

Demographics

COVID-19 Pediatric Joint Group Discussion Recommended Measures

Sex

What was the participant's sex assigned at birth?

- Female
 Male
 Intersex
 None of these describe the participant
 Prefer not to answer

Age

[> 2 years] What is the participant's current age in years?

_____ (years)

[< 2 years] What is the participant's current age in months?

_____ (months)

Gestational age at birth (Tier 2)

(Ages 0-2 years)

If < 2 years of age, what was the participant's gestational age at birth (in weeks)?

_____ (weeks)

- Unknown
 Refused

Ethnicity

Is the participant of Hispanic, Latino, or Spanish origin?

- No, not of Hispanic, Latino, or Spanish origin
 Yes, of Hispanic, Latino, or Spanish origin
 Prefer not to say

Race

What is the participant's race? Mark one or more boxes

- American Indian or Alaska Native
 Asian
 Black or African American
 Native Hawaiian or Other Pacific Islander
 White
 Some other race
 Prefer not to answer

Zip Code

What is the participant's 5-digit zip code?

Additional Guidance: Participant's zip code and birth date are protected health information, please refer to the guidance document for more information.

Gender Identity (Tier 2)

Additional Guidance: The Working Group consulted the NIH Sexual & Gender Minority Research Office (SGMRO) to ascertain whether there is an established measure of Gender Identity validated in children as the PhenX P11801 Measure is for participants 18+ years.

As of now, there is not a preferred pediatric-specific validated measure, and this remains an important gap in the SGM data collection repertoire. There are many ongoing efforts to address this gap, including the work of the Measuring Sexual Orientation and Gender Identity (SOGI) Research Group's Youth Subgroup, and an in-progress NIH-commissioned consensus report from the National Academies of Sciences, Engineering, and Medicine on collecting sex, gender identity, and sexual orientation data. One measure used in ages 9-10 in the ABCD Study® is presented below, and this data element will be amended if future guidance on the topic is updated:

Child Self-Report (Ages 9+)

Are you transgender?

- Yes
- Maybe
- No
- Did not understand

Parent Report about Child (Ages 9+)

Is your child transgender?

- Yes
- Maybe/dont know
- No
- Decline to answer