Screen for Child Anxiety Related Disorders (SCARED)—Child Version

Name _____ Date _____

CHILD Version—Pages 1 and 2 (to be filled out by the CHILD)

Directions: Below is a list of sentences that describe how people feel. Read each phrase and decide if it is "Not True or Hardly Ever True" or "Somewhat True or Sometimes True" or "Very True or Often True" for you. Then, for each sentence, check the box that corresponds to the response that seems to describe you *for the last 3 months*.

	0 Not True or Hardly Ever True	1 Somewhat True or Sometimes True	2 Very True or Often True	
1. When I feel frightened, it is hard to breathe.	☐	☐	☐	PA/SO
2. I get headaches when I am at school.	☐	☐	☐	SCH
3. I don't like to be with people I don't know well.	☐	☐	☐	SOC
4. I get scared if I sleep away from home.	☐	☐	☐	SEP
5. I worry about other people liking me.	☐	☐	☐	GA
6. When I get frightened, I feel like passing out.	☐	☐	☐	PA/SO
7. I am nervous.	☐	☐	☐	GA
8. I follow my mother or father wherever they go.	☐	☐	☐	SEP
9. People tell me that I look nervous.	☐	☐	☐	PA/SO
10. I feel nervous with people I don't know well.	☐	☐	☐	SOC
11. I get stomachaches at school.	☐	☐	☐	SCH
12. When I get frightened, I feel like I am going crazy.	☐	☐	☐	PA/SO
13. I worry about sleeping alone.	☐	☐	☐	SEP
14. I worry about being as good as other kids.	☐	☐	☐	GA
15. When I get frightened, I feel like things are not real.	☐	☐	☐	PA/SO
16. I have nightmares about something bad happening to my parents.	☐	☐	☐	SEP
17. I worry about going to school.	☐	☐	☐	SCH
18. When I get frightened, my heart beats fast.	☐	☐	☐	PA/SO
19. I get shaky.	☐	☐	☐	PA/SO
20. I have nightmares about something bad happening to me.	☐	☐	☐	SEP
21. I worry about things working out for me.	☐	☐	☐	GA

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Name _____ Date _____

	0 Not True or Hardly Ever True	1 Somewhat True or Sometimes True	2 Very True or Often True	
22. When I get frightened, I sweat a lot.	☐	☐	☐	**PA/SO**
23. I am a worrier.	☐	☐	☐	**GA**
24. I get really frightened for no reason at all.	☐	☐	☐	**PA/SO**
25. I am afraid to be alone in the house.	☐	☐	☐	**SEP**
26. It is hard for me to talk with people I don't know well.	☐	☐	☐	**SOC**
27. When I get frightened, I feel like I am choking.	☐	☐	☐	**PA/SO**
28. People tell me that I worry too much.	☐	☐	☐	**GA**
29. I don't like to be away from my family.	☐	☐	☐	**SEP**
30. I am afraid of having anxiety (or panic) attacks.	☐	☐	☐	**PA/SO**
31. I worry that something bad might happen to my parents.	☐	☐	☐	**SEP**
32. I feel shy with people I don't know well.	☐	☐	☐	**SOC**
33. I worry about what is going to happen in the future.	☐	☐	☐	**GA**
34. When I get frightened, I feel like throwing up.	☐	☐	☐	**PA/SO**
35. I worry about how well I do things.	☐	☐	☐	**GA**
36. I am scared to go to school.	☐	☐	☐	**SCH**
37. I worry about things that have already happened.	☐	☐	☐	**GA**
38. When I get frightened, I feel dizzy.	☐	☐	☐	**PA/SO**
39. I feel nervous when I am with other children or adults and I have to do something while they watch me (for example: read aloud, speak, play a game, play a sport).	☐	☐	☐	**SOC**
40. I feel nervous when I am going to parties, dances, or any place where there will be people that I don't know well.	☐	☐	☐	**SOC**
41. I am shy.	☐	☐	☐	**SOC**

For children ages 8 to 11, it is recommended that the clinician explain all questions, or have the child answer the questionnaire sitting with an adult in case they have any questions.

See: Birmaher, B., Brent, D. A., Chiappetta, L., Bridge, J., Monga, S., & Baugher, M. (1999). Psychometric properties of the Screen for Child Anxiety Related Emotional Disorders (SCARED): a replication study. Journal of the American Academy of Child and Adolescent Psychiatry, 38(10), 1230–6.

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To be completed by CLINICIAN:

Child's name _____ Date _____

SCORING:

A total score of ≥ **25 may** indicate the presence of an **Anxiety Disorder**. Scores higher than 30 are more specific.	**TOTAL=** 0
A score of **7** for items 1, 6, 9, 12, 15, 18, 19, 22, 24, 27, 30, 34, 38 **may** indicate **Panic Disorder** or **Significant Somatic Symptoms**.	**PA/SO=** 0
A score of **9** for items 5, 7, 14, 21, 23, 28, 33, 35, 37 **may** indicate **Generalized Anxiety Disorder**.	**GA=** 0
A score of **5** for items 4, 8, 13, 16, 20, 25, 29, 31 **may** indicate **Separation Anxiety Disorder**.	**SEP=** 0
A score of **8** for items 3, 10, 26, 32, 39, 40, 41 **may** indicate **Social Phobic Disorder**.	**SOC =** 0
A score of **3** for items 2, 11, 17, 36 **may** indicate **Significant School Avoidance Symptoms**.	**SCH=** 0

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The recommendations in this resource do not indicate an exclusive course of treatment or serve as a standard of medical care. Variations, taking into account individual circumstances, may be appropriate. Original resource included as part of *Caring for Children With ADHD: A Practical Resource Toolkit for Clinicians*, 3rd Edition.

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