

Cambridge University Press 978-1-107-11570-5 — Mental Disorders Around the World Edited by Kate M. Scott , Peter de Jonge , Dan J. Stein , Ronald C. Kessler Index More Information

## Index

AAI. See Age-at-interview (AAI) ADHD. See Attention-Deficit Hyperactivity Disorder (ADHD) AG. See Agoraphobia (AG) age-at-interview (AAI), 63 age-of-onset (AOO), 19, 21, 24, 42, 58, 84, 107, 121, 134, 153, 232, 234, 250, 264, 287, 289, 292, 293, 328-329 AG, 107 alcohol use disorders (AUDs), 232, 233 bulimia nervosa and binge eating disorder, 267, 268 bipolar spectrum disorder (BPD), 58-63 drug use disorders, 253, 370 generalised anxiety disorder (GAD), 84 intermittent explosive disorder (IED), 184 major depressive disorder (MDD), 46, 337 oppositional defiant disorder (ODD) and conduct disorder (CD), 213, 214 panic attacks (PAs), 99, 102 panic disorder (PD), 346 posttraumatic stress disorder (PTSD), 157, 158 social anxiety disorder (SAD), 121, 124, 125 separation anxiety disorder (SEPAD), 169, 172, 173 specific phobia, 140 aggression, 182 aggressiveness, 183 agoraphobia (AG), 106. See also Specific phobia age at selected percentiles, 110, 349 age-of-onset, 107 comorbidity, 113-117 DSM-IV AG, 117 epidemiology of, 106 as independent disorder, 118 method, 106-107 persistence, 107 prevalence, 107, 118 of agoraphobia in World Mental Health surveys, 108-109 without panic disorder in World Mental Health surveys, 347, 348 role impairment, 107-113 severity of role impairment, 111-112,350socio-demographic correlates, 113, 114-115 treatment, 113 agoraphobic fears, 106 alcohol abuse (ALA), 186, 223, 224

average lifetime prevalence rate, 232 onset, 205 alcohol dependence (ALD), 223, 224 average lifetime prevalence rate, 232 alcohol-use disorders (AUDs), 223, 244. See also Oppositional defiant disorder (ODD); Posttraumatic stress disorder (PTSD) AOO, 232, 234 average lifetime prevalence of, 239 categories, 223 comorbidity, 234, 237 concept and diagnostic criteria for, 240 differences in, 239 methods, 225 persistence, 232-234 prevalence, 224, 225-231 role impairment, 234, 237 socio-demographic correlates, 234, 235-236 treatment, 234-239 ALD. See Alcohol dependence (ALD) American Psychiatric Association (APA), 209 amphetamines, 243 AN. See Anorexia nervosa (AN) analysis weights, construction of, 16-18 anger, 182 attacks, 183, 184, 186 animal fear, 136 Annual Reports Questionnaire (ARQ), 243 anorexia nervosa (AN), 2, 263 anxiety, 120 disorders, 93, 324 AOO. See Age-of-onset (AOO) APA. See American Psychiatric Association area probability methods, 14 ARQ. See Annual Reports Questionnaire (ARQ) Attention-Deficit Hyperactivity Disorder (ADHD), 195, 297. See also Alcoholuse disorders (AUDs); Posttraumatic stress disorder (PTSD) ADHD Clinical Diagnostic Scale (ACDS), 196 adult, 203 impairments in, 205-206 multiple imputation strategy to arrive at, 195-196 treatment, 201-203, 206 age, 205 childhood, 203

diagnostic assessment, 195 disability, 199, 201 multiple imputation strategy, 195-196 prevalence in childhood and persistence into adulthood, 196, 197, 201 socio-demographic correlates of, 196, 198-199 threshold and subthreshold childhood, 204 AUDs. See Alcohol-use disorders (AUDs) Australian National Survey of Mental Health and Well-being (NSMHWB), 106 Balanced Repeated Replication method, 18 BED. See Binge-eating disorder (BED) bi-directional associations between PEs and mental disorders, 293-294 bifactor models, 300 binge-eating disorder (BED), 103, 263. See also Drug-use disorders (DUD); Mental disorders AOO and persistence, 264, 267, 268 associations with BMI, 264 comorbidity, 267-268, 275, 276 impairment in role attainment and role functioning, 264, 266, 269, 270 method, 263-264 prevalence, 264, 265, 266 socio-demographic correlates, 266-267, 271-272, 273-274 treatment, 268, 275-276, 277-280 bipolar disorder (BPD), 57, 300. See also Generalized anxiety disorder (GAD); Major depressive disorder (MDD); Panic Disorder (PD) age at selected percentiles on standardized age-of-onset, 61-62 AOO, 58-63 BP-I disorder, 57 BP-II disorder, 57 comorbidity, 67 comparative frequency-intensity of manic, hypomanic, and depressive episodes, 66-67 complete model with, 306, 308-310 method, 58 placement, 304 prevalence, 58 prevalence of DSM-IV bipolar spectrum disorder, 59-60 rapid cycling, 66 role impairment, 67-69

comorbidity, 199, 201

379



**Cambridge University Press** 978-1-107-11570-5 — Mental Disorders Around the World Edited by Kate M. Scott, Peter de Jonge, Dan J. Stein, Ronald C. Kessler

**More Information** 

## Index

bipolar disorder (BPD) (cont.)	cocaine, 243, 245	configural invariance, 299, 301, 302, 311
severity of role impairment, 70–71	combining strategies, 24–25	confirmatory factor analyses (CFAs), 300
socio-demographic correlates, 63–66	common disorders, complete model with,	contemporary psychiatric nosology and
treatment, 69–74	306, 308–310 common mental disorders, 301–304	epidemiology, criticisms of, 5–7 contingent feedback approach, 23
12-month bipolar spectrum disorder, 72–73	community surveys methodology, 4	contingent reedback approach, 23
bipolar mood disorders, 82	community-based surveys, 286	Cox proportional hazards analysis
bipolar spectrum disorder, 57, 58	comorbidity, 67, 113–117, 254, 257, 297,	approach, 33
bivariate associations between socio-	330–331	cross-disorder perspective, 324
demographics correlates and	of ADHD with other mental disorders,	cross-national
DSM-IV, 64–65	199, 201	analyses, 301
comorbidity, 68	among disorders, 34-35	datasets, 300-301
30-day prevalence, 63	analyses, 80	mental disorders, 300
bivariate associations	AUDs, 234, 237	bivariate associations of lifetime ment
between socio-demographic correlates	bipolar spectrum disorder, 68	disorders, 298
and DSM-IV oppositional defiant	of DSM-IV and DSM-5 generalized	common mental disorders, 301–304
disorder, 375, 376, 377	anxiety disorder, 83	community surveys methodology, 4
and DSM-IV posttraumatic stress	GAD, 82	complete model with common
disorder, 362–363	of major depressive disorder, 45, 46	disorders, PEs and bipolar disord
and DSM-IV social anxiety disorder,	with mental disorders, 267	306, 308, 309, 310
352–353, 354–355	of binge-eating disorder with hierarchy with DSM-IV disorders, 275	criticisms of contemporary psychiatric nosology and epidemiology, 5-7
and posttraumatic stress disorder,	of bulimia nervosa with DSM-IV	differences, 33
364–365, 366–367	disorders, 276	epidemiology of mental disorders, 3
time-lagged, 67 BMI. See Body-Mass Index (BMI)	in ODD and CD, 215–218	global collaborative research networks
BN. See Bulimia nervosa (BN)	with other DSM-IV disorders, 186–187,	lifetime prevalence of CD, 211
body-mass index (BMI), 264	190	operationalization of mental disorders
BPD. See Bipolar disorder (BPD)	of PTSD, 158-162	3-4
bulimia nervosa (BN), 263, 328	SAD, 128, 131	pattern, 328
AOO and persistence, 264, 267, 268	specific phobia, 140, 144-145	perspective, 324
associations with BMI, 264	Comparative Fit Index (CFI), 301	placement
comorbidity, 267-268, 275, 276	comparative frequency-intensity of	bipolar disorders, 304
impairment in role attainment and role	manic, hypomanic, and depressive	eating disorders, 305
functioning, 264, 266, 269, 270	episodes, 66–67	IED, 305–306
method, 263–264	complementary-alternative medical	psychotic experiences, 306, 307, 308
prevalence, 264, 265, 266	(CAM) sector, 27, 239, 257, 315	prevalence, 287–289
socio-demographic correlates, 266–267,	complex designs, 18, 19	scoring system, 26
271-272, 273-274	complex sample designs for WMH surveys, 13–14	structure of mental disorders, 297 cultural adaptation of survey methods, 2
treatment, 268, 275–276, 277–280	Composite International Diagnostic	cumulative AOO distributions of PEs, 29
Burdens of Mental Disorders, The, 69	Interview (CIDI), 4, 9, 21, 25, 41,	cumulative lifetime probability curves,
CAM sector. See Complementary-	80, 106, 153, 168, 183, 287	31,32
alternative medical sector	CIDI Version 3.0, 27, 29, 80, 121,	cumulative lifetime probability
(CAM sector)	195, 225	distributions, estimating, 31
cannabis, 243, 245	module for SEPAD, 169	,
CAPI. See Computer-assisted personal	symptom, 263-264	DALYs. See Disability-adjusted Life Year
interview (CAPI)	translations, 28	(DALYs)
case-control sampling, 34	computer-assisted personal interview	datasets, 300-301
CCP. See Clinical contact person (CCP)	(CAPI), 28	defensive aggression, 182
CD. See Conduct disorder (CD)	condition-specific SDS scales, 27	delusional experiences (DEs), 286
centralized screening procedures, 29	conduct disorder (CD), 209, 297	depression, 120, 182
CFAs. See Confirmatory factor analyses	age-of-onset for ODD and, 213, 214	depressive disorder, 338–339, 340–341
(CFAs)	during childhood, 209	DEs. See Delusional experiences (DEs)
CFI. See Comparative Fit Index (CFI)	comorbidity, 215–218	design effect, 18, 19, 20
child SEPAD, 169	cross-national lifetime prevalence	Diagnostic and Statistical Manual of Men
childhood ADHD prevalence and persistence into	estimates, 218 epidemiological studies, 210	Disorders (DSM), 3, 120 DSM-defined specific phobia, 134
adulthood, 196, 197, 201, 203	impairment and treatment, 218	DSM-III diagnosis, 120
childhood-onset disorders, 219	methods, 210	DSM-IV and DSM-5, 3
CI. See Confidence interval (CI)	persistence, 214–215	DSMIV-TR, 223
CIDI. See Composite International	prevalence, 211–212	diagnostic assessment, 195
Diagnostic Interview (CIDI)	prevalence, course, and correlates of,	diagnostic criteria, 3, 4, 6

209-210

 $socio-demographic\ correlates, 215-217$ 

use of multiple informants, 219

confidence interval (CI), 18, 33, 63

es (CFAs), 300 nosology and cisms of, 5–7 ach, 23 analysis 324 lifetime mental ers, 301-304 hodology, 4 mmon bipolar disorder, ary psychiatric emiology, 5–7 disorders, 3 arch networks, 5 D, 211 ental disorders, 06, 307, 308 rders, 297 ey methods, 29 ions of PEs, 293 oility curves, oility nating, 31 sted Life Years (s), 286 39, 340-341 ences (DEs) Ianual of Mental 120 obia, 134 diagnostic criteria, 3, 4, 6 for CD, 210 for ODD, 210

Diagnostic Interview Schedule (DIS), 4,

195, 224

380

clinical characteristics, likelihood of

sectors by, 315, 317

clinical contact person (CCP), 30

receiving treatment across service



Cambridge University Press 978-1-107-11570-5 — Mental Disorders Around the World Edited by Kate M. Scott , Peter de Jonge , Dan J. Stein , Ronald C. Kessler Index

More Information

Index

disability-adjusted life years (DALYs), 223	age at selected percentiles on	impairment
discrete-time survival analysis, 33	standardized age-of-onset	role, 67–69, 107–113, 184, 250, 254
disorder	distributions of PD, 346	attainment and role functioning,
disorder-specific analyses, 34–35	bivariate associations between socio-	264, 266
interaction between disorder	demographic correlates and SAD,	severity of role impairment
severity and socio-demographic	352–355, 356–357 BN criteria 263, 264	associated with 12-month binge-eating disorder, 269
characteristics, 319 persistence, 107, 136, 232–234, 250	BN criteria, 263–264 comorbidity, 177, 178	associated with 12-month bulimia
'double sampling' technique, 13	comorbidity of specific phobia with	nervosa, 270
drug abuse (DRA), 243	other disorders, 360	in specific phobia, 135, 141,
drug dependence (DRD), 243	criterion A for IED, 183	146–147, 148
drug-use disorders (DUD), 225, 243. See	criterion B for IED, 183	and treatment of ODD and CD, 218
also Binge-eating disorder (BED);	criterion C for IED, 183	impulsive aggression, 182
Mental disorders	MDD, 42	Institute for Social Research (ISR), 9-10
AOO, 250, 253	'free-floating' anxiety, 79	inter-quartile range (IQR), 58, 107, 184
comorbidity, 254, 257	frequent mood episodes (FME), 66	intermittent explosive disorder (IED),
demographics, 254, 255–256		182, 187, 324. See also Alcohol-use
methods, 244–245	GAD. See Generalized anxiety disorder	disorders (AUDs); Attention-
persistence, 250	(GAD)	Deficit Hyperactivity Disorder
prevalence, 245	GBD study. CBD study.	(ADHD); Posttraumatic stress
of DSM-IV drug abuse in WMH surveys, 246–247	study (GBD study) general interviewing training (GIT), 29–30	disorder (PTSD) age-of-onset, 184
of DSM-IV drug dependence in WMH	general medical sector, 27	associations of traumatic events with
surveys, 248–249	generalized anxiety disorder (GAD), 4, 27,	onset of IED, 187, 191
of DSM-IV drug-use disorder in WMH	79, 324. <i>See also</i> Bipolar disorder	comorbidity, 186–187, 190
surveys, 251	(BPD); Major depressive disorder	in DSM-IV, 182
12-month prevalences of DRA and	(MDD); Panic Disorder (PD)	lifetime prevalence, 187, 190
DRD, 250	bivariate associations of socio-	median age-of-onset, 191
role impairment, 250, 254	demographic variables, 87-88	method, 183-184
treatment, 257–258	comorbidity, 82	placement, 305-306
DSM. See Diagnostic and Statistical	course and correlates, 84–86	prevalence, 184, 185, 192
Manual of Mental Disorders (DSM)	DSM-IV conceptualization of, 79	role impairment, 184, 186
DSM-IV. See Fourth Edition of the	help-seeking samples, 80	socio-demographic correlates,
Diagnostic and Statistical Manual	methods, 80	186, 188–189
(DSM-IV) DUD. See Drug-use disorders (DUD)	prevalence, 80–82 role impairment, 82	treatment, 187 type of anger attacks in past 12 months,
dysfunctional exaggeration, 167	treatment, 82, 85, 84, 90	184, 186
dystanctional exaggeration, 107	GIT. See General interviewing	internalizing disorders, 299
Eastern Mediterranean region, 239	training (GIT)	internalizing domains, 297
eating disorders, 263, 267, 305, 324	Global Burden of Disease study (GBD	International Consortium in Psychiatric
IED and, 306	study), 5, 243, 326	Epidemiology (ICPE), 5
incidence, 281	global collaborative research networks, 5	International Statistical Classification of
lifetime treatment of, 275	global mental health, 5	Diseases (ICD), 3, 4, 118, 120
placement, 305		ICD-10, 9
ECA. See Epidemiological Catchment Area	hallucinatory experiences (HEs), 286	interviewer training, 29
Study (ECA)	Harvard Medical School (HMS), 16	interviewer hiring and training, 29–30
educational status, 25–26	HD. See Hyperactivity-impulsivity (HD)	and quality control monitoring, 28, 30
EFA. See Exploratory factor analyses (EFA)	help-seeking samples, 80 heroin, 243	IQR. See Inter-quartile range (IQR) ISR. See Institute for Social Research (ISR)
Epidemiological Area Catchment Study (ECA), 49, 94	HEs. See Hallucinatory experiences (HEs)	13K. See Histitute for Social Research (13K)
episode persistence, 107	hierarchical coding scheme, 25	Jackknife Repeated Replication method
episodic memory, 23	high-income countries, 356, 366, 377	(JRR method), 18
European Study of the Epidemiology of	higher-order model with bipolar	<b>(</b> )
Mental Disorders (ESEMED), 42	disorder, 304	lifetime
exploratory factor analyses (EFA), 301	HMS. See Harvard Medical School (HMS)	comorbidity, 177, 178
externalizing	human services sector, 27	prevalence, 30-31, 107
domains, 297	hyperactivity-impulsivity (HD), 195	IED, 187, 190
factor, 299	hypomanic episodes, comparative	of PTSD, 154
	frequency-intensity of, 66–67	likelihood of receiving treatment
Feighner criteria, 3, 4	ICD Contactors of the contact	across
FME. See Frequent mood episodes (FME)	ICD. See International Statistical	by clinical characteristics, 315, 317
four-stage designs, 14 Fourth Edition of the Diagnostic and	Classification of Diseases (ICD)	by socio-demographic characteristics,
Fourth Edition of the Diagnostic and Statistical Manual (DSM-IV), 1, 9,	ICPE. See International Consortium in Psychiatric Epidemiology (ICPE)	315, 318–319 logistic link function, 34
106, 153, 168	IED. See Intermittent explosive	logistic regression analysis, 17
AG, 117	disorder (IED)	low and middle-income countries, 5
• •	, , , ,	



Cambridge University Press 978-1-107-11570-5 — Mental Disorders Around the World Edited by Kate M. Scott , Peter de Jonge , Dan J. Stein , Ronald C. Kessler Index

## Index

**More Information** 

low/lower-middle-income countries,				
352–353, 362–363, 375				
lower bound estimates, 31				
major depression, 26, 27, 41, 55, 58, 282, 330				
major depressive disorder (MDD), 41,				
79, 324. See also Bipolar disorder				
(BPD); Generalized anxiety				
disorder (GAD); Panic				
Disorder (PD)				
age-of-onset distributions of DSM-IV MDD, 337				
AOO and projected lifetime risk of, 46				
bivariate associations between socio-				
demographics, 52–53				
comorbidity of major depressive disorder, 45, 46				
method, 42				
prevalence and persistence, 42–46				
role impairment, 46–49				
socio-demographic correlates, 49–54				
socio-economic factors, 41				
treatment, 49				
12-month major depressive disorder,				
50–51 manic episodes, comparative				
frequency-intensity of, 66–67				
marital separation/divorce, 190				
marital status, 25				
MDD. See Major depressive disorder				
(MDD)				
median age-of-onset, IED, 191				
mental disorders, 19, 182, 244, 287, 297,				
300, 324. See also Binge-eating				
disorder (BED); Bipolar disorder				
(BPD); Drug-use disorders (DUD);				
Generalized anxiety disorder (GAD)				
ability to answer accurately, 23–24				
bi-directional association between PEs				
and, 293–294				
combining strategies, 24–25				
comorbidity				
of ADHD with, 199, 201				
between disorders, 330–331				
cross-national epidemiology, 3–7 impact, 329				
variation across countries, 329–330				
variation across disorders, 329				
life course, 328–329				
motivation, 22–23				
operationalization, 3-4				
persistence, 328				
policy implications, 331–332				
prevalence, 324 variation across countries, 326–328				
variation across countries, 326–328 variation across disorders, 324–326				
question comprehension, 21–22				
study limitations, 331				
task comprehension, 22				
mental health				
specialist sector, 27				
treatment gap, 314				
MG-CFA. See Multigroup-CFA (MG-CFA)				
MI. See Multiple imputation (MI)				

```
mood disorders, 82
morbid risk, 31, 32
motivation, 22-23
multigroup-CFA (MG-CFA), 301
multiple imputation (MI), 196
  to arriving at adult ADHD prevalence
       estimates, 195-196
multivariate significance tests, 33
National Comorbidity Study, 94, 134
National Comorbidity Study Replication
       (NCS-R), 94, 153
National Comorbidity Survey, 41
National Epidemiological Survey on
       Alcohol and Related Conditions
       (NESARC), 94, 134
National Institutes of Health in United
       States, 5
NCS. See National Comorbidity Study
       (NCS)
NCS-R. See National Comorbidity Study
       Replication (NCS-R)
negative predictive value (NPV), 57
NESARC. See National Epidemiological
       Survey on Alcohol and Related
       Conditions (NESARC)
Netherlands Mental Health Survey and
       Incidence Initiative
       (NEMESIS), 134
nonresponse
  adjustment weight, 16
  surveys, 15-16
NPV. See Negative predictive value (NPV)
NSMHWB. See Australian National Survey
       of Mental Health and Well-being
       (NSMHWB)
obsessive compulsive disorder (OCD),
       2, 297
ODD. See Oppositional defiant disorder
       (ODD)
odds-ratios (ORs), 33, 34, 63, 191, 199
older mental-health studies, 299-300
oppositional defiant disorder (ODD),
       209, 297, 376. See also Alcohol-use
       disorders (AUDs); Attention-
       Deficit Hyperactivity Disorder
       (ADHD)
  age-of-onset for, 213, 214
  during childhood, 209
  comorbidity, 215-218
  cross-national lifetime prevalence
       estimates, 218
  epidemiological studies, 210
  impairment and treatment, 218
  methods, 210
  persistence, 214-215
  prevalence, 211-212
  prevalence, course, and correlates of,
       209-210
  socio-demographic correlates,
       215-217
  symptoms, 209
  use of multiple informants, 219
ORs. See Odds-ratios (ORs)
outcome variables, prevalence of, 30-31
```

panic attacks (PAs), 93
comorbidity of single and recurrent,
100-101
prevalence and age-of-onset of types
of, 102
in WMHS
30-day prevalence of, 344-345
12-month prevalence of, 342-343
panic disorder (PD), 93, 106. See
also Bipolar disorder (BPD);
Generalized anxiety disorder
(GAD); Major depressive disorder
(MDD)
age at selected percentiles on standardized age-of-onset
distributions
of agoraphobia without, 349
of DSM-IV, 346
comorbidity and correlates, 95, 99
epidemiology, 93–94, 106
essential feature, 93
lifetime prevalence of panic attack and
DSM-IV, 96–97
method, 94-95
number and type of PAs, 99
prevalence, 95
role impairment and treatment, 95
severity of role impairment, 98
associated with 12-month
agoraphobia without PD, 350–351
in WMHS prevalence of agoraphobia without,
347, 348
30-day prevalence, 344–345
12-month prevalence, 342–343
paper and pencil interview (PAPI), 28
PAPI. See Paper and pencil interview
(PAPI)
PAs. See Panic attacks (PAs)
PD. See Panic Disorder (PD)
People's Republic of China (PRC), 121, 168
persistence, 264
of AG, 107
AUDs, 232
of ODD and CD, 214-215
person-level analysis, 16
person-year models, 33–34
PEs. See Psychotic experiences (PEs)
phobias, 120
phobic stimulus, 134
population registry approach, 13 positive predictive value (PPV), 57
poststratification
factor, 17
weighting step, 16
posttraumatic stress disorder (PTSD), 26,
153, 315, 324. See also Attention-
Deficit Hyperactivity Disorder
(ADHD); Intermittent explosive
disorder (IED); Separation anxiety
disorder (SEPAD); Social anxiety
disorder (SAD)
age-of-onset, 157, 158
bivariate associations between socio-
demographic correlates and,

364-365, 366-367



**More Information** 

Cambridge University Press 978-1-107-11570-5 — Mental Disorders Around the World Edited by Kate M. Scott , Peter de Jonge , Dan J. Stein , Ronald C. Kessler Index

Index

comorbidity, 158-162	GAD, 82	socio-demographic correlates,
methods, 154	severity of, 47-48, 111-112	254, 266–267, 289
prevalence, 154-157, 162, 164	Root Mean Square Error of Approximation	ADHD, 196, 198–199
socio-demographic correlates, 157–158	(RMSEA), 301	AUDs, 234, 235–236
for associations with, 164		bivariate associations
TE exposure and, 162	SA. See Separation anxiety (SA)	and DSM-IV binge-eating disorder,
TE prevalence, 154	SAD. See Social anxiety disorder (SAD)	271–272
treatment, 162	sample/sampling	and DSM-IV bulimia nervosa, 273–274
12-month posttraumatic stress disorder, 163	error, 18–19 frames, 13	DSM-IV oppositional defiant
WMH surveys, 165	selection weight, 16	disorder, 377 DSM-IV posttraumatic stress disorder
PPV. See Positive predictive value (PPV)	scalar invariance, 301	and, 362–363, 364–365, 366–367
PRC. See People's Republic of China (PRC)	schemas, 23	DSM-IV social anxiety disorder and,
premeditated aggression, 182	schizophrenia, 286	352–353, 354–355, 356–357
pretesting, 28	SCID. See Structured Clinical Interview for	and DSM-IV DUD, bivariate
prevalence	DSM-IV (SCID)	associations between, 255-256
of agoraphobia in World Mental Health	SDS. See Sheehan Disability Scales (SDS)	IED, 186, 188-189
surveys, 108–109	selection weight factor, 16	of lifetime disorders, 32-34
BPD, 58	semantic memory, 23	of ODD and CD, 215-217
GAD, 80-82	SEPAD. See Separation anxiety disorder	of onset and persistence, 63-66
IED, 184, 185, 192	(SEPAD)	of prevalence and persistence of AG,
MDD, 42–46	separation anxiety (SA), 167	113, 114–115
of ODD and CD, 209–210, 211–212	separation anxiety disorder (SEPAD), 167,	of PTSD, 157–158
of PTSD, 154–157, 162, 164	177. See also Social anxiety	SAD, 130
SEPAD, 169, 170–171	disorder (SAD)	SEPAD, 173, 175–176
specific phobia, 136–140 probability sampling, 13	adult, 168, 169, 324	socio-demographic(s), 25–26 associations, 49–54, 141
psychiatric epidemiology, 1	lifetime prevalence, 169 role impairment, 172, 174	bivariate associations between socio-
psychotic experiences (PEs), 286, 300	12-month adult SEPAD, 179–180	demographic correlates, 290–291
age-of-onset, 289, 292, 293	age-of-onset, 169, 172, 173	characteristics, 315, 318–319
bi-directional association between PEs	in childhood, 179	variables, 32
and mental disorders, 293-294	comorbidity, 177, 178	socio-economic status (SES), 205
complete model with, 306, 308-310	concerns in adults, 168	socio-economic factors, 314
methods, 287	method, 168	special procedures, 30
placement, 306, 307, 308	prevalence and persistence, 169,	specific phobia, 134, 199. See also
prevalence, 287–289	170–171	Agoraphobia (AG)
socio-demographic correlates, 289,	recall bias, 177	age-of-onset, 140
290–291	socio-demographic correlates, 173,	comorbidity, 140, 144–145
PTSD. See Posttraumatic stress disorder	175–176	of specific phobia with other DSM-IV
(PTSD)	treatment, 177 serious mental disorders, 3	disorders, 360 days out of role due to 12-month specific
quality assurance monitoring, 30	SES. See Socio-economic status (SES)	phobia by role impairment, 360
quality assurance monitoring, 30	Sheehan Disability Scales (SDS), 26, 46, 69,	methods, 136
question comprehension, 21–22	141, 234, 315, 350, 371	onset of, 134
1	Sheehan impairment severity, 358–359,	prevalence and persistance,
rapid cycling, 66	361, 368–369, 373, 374	136–140, 150
RDoC. See Research Domain Criteria	simple random sampling (SRS), 18	role impairment, 135, 141, 146-147, 148
(RDoC)	social anxiety, 132	socio-demographic correlates of onset,
Receiver Operating Characteristic (ROC)	social anxiety disorder (SAD), 120, 297. See	140–141, 142–143
curve, 80	also Separation anxiety disorder	socio-demographic correlates of
resampling variance estimation methods,	(SEPAD)	persistance, 141
18	AOO, 121, 125	subtypes, 135
Research Diagnostic Criteria, 3, 4	comorbidity, 130, 131	treatment, 148
Research Domain Criteria (RDoC), 6, 7 RMSEA. See Root Mean Square Error of	cross-national differences, 130	12-month, 361
Approximation (RMSEA)	with disability, 132 in DSM-III, 120	WMH surveys, 148 SRC. See Survey Research Center (SRC)
ROC curve. See Receiver Operating	methods, 121	SRS. See Simple random sampling (SRS)
Characteristic curve (ROC curve)	phenomenology, 130	standard programmes in statistical analysis
role impairment, 26–27, 46–49, 107–113,	prevalence, 121, 122–123	software packages, 18
250, 254	role impairment, 121, 126–127	statistical analysis methods, 30
associated with 12-month DSM-IV	socio-demographic correlates, 125,	comorbidity among disorders, 34–35
and DSM-5 generalized anxiety	128–129, 130	cumulative lifetime probability
disorder, 84	treatment, 130	distribution estimation, 31-32
AUDs, 234, 237	12-month, 358-359	decomposing socio-demographic
days-out-of-role due to 12-month	WMH data on epidemiology of, 130	correlates of 30-day prevalence, 34

social phobia, 120

383

specific phobia by, 360

disorder-specific analyses, 35



Cambridge University Press 978-1-107-11570-5 — Mental Disorders Around the World Edited by Kate M. Scott , Peter de Jonge , Dan J. Stein , Ronald C. Kessler Index

**More Information** 

## Index

statistical analysis methods (cont.) prevalence of outcome variables, 30-31 socio-demographic correlates of lifetime disorders, 32-34 treatment of 12-month disorders, 35 Structured Clinical Interview for DSM-IV (SCID), 80, 136, 169 study-specific training, 30 substance-use disorders (SUDS), 225 subthreshold BPD 57 childhood ADHD, 204 SUDS. See Substance-use disorders (SUDS) survey cost structures, 13 population, 10 response rates, 14 Survey Research Center (SRC), 10 survivor bias, 54 symptom persistence, 136, 140 systematic monitoring, 30 target populations, 10-13 task comprehension, 22 Taylor series linearization method, 18 TE. See Traumatic event (TE) thirty-day prevalence, 31 decomposing socio-demographic correlating, 34 of PTSD, 157 three-stage designs, 14 threshold childhood ADHD, 204 time-lagged associations between PEs and mental disorders, 294-295 time-since-onset (TSO), 25, 63 'train-the-trainer' session, 29 translation, 27-28 traumatic event (TE), 153, 154 associations with onset of IED, 187, 191 categories, 154 prevalence, 154 treatment/service use, 27, 49 methods, 314-315 type, 315, 316 interaction between disorder severity and socio-demographic characteristics, 319

likelihood of receiving treatment across service sectors, 315, 317 socio-demographic characteristics, 315, 318-319 TSO. See Time-since-onset (TSO) 12-month/lifetime ratio, 289 12-month ADHD adult ADHD treatment, 206 disability in, 199, 201 treatment of, 201-203 12-month prevalence, 31, 34 of CD, 211 of PTSD, 154 12-month treatment, 27, 35, 69, 203, 275 two-part interview design, 14-15 two-stage design, 13 unbiasedness, 17 unipolar mood disorders, 82 United Nations Office on Drugs and Crime (UNODC), 243 United States (US), 41, 94, 153 universal health coverage, 332 UNODC. See United Nations Office on Drugs and Crime (UNODC) unspecified bipolar disorder, 57 upper-middle income countries, 354, 364, 376 WDR. See World Drug Report (WDR) Weighted Least Squares estimation for categorical data (WLSMV), 301 weighting, 16 construction of analysis weights, 16 - 18WMH poststratification, 17 Westernized, educated, industrialized, rich, and democratic countries (WEIRD countries), 120 WFS programme. See World Fertility Survey programme (WFS programme)

WHO. See World Health Organization

(WHO)

WHO Disability Assessment Schedule (WHO-DAS), 199 WLSMV. See Weighted Least Squares estimation for categorical data (WLSMV) WMH. See World Mental Health (WMH) World Drug Report (WDR), 243 World Fertility Survey programme (WFS programme), 9 World Health Organization (WHO), 1, 4, 9, 41, 168, 209, 223, 287, 314, 332 World Mental Health (WMH), 1, 3, 5, 9, 41, 57, 80, 135, 168, 182, 223, 243-244, 263, 286, 314, 324 collaborators, 28 Data Collection Coordination Centre, 29 data on epidemiology of SAD, 132 interviewer training and quality control monitoring, 28-30 measures mental disorders, 19-25 pretesting, 28 role impairment, 26-27 socio-demographics, 25-26 translation, 27-28 treatment/service use, 27 sampling, 9 characteristics by World Bank Income categories, 11-12 complex sample designs for WMH surveys, 13-14 error and inference from WMH survey data, 18-19 frames, 13 nonresponse surveys, 15-16 target populations, 10-13 two-part interview design, 14-15 weighting, 16-18 statistical analysis methods, 30-35 Surveys Initiative, 9 YDLs. See Years lived with disability (YDLs)