

# EBTDC MAP Measurement Resources

## **Columbia Impairment Scale (CIS):**

**Parent Version:**

[http://www.dhs.state.il.us/OneNetLibrary/27897/documents/Mental%20Health/yolandalinares/CI CIS.pdf](http://www.dhs.state.il.us/OneNetLibrary/27897/documents/Mental%20Health/yolandalinares/CI%20CIS.pdf)

**Parent Version (Spanish):**

[http://www.dhs.state.il.us/OneNetLibrary/27897/documents/Mental%20Health/yolandalinares/CI SoPoSpanish.pdf](http://www.dhs.state.il.us/OneNetLibrary/27897/documents/Mental%20Health/yolandalinares/CI%20SoPoSpanish.pdf)

**CIS Scoring:** Each item on the CIS is scored 0 to 4. To get a total score, add the scores for each of the thirteen items. The total score should fall somewhere between 0 and 52. Any child with a parent CIS score of 15 or greater can be considered impaired.

## **UCLA PTSD Reaction Index (PTSD-RI):**

To purchase the PTSD-RI visit <http://oip.ucla.edu/ptsd-reaction-index-instrument-licenses>

## **Strength and Difficulties Questionnaire (SDQ):**

**SDQ:** <http://www.sdqinfo.org/py/sdqinfo/b0.py>

**SDQ Scoring:** <http://www.sdqscore.org/Amber>

## **Depression: Patient Health Questionnaire (PHQ-9):**

**General Link:** <http://www.phqscreeners.com/>

## **Revised Child Anxiety and Depression Scale**

### **(RCADS):**

**Parent Version (English):** <http://www.childfirst.ucla.edu/RCADS-P%202009.pdf>

**Parent Version (Spanish):** <http://www.childfirst.ucla.edu/RCADS-P%20Spanish.pdf>

**Website:** <http://www.childfirst.ucla.edu/Resources.html>

**Youth Version:**

[https://www.practicewise.com/Portals/0/Projects/NY%20EBTDC/RCADS\\_Youth.pdf](https://www.practicewise.com/Portals/0/Projects/NY%20EBTDC/RCADS_Youth.pdf)

**Youth Version (Spanish):** <http://www.childfirst.ucla.edu/RCADS%20Spanish.pdf>

**RCADS Scoring Program:**

**Parent and Youth Versions:** <http://www.childfirst.ucla.edu/Resources.html>

# Additional Measurement Resources:

## **Anxiety:**

**Generalized Anxiety Disorder – 7 (GAD-7):** GAD-7 is a sensitive self-administrated test to assess generalized anxiety disorder, normally used in outpatient and primary care settings. However, it cannot be used as replacement for clinical assessment and additional evaluation should be used to confirm a diagnosis of GAD.

**Direct Link:** <http://www.integration.samhsa.gov/clinical-practice/GAD708.19.08Cartwright.pdf>

**For scoring and other versions (and access to PHQ-9) and language options visit**

<http://www.phqscreeners.com/>

## **Screen for Child Anxiety Related Emotion Disorders (SCARED):**

The *SCARED* is a child and parent self-report instrument used to screen for childhood anxiety disorders including general anxiety disorder, separation anxiety disorder, panic disorder, and social phobia. In addition, it assesses symptoms related to school phobias.

**Ages:** 6-18

**Direct Link:** <http://www.midss.org/sites/default/files/scaredchild1.pdf>

**Scoring:** <http://www.midss.org/content/screen-child-anxiety-related-disorders-scared>

**Spence Children's Anxiety Scale (SCAS):** The Spence Children's Anxiety Scale was developed to assess the severity of anxiety symptoms broadly in line with the dimensions of anxiety disorder proposed by the DSM-IV. The scale assesses six domains of anxiety including generalized anxiety, panic/agoraphobia, social phobia, separation anxiety, obsessive compulsive disorder and physical injury fears. It is designed to be relatively easy and quick for children to complete, normally taking only around 10 minutes to answer the questions. Young people are asked to rate the degree to which they experience each symptom on a 4-point frequency scale.

**Ages:** 7-19

**Direct Link (Child Version):** <http://www.scaswebsite.com/docs/scas.pdf>

**Scoring:** [http://www.scaswebsite.com/index.php?p=1\\_7](http://www.scaswebsite.com/index.php?p=1_7)

**Children Yale-Brown Obsessive Compulsive Scale (CY-BOCS):** The CY-BOCS is the instrument of choice for assessing symptom severity in older children diagnosed with obsessive-compulsive disorder (OCD).

**Ages:** 6-17

**Direct Link:** <http://www.cappcnny.org/home/media/CYBOCS.pdf>

**Penn State Worry Questionnaire for Children (PSWQ-C):** The PSWQ-C is a 14-item self-report questionnaire designed to assess worry in children and adolescents. The questionnaire was designed to be comprehensible to children at the second grade reading level and above.

**Ages:** 7-17

**Direct Link:** <http://www.childfirst.ucla.edu/PSWQ-C.pdf>

**Scoring:** <http://www.childfirst.ucla.edu/Scoring%20of%20the%20PSWQ-C.pdf>

## **Trauma:**

**The Child PTSD Symptom Scale (CPSS):** The CPSS is a 26-item self-report measure that assesses PTSD diagnostic criteria and symptom severity in children ages 8 to 18.

**Ages:** 8-18

**Website:** <http://www.ptsd.va.gov/professional/assessment/child/cpss.asp>

**To obtain scale, please email:**

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University of Pennsylvania  
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Philadelphia, PA 19104  
Phone: (215) 746-3327  
Email: [foa@mail.med.upenn.edu](mailto:foa@mail.med.upenn.edu)

**The Pediatric Emotional Distress Scale (PEDS):** This 21-item parent-report measure was designed to rapidly assess and screen for elevated symptomatology in children following exposure to a stressful and/or traumatic event.

**Ages:** 2-10

**Website:** <http://www.nctsnct.org/content/pediatric-emotional-distress-scale>

**To obtain scale, please email:**

Conway Saylor, PhD  
Department of Psychology  
The Citadel  
171 Moultrie Avenue, Charleston, SC 29409  
[conway.saylor@citadel.edu](mailto:conway.saylor@citadel.edu)

## **Depression:**

**Center for Epidemiological Studies Depression Scale for Children (CES-DC):** The Center for Epidemiological Studies Depression Scale for Children (CES-DC) is a 20-item self-report depression inventory with possible scores ranging from 0 to 60.

**Ages:** 6-23

**Direct Link:** [https://brightfutures.org/mentalhealth/pdf/professionals/bridges/ces\\_dc.pdf](https://brightfutures.org/mentalhealth/pdf/professionals/bridges/ces_dc.pdf)

**Depression Self Rating Scale for Children (DSRSC):** The DSRSC is a depression self-rating scale for children and might be a useful tool for screening of depressive symptoms, at least in clinical settings.

**Ages:** 8-14

**Direct Link:** <http://www.scalesandmeasures.net/files/files/Birleson%20Self-Rating%20Scale%20for%20Child%20Depressive%20Disorder.pdf>

## **Disruptive Behavior:**

**Child and Adolescent Disruptive Behavior Inventory (CADBI):** The CADBI Screener is a brief questionnaire consisting of 25 items from the oppositional to peers, oppositional to adults, and the hyperactivity/impulsivity scales from the CADBI

**Website:** <http://measures.earlyadolescence.org/measures/view/40/>

**Teacher:** [http://measures.earlyadolescence.org/media/upload/CADBI2v3\\_Teacher\\_7173490.pdf](http://measures.earlyadolescence.org/media/upload/CADBI2v3_Teacher_7173490.pdf)

**Parent:**

[http://measures.earlyadolescence.org/media/upload/CADBI2v3\\_Parent\\_English\\_1986912.pdf](http://measures.earlyadolescence.org/media/upload/CADBI2v3_Parent_English_1986912.pdf)

**Parent (Spanish):**

[http://measures.earlyadolescence.org/media/upload/CADBI2v3\\_Parent\\_Spanish\\_2425933.pdf](http://measures.earlyadolescence.org/media/upload/CADBI2v3_Parent_Spanish_2425933.pdf)

## **Eating Disorders:**

**Eating Attitudes Test-26 (EAT-26):** The EAT-26 can be used in a non-clinical as well as a clinical setting not specifically focused on eating disorders. It can be administered in group or individual settings and is designed to be administered by mental health professionals, school counselors, coaches, camp counselors, and others with interest in gathering information to determine if an individual should be referred to a specialist for evaluation for an eating disorder

**Ages:** 16-18

**Website Link for Access Permission:** <http://www.eat-26.com/permission.php>

**Scoring:** <http://www.eat-26.com/scoring.php>

**Children's Eating Attitude Test (chEAT):** A modified version of the Eating Attitudes Test (EAT). It asks about perceived body image, obsessions/preoccupation with food, and dieting practices.

**Ages:** 8-13

**Direct Link:** <http://www.1000livesplus.wales.nhs.uk/sitesplus/documents/1011/ChEAT.pdf>

## **Mania:**

**Parent Version of Young Mania Rating Scale (P-YMRS):** The P-YMRS consists of eleven questions that parents are asked about their child's present state. The original rating scale (Young Mania Rating Scale) was developed to assess severity of symptoms in adults hospitalized for mania. It has been revised in an effort to help clinicians such as pediatricians determine when children should be referred for further evaluation by a mental health professional (such as a child psychiatrist), and also to help assess whether a child's symptoms are responding to treatment. The scale is NOT intended to diagnose bipolar disorder in children (that requires a thorough evaluation by an experienced mental health professional, preferably a board-certified child psychiatrist)

**Ages:** 5-17

**Direct Link:** <http://www.healthyplace.com/images/stories/bipolar/p-ymrs.pdf>

**Scoring:** [http://www.cappcnyc.org/home/media/ymrs\\_parent\\_scoring.pdf](http://www.cappcnyc.org/home/media/ymrs_parent_scoring.pdf)

**Child Mania Rating Scale – Parent Version:** The Child Mania Rating Scale (CMRS) is a parent screening instrument for mania, based on DSM-IV symptoms.

**Ages:** 5-17

**Direct Link:** <http://www.dbsalliance.org/pdfs/ChildManiaSurvey.pdf>

**Scoring:**

[http://www.dbsalliance.org/site/PageServer?pagename=education\\_screeningcenter\\_childmania](http://www.dbsalliance.org/site/PageServer?pagename=education_screeningcenter_childmania)

## **Overall Mental Health:**

### **Brief Problem Checklist:**

**Ages:** 7-13

**Child:** <http://www.childfirst.ucla.edu/Brief%20Problem%20Checklist%20-%20Child.pdf>

**Parent:** <http://www.childfirst.ucla.edu/Brief%20Problem%20Checklist%20-%20Parent.pdf>

### **The Ohio Scale (Ohio Youth Problems, Functioning, and Satisfaction**

**Scales):** The *Ohio Scales* are instruments developed to measure outcomes for youth ages 5 to 18 who receive mental health services. The Short Forms of the *Ohio Scales* consist of 4 domains: the 20-item *Functioning Scale*, the 4-item *Hopefulness Scale*, the 4-item *Satisfaction Scale*, the 20-item *Problem Severity Scale*, and the *Restrictiveness of Living Scale* for agency workers.

**Ages:** 5-18

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**Website:** <https://sites.google.com/site/ohioscales/home>

**Peabody Treatment Progress Battery:** Provides a cohesive, comprehensive, and evidence-based approach to enhancing mental health services for youths aged 11-18 years. The battery includes eleven clinically relevant measures of key mental health outcomes and clinical processes. The measures, especially with their repeated use, offer clinicians systematic feedback on their clients, both individually and in relation to other clients served.

**Ages:** 11-18

#### **Manual (Contains description, explanation, and measure within document):**

[http://peabody.vanderbilt.edu/docs/pdf/cepi/ptpb\\_2nd\\_ed/PTPB\\_2010\\_Entire\\_Manual\\_UPDATE\\_31212.pdf](http://peabody.vanderbilt.edu/docs/pdf/cepi/ptpb_2nd_ed/PTPB_2010_Entire_Manual_UPDATE_31212.pdf)

**Pediatric Symptom Checklist (PSC):** A brief screening questionnaire that is used by pediatricians and other health professionals to improve the recognition and treatment of psychosocial problems in children.

**Ages:** 3-18

**Website:** [http://www.massgeneral.org/psychiatry/services/psc\\_home.aspx](http://www.massgeneral.org/psychiatry/services/psc_home.aspx)

**Parent:** <http://www.massgeneral.org/psychiatry/assets/PSC-35.pdf>

**Parent (Spanish):** [http://www.massgeneral.org/psychiatry/assets/PSC\\_Spanish\\_1.pdf](http://www.massgeneral.org/psychiatry/assets/PSC_Spanish_1.pdf)

**Youth:** [http://www.massgeneral.org/psychiatry/assets/PSCY-35\\_English.PDF](http://www.massgeneral.org/psychiatry/assets/PSCY-35_English.PDF)

**Other Languages:** [http://www.massgeneral.org/psychiatry/services/psc\\_forms.aspx](http://www.massgeneral.org/psychiatry/services/psc_forms.aspx)

**References:**

Beidas, R. S., Stewart, R. E., Walsh, L., Lucas, S., Downey, M. M., Jackson, K., & Mandell, D.

S. (2015,). Free, brief, and validated: Standardized instruments for low-resource mental health settings. *Cognitive and Behavioral Practice*, 22(1), 5–19