**WIHS DATA REQUEST INSTRUCTIONS**

Dear WIHS Investigators,

Congratulations on the approval of your concept sheet! In order to receive WIHS data, please follow the steps described below:

* **Before you fill out your data request, please make sure that you have completed Atlanta WIHS Investigator Orientation**. If you have never done the Orientation, please email grubtso@emory.edu to schedule.
* Complete Parts A - C of the Data Request Form (found at the end of this document).
* Please, follow instructions below to complete Part D of data request:
1. In the Part D, fill out columns (1) through (4) based on the information from your concept sheet as shown in the Example below:

 **Example of Filled Part D Table**

|  |  |  |  |
| --- | --- | --- | --- |
| **Variable name as used in CS** | **Variable Time Frame** | **Related WIHS forms, if known** | **Variable names as used in WIHS codebooks** |
| **Within 6 months of requested visits?****(Yes/No)** | **Ever while in WIHS?****(Yes/No)** | **Ever in lifetime?** **(Yes/No)** |
| **(1)** | **(2)** | **(3)** | **(4)** | **(5)** | **(6)** |
| Marital status (married) | Yes | No | No | F21 | MAR\_SD |
| Diabetes (self-report of diagnosis) | Yes | Yes | Yes | F20, F22HX | MCBSNR MCBSMH |

* 1. In column (1) indicate the name of your variable as it is used in your concept sheet (e.g., “participants’ age,” “diabetes status”) and the way you define it.
	2. In columns (2) – (4), identify the time-frames of your variables**. Since WIHS is a longitudinal study, it is extremely important to define the time-frame for each of the requested variables**. The following time-frames are available for WIHS data: at visit or during past six months prior the visit, ever while in WIHS, and ever during the lifetime. For example, when participants first enroll in WIHS, they are asked as a baseline question whether they were ever diagnosed with sexually-transmitted infections (STI); after that, they are asked at every WIHS visit whether they were diagnosed with STIs within the six months prior the visit. As a result, if you are interested in STIs, you may request data on participant’s STIs within six months of specific visits, or ever while in WIHS (a summary variable that can be programmed based on all available visits) or ever in lifetime (a summary variable programmed based on all available visits plus a baseline STI variable). Please, fill this information in columns (2)-(4). For example, you may only be interested whether or not participant was married during the requested visits and not whether she was ever married while in WIHS or in the lifetime. In this case, you will indicate “Yes” in column (2) and “No” in columns (3) and (4).
1. In order to fill columns (5) and (6) of Part D, please review WIHS visit forms and codebooks available on WIHS admin website: <https://statepiaps8.jhsph.edu/apollo/studies/wihs/webroot/html/>
	1. In column (5), indicate the names of WIHS forms where you think your variables are located. During your concept sheet writing process, you had to get familiar with WIHS forms, making sure that the data you intended to use were available. It is therefore likely that you know the names of at least key forms where your main variables are coming from. Please, indicate the form names, where possible. For example, participants’ diabetes status at the baseline can be found in the form F20, and during the follow-up visits – in the form F22HX. The forms can be found under “Protocol” on WIHS admin website.
	2. You may leave column (6) blank at this point. However, if you happen to know specific WIHS variables names as they are used in WIHS codebooks, please include them as well. WIHS codebooks with variable names can be found on WIHS admin website under “Data” menu.
	3. Email me a partially filled (as described above) Data Request Form. I will review the form and schedule a follow-up meeting/call with you. I may also refer you to specific WIHS forms and codebooks to be additionally reviewed before our meeting.
	4. During our meeting, we will go over your data request and relevant codebooks, finalizing the list of specific WIHS variables. As a result of the meeting, you will complete column (6) of the table and review and sign the complete Data Request Form (Part E).

Please, also keep in mind the following:

1. Your data request should be based on the approved concept sheet and be within its scope. It means that you can request additional variables that were not explicitly mentioned in your CS if these variables are not connected to new research questions or hypotheses. In most cases, thus, additional data may only be limited to control variables.
2. Please, note that WIHS data exists in the form of numerous separate data tables corresponding to related WIHS forms. Please, also keep in mind that WIHS forms were changing over time so that one variable, longitudinally, may be located in multiple tables. Given the volume and complexity of WIHS data, it takes considerable time and effort to find specific variables of interest to investigators and extract them from WIHS data tables. Please, allow at least two weeks between the date you sign a complete data request form and your receipt of WIHS data. Thank you for your help!

Best,

Anna Rubtsova

Data Manager, Atlanta WIHS

grubtso@emory.edu Version: 02/27/2017

**ATLANTA WIHS DATA REQUEST FORM**

**Part A. CS Information:**

**Date:** Click here to enter text.

**Investigators:** Click here to enter text.

**Contact info: a) email** Click here to enter text. **b) phone** Click here to enter text.

**CS Title:** Click here to enter text.

**CS Readme #:** Click here to enter text.

**Part B. Before Completing the Request:**

1. Have you read the current data request instructions listed at the beginning of this document? (Note that the instructions have been updated on 02/27/2017) Yes, I’ve read the instructions [ ]

2. Have you completed Atlanta WIHS Investigator Orientation? [ ]  Yes. Date Click here to enter text.

Please, note that if this is your first data request you must have the orientation completed before this request will be processed. Please, email grubtso@emory.edu to schedule.

**Part C. Data Description:**

1. Is your study [ ]  longitudinal or [ ]  cross-sectional?

2. List specific WIHS visit numbers, for which you request your data Click here to enter text.

3. Do you want data from [ ]  HIV+ women? [ ]  HIV uninfected women? [ ]  HIV seroconverters?

 [ ]  other group? (specify) Click here to enter text.

4. What are your inclusion and exclusion criteria listed in the approved CS? Click here to enter text.

5. Do you need any WIHS variables to select WIHS participants meeting your inclusion/exclusion criteria?

 [ ]  No [ ]  Yes (if yes, do not forget to include these variables in the Part D Table)

6. Do you want data from [ ]  all WIHS sites? [ ]  specific sites (specify)? Click here to enter text.

7. Do you plan to do analyses [ ]  yourself? [ ]  using Atlanta WIHS biostatistician, Dr Mehta?

 [ ]  using other biostatistician? (specify) Click here to enter text.

8. In which format do you need the data? [ ]  vertical [ ]  horizontal

9. In which format do you want your dataset? [ ]  SAS [ ]  SPSS [ ]  Stata [ ]  Other (specify) Click here to enter text.

10. Do you need any summary variables programmed? [ ]  No [ ]  Yes (specify) Click here to enter text.

**Part D. Variables Description:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Variable name as used in CS** | **Variable Time Frame** | **Related WIHS forms, if known** | **Variable names as used in WIHS codebooks****(**please, list the names in all caps without commas or any other punctuation as shown in the Example) |
| **Within 6 months of requested visits?****(Yes/No)** | **Ever while in WIHS?****(Yes/No)** | **Ever in lifetime?** **(Yes/No)** |
|  |  |  |  |  |  |

**Part E. Data Request Review:**

I have reviewed the information in this data request form and the list of variables as defined in WIHS codebooks (column 6 of the above table) and verify that this information is final and correct. I understand that subsequent additions of variables after DM has begun working on the dataset or issued the dataset for analyses will result in considerable delays in CS implementation.

**Concept PI signature**  Click here to enter text. **Date** Click here to enter text.

For Office Use Only:

**Part F. DM Notes:**