Use of Sensitive Data from the National Longitudinal Study of Adolescent Health
- E. List of Funding Agencies for the National Longitudinal Study of Adolescent Health
- F. Description of Deductive Disclosure Risk from the National Longitudinal Study of Adolescent Health

IX. Miscellaneous

- A. The laws of North Carolina shall govern the validity and interpretation of the provisions, terms and conditions of the Agreement. In the event the parties are unable to resolve any dispute relating to this agreement, all suits, actions, claims, and causes of action relating to this Agreement shall be brought in the courts of the State of North Carolina.
- B. All notices, contractual correspondence, and return of data under this Agreement on behalf of the Investigator shall be made in writing and delivered to the address below:
 - Add Health
 - The University of North Carolina at Chapel Hill
 - Carolina Population Center
 - 206 W. Franklin St.
 - Chapel Hill, NC 27516-2524
- C. Provisions of Data Files, all notices, and contractual correspondence under this Agreement on behalf of Add Health shall be made in writing and delivered to Investigator at the address listed on the Institutional Signatures page.
- D. This Agreement shall be effective for the dates indicated on the Institutional Signatures page.
- E. The respective rights and obligations of Add Health and Investigator, Research Staff, and Institution pursuant to this Agreement shall survive termination of this agreement.
- F. In the event of a material breach of this Agreement by the Investigator, Research Staff, or Institution, Add Health may terminate this Agreement by providing written notice to Investigator and Institution. In this event, Add Health will not be required to refund of any portion of the nonrefundable \$850 processing fee.
- G. This Agreement may be amended or modified only by the mutual written consent of the authorized representatives of Add Health and Investigator and Institution. Both parties agree to amend this Agreement to the extent amendment is necessary to comply with the requirements of any applicable regulatory authority.
- H. This Agreement contains all of the terms and conditions agreed upon by the parties regarding the subject matter of this Agreement and supersedes any prior agreements, oral or written, and all other communications between the parties relating to such subject matters.

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- I. The persons signing this Agreement have the right and authority to execute this Agreement, and no further approvals are necessary to create a binding agreement.
- J. The obligations of Investigator, Research Staff, and Institution set forth within this Agreement may not be assigned or otherwise transferred without the express written consent of Add Health.
- K. Add Health's existing ownership rights in its intellectual property, including its Sensitive Data and the Data Files, are not affected by this Agreement. Except as expressly set forth herein, no right, license, title, or interest in any of Add Health's intellectual property or in any invention, process, or product arising out of its intellectual property is granted or implied, whether or not patented or patentable.
- L. This Agreement may be executed in one or more counterparts each of which counterpart shall be deemed an original Agreement and all of which shall constitute but one Agreement.
- M. The parties' electronic signatures shall be the legally binding equivalent of a handwritten signature.
- N. Institution hereby appoints Investigator as its designated representative to execute, on behalf of Investigator and Institution, additional forms pursuant to this Agreement. Such forms include Attachments A, B, C, and D.

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Investigator and Institutional Signatures

Investigator

Institutional Representative

SIGNATURE DATE

SIGNATURE DATE

NAME TYPED OR PRINTED

NAME TYPED OR PRINTED

TITLE

TITLE

INSTITUTION

INSTITUTION

BUILDING ADDRESS

BUILDING ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY, STATE ZIP

CITY, STATE ZIP

Representative of Add Health

Representative of UNC-CH

SIGNATURE DATE

SIGNATURE DATE

Kathleen Mullan Harris
Principal Investigator
Carolina Population Center
206 West Franklin Street
Chapel Hill, NC 27516-2524

for Barbara Entwisle
Vice Chancellor for Research
University of North Carolina at Chapel Hill
Chapel Hill, NC 27599-1350

For Add Health Use Only:

Security Plan & Contract Period: _____ through _____

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Instructions for Completing Attachment A: Sensitive Data Security Plan

Below are a number of different locations where you might choose to store the Add Health data. Please make your selection and then read the associated document "How to secure ..." from our web site to see the essential components of a good security plan for that location. Submit the completed Attachment A: Form to Describe Sensitive Data Security Plan for your location.

If your location is not listed, or if you need assistance with the security plan, please email addhealth@unc.edu.

Data Stored on a Stand-Alone Computer

A stand-alone computer is one that is in no way connected to another computer or networked device such as a switch, hub, or router.

The security plan form and information on how to secure a stand-alone computer are available at <http://www.cpc.unc.edu/projects/addhealth/data/restricteduse/security/standalone>.

Data Stored on an External Hard Drive

The external hard drive is a modified version of the stand-alone computer, in effect keeping the Add Health data off the Internet or a local area network (LAN).

The security plan form and information on how to secure an external hard drive are available at <http://www.cpc.unc.edu/projects/addhealth/data/restricteduse/security/externaldrive>

Data Stored on a Computer Connected to a Private Network

A private network is two or more computers and/or network devices (e.g., printer, switch, hub, router) that are not connected in any way to the Internet or a LAN.

The security plan form and information on how to secure a computer connected to a private network are available at <http://www.cpc.unc.edu/projects/addhealth/data/restricteduse/security/privatenetwork>

Data Stored on a Windows Computer Connected to Network

A network is two or more computers and/or network devices (e.g., printer, switch, hub, router) that are connected to the Internet or a LAN.

The security plan form and information on how to secure a Windows computer connected to a network are available at <http://www.cpc.unc.edu/projects/addhealth/data/restricteduse/security/windowsnetwork>

Data Stored on a Macintosh Computer Connected to Network

A network is two or more computers and/or network devices (e.g., printer, switch, hub, router) that are connected to the Internet or a LAN.

The security plan form and information on how to secure a Macintosh computer connected to a network are available at <http://www.cpc.unc.edu/projects/addhealth/data/restricteduse/security/macnetwork>

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**Instructions for Completing Attachment A: Sensitive Data Security Plan
(continued)**

Data Stored on a Windows Server

Because the Windows server is connected to the Internet or to a local or wide area network, the emphasis for securing the data on this server is placed on physical security of the server, controlling access to the data, and protecting the data from unauthorized access across the wire.

The security plan form and information on how to secure a Windows server are available at <http://www.cpc.unc.edu/projects/addhealth/data/restricteduse/security/win2000server>

Data Stored on a NetWare Server

Because the NetWare server is connected to the Internet or to a local or wide area network, the emphasis for securing the data on this server is placed on physical security of the server, controlling access to the data, and protecting the data from unauthorized access across the wire.

The security plan form and information on how to secure a NetWare server are available at <http://www.cpc.unc.edu/projects/addhealth/data/restricteduse/security/netwareserver>

Data Stored on a Unix or Linux Server

Guidelines for securing a server that is running a version of the Unix or Linux operating system.

The security plan form and information on how to secure a Unix or Linux server are available at <http://www.cpc.unc.edu/projects/addhealth/data/restricteduse/security/unixlinux>

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Attachment B: Data File Order Form

- Data will be delivered as a SAS export file.
- Data will be sent on a CD by second day, traceable delivery and the Investigator will be notified by email when the data are shipped.
- All data files will be compressed and encrypted.
- Codebooks will be delivered in electronic form on a CD.

CONTACT PERSON	INVESTIGATOR'S NAME
CONTACT PERSON'S EMAIL	INVESTIGATOR'S SIGNATURE
	DATE OF SIGNATURE

The following data will be sent automatically, upon execution of your contract:

In-home Interview Files

- Wave I
- Wave II
- Wave III
- Wave IV

School Files

- Wave I School Administrator
- Wave II School Administrator
- School Information
- In-School Questionnaire

Weight Files

- Wave I Grand Sample Weights
- Wave II Grand Sample Weights
- Wave III Grand Sample Weights
- Wave IV Grand Sample Weights
- School Administrator Weights
- In-School Weights

The constructed datasets listed below are available by special request.

*In order to receive one or more of these datasets,
please attach a brief statement explaining the necessity and relevance of the data to your research agenda.*

School Files

- School Network
- Network Structure

Friend Files

- In-School Nominations
- Wave I In-Home Nominations
- Wave II In-Home Nominations
- Wave III Friend IDs

Sibling Files

- Adolescent Pair Data
- Wave III Sibling IDs

Contextual Files

- Wave I Contextual
- Wave II Contextual
- Wave III Contextual
- Wave I Neighborhood
- Wave II Neighborhood
- Wave III Grouping
- Wave IV Grouping
- Wave I Spatial
- Wave III Census Region
- Wave IV Census Region
- Wave III Tract-Level
- Wave IV Tract-Level

Wave III Supplemental Files

- Urinalysis
- ASHA Call
- HPV MGEN
- Mentor Codes
- BEM Scores
- Cotinine

Weight Files

- Wave I Weight Components
- Wave II Weight Components
- Wave III Weight Components
- Wave IV Weight Components
- In-School Weight Components
- Add Health School Weights
- HPV MGEN Weights

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Attachment B: Data File Order Form

Education Files (Wave III)

- Academic Courses
- Academic Networks
- Context
- Course Level
- Curriculum
- Linking
- Primary
- Transition
- Weights

Genetic Files

- Wave III DNA Results
- Wave IV DNA Results

Constructed Variables

- Wave IV Constructed

Disposition Files

- Wave I Disposition
- Wave II Disposition
- Wave III Disposition
- Wave IV Disposition
- National Death Index

Obesity and Neighborhood

Environment (ONE)

- Wave I Climate
- Wave III Climate
- Wave I Street Connectivity
- Wave III Street Connectivity
- Wave I Crime
- Wave III Crime
- Wave I Geocode Source
- Wave III Geocode Source
- Wave I Land Cover
- Wave III Land Cover
- Wave I Parks
- Wave III Parks
- Wave I Urban Distances
- Wave III Urban Distances

Wave I Resources

Wave III Resources

Wave I Weather

Wave III Weather

Wave I ACCRA Cost of

Living Index

Wave III ACCRA Cost of

Living Index

Wave I Employment

Wave III Employment

Wave I Length of Day

Wave III Length of Day

Wave I Road Type Length

Wave III Road Type Length

Wave I Rural-Urban

Commuting Area (RUCA)

Wave III Rural-Urban

Commuting Area (RUCA)

Wave I 1990 Population Density

Wave III 2000 Population
Density

Wave I School Distance

Measures

Wave I Grouping

Wave III Mobility

Wave III MSA

Biomarker Data (Wave IV)

- Prescription Medication Use
- Glucose
- Measures of EBV and hsCRP
- Biomarker Consent
- Lipids
- Baroreceptor Sensitivity

Alcohol Density Files

- Wave III Alcohol Outlet Density

Political Context Files

- Wave I Political Context Data
- Wave II Political Context Data
- Wave III Political Context Data

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Description of Data Files

Wave I In-home—A merged file containing the Wave I In-home Interview data, the Parent Questionnaire data (when available), the In-school Questionnaire data (when available), and the Add Health Picture Vocabulary Test (when available), collected in 1994-1995, weights included.

Wave II In-home—Data collected during the 1996 in-home interview, and weights included.

Wave III In-home—Respondent-level data collected during the 2001-2002 in-home interview includes field interviewer characteristics, AHPVT, and weights.

Wave IV In-home—The Wave IV in-home interview file includes the Wave IV interview data and interviewer demographic information.

Wave I School Administrator—Information from the Wave I self-administered questionnaire answered by an administrator at the school.

Wave II School Administrator—Information from the Wave II phone-administered interview answered by an administrator at the school.

School Information—Additional information about the individual schools.

In-school Questionnaire—Adolescent responses to the In-school Questionnaire administered September 1994 through April 1995.

School Files

School Network—Network variables constructed from the in-school questionnaire data and friendship nominations.

Network Structure—For each school pair, these files contain a valued friendship network and information on sex, grade in school, race, school pair, and total number of nominations made, including those to non-matchable or out-of-school friends. The files are stored as arc/edge lists in the PAJEK.PAJ format. Information on this freely available network software is at <http://vlado.fmf.uni-lj.si/pub/networks/pajek/>

Friend Files

In-School Nominations—Identification numbers of the friends that the respondent nominated during the in-school questionnaire.

Wave I In-home Nominations—Identification numbers of the friends that the respondent nominated during the Wave I in-home interview.

Wave II In-home Nominations—Identification numbers of the friends that the respondent nominated during the Wave II in-home interview.

Wave III Friend IDs—In Wave III, respondents in the 7th or 8th grade at Wave I were asked to identify, from a list of 10 computer-generated names, which ones were current friends or which ones were their friends when they were in school together. This dataset contains the IDs of the 10 computer-generated names.

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Description of Data Files

(continued)

Sibling Files

Adolescent Pair Data—Information that links and describes the sibling pairs.

Wave III Sibling IDs—In Wave III, respondents were asked questions about their siblings who also participated in the Wave I or II in-home interviews; this dataset contains the IDs for these siblings.

Contextual Files

Waves I, II and III Contextual—Community contextual variables based on state, county, tract, and block group levels derived from the Waves I, II and III addresses.

Waves I and II Neighborhood—Pseudo state, county, tract, and block group variables that allow respondents to be aggregated geographically based on Waves I and II addresses.

Waves III and IV Grouping—The pseudo FIPS codes in this file allow you to geographically group respondents by their Wave IV locations.

Wave I Spatial—X, Y coordinates that can be used to calculate distances between friends in a school community.

Waves III and IV Region—This file contains the Census region codes for the respondents' Wave III and IV residential locations.

Wave III Supplemental Tract-Level Contextual—This file contains supplemental Wave III contextual data that include transportation and commuting measures, climate descriptors, amenities, and state-level tobacco control influences. These variables are available at the census tract-level unless otherwise specified.

Wave IV Supplemental Tract-Level Contextual—This file contains tract-level measures, based on the Wave IV respondent locations, reported by the U.S. Census Bureau's 2009 American Community Survey (ACS), the Climate Atlas of the United States, the USDA Economics Research Service, Esri Data and Maps, ImpacTeen Tobacco Control Policy and Prevalence Data, and the Uniform Crime Reports. When tract-level measures were not available or appropriate, state and county level variables were used.

Wave III Supplemental Files

Urinalysis—This file contains nitrate, specific gravity, pH level, white blood cells, protein, glucose, ketone, urobilinogen, bilirubin, microalbumin, urine creatinine, and blood values from the Wave III urine specimens.

ASHA Call—To receive the results of their STD assays, Wave III respondents called an Add Health dedicated number at the American Social Health Association. This file provides information on who called the results hotline and the date and time of the call.

HPV MGEN—Assay results for human papillomavirus and mycoplasma genitalium are available for a subset of the Wave III respondents who provided a urine sample.

Mentor Codes—For Wave III respondents who reported having a mentor, the open-ended responses to the question "How did {HE/SHE} help you?" have been coded and are available in this file.

BEM Scores—The masculinity and femininity raw and standard scores from the 30 item short form BEM Sex-Role Inventory are available in this file.

Cotinine—This file contains the cotinine and 3-hydroxycotinine assay values for 963 Wave III respondents.

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Description of Data Files

(continued)

Weight Files

Weight Components—A weight component for each level of sampling (school and adolescents) has been created for each wave of data collection. This file contains the weight components needed for computing multilevel weights.

HPV MGEN Weights—Sample weights for respondents with HPV and MGEN assay results are in this file.

Education Files

Academic Courses—These files contain academic status and/or performance indicators for math, science, foreign language, English, history, social sciences, physical education, and a combined overall category.

Academic Networks—The Network files provide information on social networks based on the respondents' course-taking patterns.

Context—School level contextual data are from the Common Core of Data (CCD), Private School Survey (PSS), the 1990 and 2000 Census, and the Office of Civil Rights.

Course-Level—The data in this file are needed for merging the course-level curriculum data with other Education Files.

Curriculum—These math and science curriculum data are derived from coding the textbooks schools reported using for each course offered in these two subjects.

Linking—This file contains variables designed to link transcript data to academic or school years and to Add Health.

Primary—The Primary Component contains several types of indicators based on information collected from participating schools and listed directly on student transcripts such as student exit or graduation status and materials gathered from schools during the data collection process.

Transition—This file contains variables explaining the respondents' movement through the educational system.

Weights—This file contains weights for the education data along with the school weights needed for HLM analyses.

Genetic Files

Wave III DNA Results—Twin and full siblings interviewed at Wave III were asked to provide saliva samples for DNA analysis. This file contains the genotype values for DAT1 (dopamine transporter), DRD4 (dopamine receptor), and SLC6A4 (serotonin transporter), MAOA_V (monoamine oxidase A-uVNTR), DRD2 (dopamine D2 receptor), and CYP2A6 (cytochrome P450 2A6) from these samples. Also included are values for the following SNPs: rs2304297, rs892413, rs4950, rs13280604.

Wave IV DNA Results—The Wave IV DNA Data File contains genotyping results for all Wave IV respondents who agreed to provide a saliva sample for DNA testing. This dataset has values for DAT1 (dopamine transporter), DRD4 (dopamine receptor), MAOA (monoamine oxidase A- uVNTR), 5HTTLPR (serotonin transporter), HTTLPR La-Lg-S, and triallelic activity bins for the serotonin transporter 5HTTLPR adjusted for rs25531, catechol o-methyltransferase (rs4680), DRD2 (dopamine receptor D2), DRD5 (dopamine receptor D5), MAOCA1 (monoamine oxidase A dinucleotide repeat), and serotonin transporter (rs12945042).

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Description of Data Files

(continued)

Disposition Files

Wave I and II Disposition File— Participation information for the Wave I in-home interview respondents and outcome data on the Wave II fielded cases.

Wave III Disposition File— Outcome information on the Wave III fielded cases.

Wave IV Disposition File— Outcome information on the Wave IV fielded cases.

National Death Index—Cause of death for the cases reported deceased at Waves III and IV are in this file.

Constructed Variables

Wave IV Constructed Variables— Wave IV constructed variables on personality, stress, depression, smoking, drinking, sexual activity, health, and economics.

The Obesity and Neighborhood Environment (ONE)

Wave I and III Climate— This file contains climate data for each Wave I and Wave III respondent based on the nearest climate station. Information is available on precipitation, total snowfall, sky cover, temperature, and total hours of sunshine.

Wave I and III Street Connectivity—These files contain road network connectivity measures within 1, 3, 5, and 8.05 km (5 miles) of the Wave I and III respondent locations.

Wave I and III Crime—The county level crime data in these files are based on the Wave I and III respondent locations.

Wave I and III Geocode Source—The data sources of the Wave I and III respondent residential geocodes (latitude and longitude) are provided in these files.

Wave I and III Land Cover—These files contain land cover metrics within 1, 3, 5, and 8.05 km (5 miles) of each respondent's location.

Wave I and III Parks—The counts of public parks within a Euclidean distance of 1, 3, 5, and 8.05 km (5 miles) of each respondent at Wave I and III are in these files.

Wave I and III Resources—The Add Health files provide data on the presence of various physical activity (PA) resources situated near respondent residences at Wave I and III.

Wave I and III Urban Distances—W1URBDST contains Euclidean distances to both 1990 and 2000 U.S. Census Urbanized Areas (UAs) for each Wave I respondent. W3URBDST contains the Euclidean distance to 2000 U.S. Census-Bureau-defined urbanized areas (UAs) for each Wave III respondent.

Wave I and III Weather—This file contains weather data for each Wave III respondent based on the nearest weather station reporting data for the correspondent survey month and year.

Wave I and III ACCRA Cost of Living Index—These Add Health Data Files contain ACCRA Cost of Living Index based on the location of the Wave I and Wave III respondents.

Wave I and III Employment—These Data Files contain county-level employment data attached to each Wave I and Wave III respondent location.

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Wave I and III Length of Day—These Data Files contain the number of hours of daylight at each Wave I and Wave III respondent location on that respondent's survey date.

Wave I and III Road Type Length—These Data Files contain road type length calculations within radii of 1, 3, 5, and 8.05 kilometers (5 miles) of Wave I and Wave III respondent locations.

Wave I and III Rural-Urban Commuting Area (RUCA)—These Data Files contain Rural-Urban commuting area (RUCA) codes at the U.S. Census tract-level based on the location of Wave I and Wave III respondents.

Wave I and III Population Density—The Wave I population density file contains the proportion of 1990 U.S. Census block group population and area (in square meters) within 1, 3, 5, and 8.04672 km (5 mi) of each Wave I respondent. The Wave III population density file contains the proportion of 2000 U.S. Census block group population and area (in square meters) within 1, 3, 5, and 8.04672 km (5 mi) of each Wave III respondent.

Wave I School Distance Measures—The file contains the distance between the geocoded point locations of each respondent's Wave I location and that respondent's school.

Wave I Grouping—This Wave I grouping file is for use with the Obesity and Neighborhood Environment (ONE) data. The Wave I data in the ONE contextual files were created using these Wave I respondent locations. The grouping variable in this file is based on the Census FIPS codes and is a pseudo code, not linkable to outside data sources.

Wave III Mobility—W3MOBIND reports the distance between each respondent's geocoded point location for each survey wave and that respondent's school location, along with the respondent's move distance between each survey wave.

Wave III MSA Pseudo Codes—The MSA pseudo code created for each respondent's Wave III location is in this file.

Alcohol Density Files

Wave III Alcohol Outlet Density—This Add Health Data File measures the prevalence of alcohol outlets in respondent communities by reporting the tract-level density of establishments possessing on-and/or off-premise alcohol licenses.

Political Context Files

Wave I, II, III Political Context Data—The Add Health Political Context Database provides an array of measures that describe the political environments in which Add Health respondents reside. These contextual variables include measures of commuting, election results for gubernatorial, presidential, and senatorial races, and voter registration law.

Wave IV Biomarker Data

Prescription Medication Use—The files contained in this component of the Add Health restricted data include the type of medication used by participants during Wave IV.

Glucose—This file contains two measures of glucose homeostasis based on the assay of the Wave IV dried blood spots.

EBV and hsCRP Data—The results of the assays for CRP (C-reactive protein) and EBV (Epstein-Barr virus) are in this Data File.

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(continued)

Biomarker Consent—In this file are variables indicating the types of consent (archive, no archive, refused, incarcerated) obtained for the Wave IV blood spot and saliva DNA collections.

Lipids—The Lipids data file contains measures of triglycerides (TG), total cholesterol (TC), high-density lipoprotein cholesterol (HDL-C), low-density lipoprotein cholesterol (LDL-C), non-high-density lipoprotein cholesterol, and total cholesterol to high-density lipoprotein cholesterol ratio.

Baroreceptor Sensitivity—This file contains constructed measures for baroreflex sensitivity, heart rate recovery, and systolic blood pressure recovery for the Wave IV respondents.

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Attachment C: Supplemental Agreement with Research Staff

- I. The undersigned Research Staff, in consideration of their use of sensitive data from the National Longitudinal Study of Adolescent Health, agree:
 - A. That they have read the associated Agreement for the Use of Sensitive Data from the National Longitudinal Study of Adolescent Health and the Sensitive Data Security Plan.
 - B. That they are "Research Staff" within the meaning of the Agreement.
 - C. To comply fully with the terms of the Agreement, including the Sensitive Data Security Plan.
- II. The undersigned Investigator agrees that the persons designated herein are Research Staff within the meaning of the associated Agreement for the Use of Sensitive Data from the National Longitudinal Study of Adolescent Health.
- III. Investigator agrees to ensure that each Research Staff person signs this Supplemental Agreement and an individual Security Pledge (Attachment D).

Research Staff

NAME TYPED OR PRINTED	SIGNATURE	DATE
NAME TYPED OR PRINTED	SIGNATURE	DATE
NAME TYPED OR PRINTED	SIGNATURE	DATE
NAME TYPED OR PRINTED	SIGNATURE	DATE
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Investigator

NAME TYPED OR PRINTED	SIGNATURE	DATE
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Attachment D: Security Pledge

Pledge of Confidentiality

I, _____, through my involvement with and work on my project
TYPE OR PRINT YOUR NAME

will have access to Sensitive Data collected by the National Longitudinal Study of Adolescent Health (Add Health). By virtue of my affiliation with this project, I have access to Sensitive Data about respondents generally perceived as personal and private. I understand that access to this Sensitive Data carries with it a responsibility to guard against unauthorized use and to abide by the Sensitive Data Security Plan. To treat information as confidential means to not divulge it to anyone who is not a project member, or cause it to be accessible to anyone who is not a project member. Anything not specifically named as "public information" is considered confidential.

Disclosing confidential information from Add Health directly or allowing non-authorized access to such information may subject you to criminal prosecution and/or civil recovery and may violate the code of research ethics of your institution.

I agree to fulfill my responsibilities on this project in accordance with the following guidelines:

1. I agree not to permit non-project personnel access to these Sensitive Data, in either electronic or paper copy.
2. I agree to not attempt to identify individuals, families, households, schools, geographic locations or institutions.
3. I agree that in the event the identity of an individual, family, household, school, geographic location or institution is discovered inadvertently, I will (a) make no use of this knowledge, (b) advise the Investigator of the incident who will report it to Kathleen Mullan Harris within one (1) business day of discovery, (c) safeguard or destroy the information as directed by the Investigator after consultation with Kathleen Mullan Harris, and (d) not inform any other person of the discovered identity.

Location (Building and Room Number) of the Computer that will be used to access the Add Health

Restricted-Use data: _____

NAME SIGNATURE DATE

Updates and corrections to the Add Health data and codebooks
will only be distributed through the Add Health list server.

EMAIL: _____
PROVIDE YOUR EMAIL ADDRESS TO SUBSCRIBE TO THIS LIST SERVER

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Attachment E: List of Funding Agencies

National Cancer Institute

National Center for Health Statistics, Centers for Disease Control and Prevention, DHHS

National Center for Injury Prevention and Control, Centers for Disease Control and Prevention, DHHS

National Center for Minority Health and Health Disparities

National Institute on Aging

National Institute of Allergy and Infectious Diseases

National Institute of Deafness and Other Communication Disorders

National Institute of General Medical Sciences

National Institute of Mental Health

National Institute of Nursing Research

National Institute on Alcohol Abuse and Alcoholism

National Institute on Drug Abuse

National Science Foundation

Office of AIDS Research, National Institutes of Health, NIH

Office of the Assistant Secretary for Planning and Evaluation, DHHS

Office of Behavioral and Social Science Research, NIH

Office of the Director, NIH

Office of Minority Health, Centers for Disease Control and Prevention, DHHS

Office of Minority Health, Office of Public Health and Science, DHHS

Office of Population Affairs, DHHS

Office of Research on Women's Health, NIH

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Attachment F: Description of Deductive Disclosure Risk

The problem of deductive disclosure of an individual respondent's identity has become a major concern of federal agencies, researchers, and Institutional Review Boards in the recent past. In essence, deductive disclosure is the discerning of an individual respondent's identity and responses through the use of known characteristics of that individual. This is not unique to Add Health—if a person is known to have participated in ANY survey, then a combination of his or her personal characteristics will allow an individual to determine which record corresponds to that individual. For example, in the Add Health in-school dataset of more than 90,000 cases, a cross-tabulation of five variables can distinguish an individual record.

The Add Health data is more sensitive than many other datasets to deductive disclosure. This is due, in part, to the clustered research design. Add Health surveyed all students in grades 7 through 12 in a pair of schools in each of 80 communities in the United States. The in-school questionnaires were administered by teachers at each school. More than 120,000 students were enrolled in these schools. Informational letters were sent to parents prior to the administration date via students and post. Assuming that most students live with two other persons (parents and/or siblings), 360,000 people know of the participation of at least one, if not many, of the adolescents attending the selected schools. Additionally, approximately 5,000 school administrators, staff and teachers were involved in the in-school data collection efforts.

The in-home selection process increased the number of persons aware of Add Health: about 5,000 participants in the in-home component had not completed an In-School Questionnaire. (Participation in the in-school session was not a prerequisite for eligibility, only the presence of an adolescent's name on the school enrollment roster.)

Given the large number of people who know someone who, they know, participated in Add Health, researchers who use the Add Health Contractual Dataset are obligated to protect respondents from deductive disclosure risk by taking extraordinary precautions to protect the data from non-authorized use. Precautions include, but are not limited to: copying the original dataset only once and storing the original CD-ROM in a locked drawer or file cabinet; saving the computer programs used to construct analysis data files, but not the Data Files themselves; retrieving paper printouts immediately upon output; shredding printouts no longer in use; password protecting Add Health data; signing pledges of confidentiality; and using the data solely for statistical reporting and analysis.