| Name | **The Netherlands Mental Health Survey and Incidence Study-2 (NEMESIS-2)** |
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| Description | NEMESIS-2 is a longitudinal study that examines the prevalence, incidence, course and consequences of common mental disorders (mood, anxiety and substance use disorders) in the Dutch adult general population. It replicates and expands the first Netherlands Mental Health Survey and Incidence Study (NEMESIS-1) conducted from 1996 to 1999. |
| Location | The Netherlands (full nation) |
| Lead Institute | Trimbos Institute |
| Cohort size | 6646 participants at baseline |
| Start Cohort | 2007-2009 |
| Follow-up | Approximately every 3 years<br>2007-2009 baseline wave<br>2010-2012 first follow-up wave<br>2013-2015 second follow-up wave<br>2016-2018 third follow-up wave |
| Variables and Measurement methods | Measurements: through interviews<br><br>Demographics<br>• Sex<br>• Age<br>• Educational Level (including partner)<br>• Living situation<br>• Employment status (including partner)<br>• Income (including partner)<br>• Income changes (including partner)<br>• Subjective social status<br>• Ethnicity(only assessed at baseline)<br>• Religion(only assessed at baseline)<br>• Urbanization level of place of living(only assessed at baseline)<br>• Debt<br><br>Mental health<br>Internalizing and substance use disorders<br>• Depressive disorders: major depressive disorder, dysthymia (including illness course)<br>• Bipolar disorder<br>• Anxiety disorders: panic disorder, agoraphobia, social phobia, generalized anxiety disorder (including illness course)<br>• Specific phobia<br>• Alcohol abuse and alcohol dependence<br>• Drug abuse and drug dependence<br><br>Externalizing disorders<br>• ADHD (also in adulthood)<br>• Conduct disorder<br>• Oppositional-defiant disorder<br><br>Other mental health symptoms (not disorders)<br>• Suicidality<br>• Psychotic symptoms |

- Antisocial personality disorder screener
- Borderline personality disorder screener
- Sleeping problems (insomnia)
- Psychological distress screener
- Depressive symptoms
- Anxiety symptoms
- Smoking status (including stopping and rate of addiction)
- Gambling
- Cognitive problems
- Letter digit symbol test (LDST)
- Positive mental health

Physical health
- Physical disorders (including number of consults and experienced burden of disorder)
- Physical activity (including engaging in active pursuits)
- Inactive (seating) behavior
- Body mass index
- Pain

Vulnerability indicators
- Neuroticism
- Extraversion
- Conscientiousness
- Childhood trauma
- Mental health problems of biological parent(s) and partner
- Mental health problems of own children (including smoking, bullying, ADHD, and behavioral problems)

Precipitating and sustaining indicators
- Recent life events
- Loneliness
- Social support
- Informal care (including given and received care)
- Discrimination

Functioning
- General functioning
- Functional impairment: disorder specific
- Workloss: absenteeism and presenteism
- Voluntary work
- Working conditions and psychological burdening of work (burnout)
- Interviewer observation (including physical appearance of respondent and impression of care of living space)

Help seeking behavior
- Health care use for mental health or addiction problems: in general
- Therapy compliance
- Health care use: disorder specific
- Medication use
- Medication compliance
- Unmet health care need

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| | • Attitude towards psychiatric patients<br>• Attitude towards professional treatment<br><br>Sexuality<br>• Sexual behavior and sexual orientation (including age of discovering homosexuality and age of coming out)<br>• Sexual abuse<br>• Sexual problems (dissatisfaction with sexual life, sex addiction)<br>• Health care use for sexual problems<br><br>Violence<br>• Violence in partner relationships<br>• Violence towards own children<br>• Violence in general<br><br>Other<br>• One's own mental health perception<br>• Dietary habits<br>• Engaging in social and cultural activities<br>• Perceived neighborhood characteristics (including criminality)<br>• Quality of life on specific life areas<br>• Jumping to conclusion (Beads task) |
| Availability and Type of -omic data | Only saliva data is obtained and stored. |
| Design paper | de Graaf et al., 2005 |
| Website | www.nemesis-2.nl/ |