

SCARED – Child and Teen Version
(Birmaher, Kheterpal, Cully, Brent and McKenzie, 1995)



Name: _____ Date: _____

Directions: Below is a list of statements that describe how people feel. Read each statement carefully and decide if it is "Not True or Hardly Ever True" or "Somewhat True or Sometimes True" or "Very True or Often True" for your child. Then for each statement, fill in one circle that corresponds to the response that seems to describe your child for the last 3 months . Please respond to all statements as well as you can, even if some do not seem to concern your child.		0 Not True Hardly Ever True	1 Somewhat True or Sometimes True	2 Very True or Often True	For Office Use Only				
					1	2	3	4	5
1.	When I feel frightened, it is hard to breathe.	○	○	○					
2.	I get headaches when I am at school.	○	○	○					
3.	I don't like to be with people I don't know well.	○	○	○					
4.	I get scared if I sleep away from home.	○	○	○					
5.	I worry about other people liking me.	○	○	○					
6.	When I get frightened, I feel like passing out.	○	○	○					
7.	I am nervous.	○	○	○					
8.	I follow my mother or father wherever they go.	○	○	○					
9.	People tell me that I look nervous.	○	○	○					
10.	I feel nervous with people I don't know well.	○	○	○					
11.	I get stomachaches at school.	○	○	○					
12.	When I get frightened, I feel like I am going crazy.	○	○	○					
13.	I worry about sleeping alone.	○	○	○					
14.	I worry about being as good as other kids.	○	○	○					
15.	When I get frightened, I feel like things are not real.	○	○	○					
16.	I have nightmares about something bad happening to my parents.	○	○	○					
17.	I worry about going to school.	○	○	○					
18.	When I get frightened, my heart beats fast.	○	○	○					
19.	I get shaky.	○	○	○					
20.	I have nightmares about something bad happening to me.	○	○	○					
					1	2	3	4	5

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		0 Not True Or Hardly Ever True	1 Somewhat True or Sometimes True	2 Very True or Often True	For Office Use Only				
					1	2	3	4	5
21.	I worry about things working out for me.	0	0	0					
22.	When I get frightened, I sweat a lot.	0	0	0					
23.	I am a worrier.	0	0	0					
24.	I get really frightened for no reason at all.	0	0	0					
25.	I am afraid to be alone in the house.	0	0	0					
26.	It is hard for me to talk with people I don't know well.	0	0	0					
27.	When I get frightened, I feel like I am choking.	0	0	0					
28.	People tell me that I worry too much.	0	0	0					
29.	I don't like to be away from my family.	0	0	0					
30.	I am afraid of having anxiety (or panic) attacks.	0	0	0					
31.	I worry that something bad might happen to my parents.	0	0	0					
32.	I feel shy with people I don't know well.	0	0	0					
33.	I worry about what is going to happen in the future.	0	0	0					
34.	When I get frightened, I feel like throwing up.	0	0	0					
35.	I worry about how well I do things.	0	0	0					
36.	I am scared to go to school.	0	0	0					
37.	I worry about things that have already happened.	0	0	0					
38.	When I get frightened, I feel dizzy	0	0	0					
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.)	0	0	0					
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.	0	0	0					
41.	I am shy.	0	0	0					
					1	2	3	4	5

SCARED Scoring – This page is for office use only – do not distribute to child/teen

Name: _____ Date: _____

Domains To calculate domain scores listed below: 1. Transfer the <i>value</i> (0, 1, or 2) from each endorsed item into the blank space in the “For Office Use Only” section on pages 1 and 2. 2. Sum the <i>values</i> in the appropriate boxes (1-5) at the bottom of pages 1 and 2. 3. Transfer the numbers to the columns on this table as indicated, add page 1 & 2 to obtain domain scores. 4. Add all of the domain scores to obtain the Total SCARED Score.	Transfer from Page 1	Transfer from Page 2	Page 1 + Page 2 =Domain Score
1. Panic Disorder/ or Significant Somatic Symptoms.			
2. Generalized Anxiety Disorder			
3. Separation Anxiety Disorder			
4. Social Anxiety Disorder			
5. Significant School Avoidance			
Total SCARED Score = Sum of Domain Scores			

Interpretation Guidelines:

A total score of **≥ 25** may indicate the presence of an **Anxiety Disorder**. Scores higher than 30 are more specific.

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**.

A score of **9** for items 5, 7, 14, 21, 23, 28, 33, 35, 37 may indicate **Generalized Anxiety Disorder**.

A score of **5** for items 4, 8, 13, 16, 20, 25, 29, 31 may indicate **Separation Anxiety Disorder**.

A score of **8** for items 3, 10, 26, 32, 39, 40, 41 may indicate **Social Anxiety Disorder**.

A score of **3** for items 2, 11, 17, 36 may indicate **Significant School Avoidance**.

**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.*

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