

# ANXIETY (SCAS-P)

Child's

Name \_\_\_\_\_

Age \_\_\_\_\_

Gender \_\_\_\_\_

Rater \_\_\_\_\_

Date \_\_\_\_\_

**Please select the answer that best describes your child.**

	Never (0)	Sometimes (1)	Often (2)	Always (3)
1 My child worries about things	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3 When my child has a problem, they complains of having a funny feeling in their stomach	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4 My child complains of feeling afraid	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18 When my child has a problem, they complain of their heart beating really fast	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20 My child worries that something bad will happen to them	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22 When my child has a problem, they feel shaky	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Total** \_\_\_\_\_

**Percentile**

(See Table 1) \_\_\_\_\_

See Table 2 for recommendations based on the %tile.

**These difficulties negatively impact my child's daily, social, school functioning and/or leisure activities.**

None ( ) A little ( ) A lot ( )

# ANXIETY (SCAS-P)

**Table 1. Percentile (Normative data based on Brazilian samples.)**

Total	6-9 Years		10-13 Years		14-17 Years	
	Male (%)	Female (%)	Male (%)	Female (%)	Male (%)	Female (%)
0	0	0	0	0	0	0
1	3	3	0	1	0	0
2	6	6	4	5	7	0
3	15	13	18	16	24	10
4	25	18	33	32	40	21
5	42	31	49	46	55	32
6	48	42	62	59	67	46
7	55	49	72	72	77	57
8	67	54	78	79	83	68
9	78	59	84	83	85	76
10	85	69	91	88	89	87
11	97	8	93	92	91	96
12	98	92	96	95	98	97
13	100	93	97	96	100	97
14	100	95	98	98	100	98
15	100	97	99	99	100	99
16	100	100	100	100	100	99
17	100	100	100	100	100	100
18	100	100	100	100	100	100

A. R. Simioni, G. Polanczyk, L. A. Rohde, and G. A. Salum. "Translating Measurement-Based Care to Clinical Practice in the Real World: A Stratified Targeted Dimensional Approach to Child and Adolescent Mental Health". In: medRxiv (2020)

**Table 2.**

%	Level	Recommendations
<70	Minimum	What the child is experiencing is less than what most people experience, no specific intervention is indicated, but mental health can still be improved by adopting healthy lifestyle habits such as engaging in physical activity and improving sleep habits.
70-89	Mild	The symptoms are considered mild. Physical activity, sleep hygiene, and talking to someone who is supportive. Consider reassessing the child's symptoms in about 3 months, to find out if these problems are still bothering the child or if they have disappeared over time. If in 3 months symptoms persist or increase, consider assessing the level of functional impairments in a more detailed assessment and effective ways to respond to the challenges.
90-95	Moderate	The symptoms are considered moderate. Physical activity, sleep hygiene, and talking to someone who is supportive are essential. Look for psychoeducational materials specific to your challenges to find coping strategies and reduce symptoms. Assess the impacts on daily functioning, interpersonal relationships, and schoolwork. Consider reassessing your symptoms again in 2 weeks to find out if these problems are still bothering the child or if they have disappeared over time. If in 2 weeks symptoms persist or increase, or if impairments in daily life become more obvious, consider an evaluation by healthcare professionals.
>95	Severe	The symptoms are considered severe. In addition to physical activity, sleep hygiene, talking to someone supportive and looking for psychoeducational materials, seek an evaluation by healthcare professionals to learn about appropriate treatment. This is especially important if daily functioning, interpersonal relationships, and schoolwork are affected. If the impairments are severe, evaluate risks of self-harm and aggression.

# PANIC ATTACK (SCAS-P)

Child's

Name \_\_\_\_\_

Age \_\_\_\_\_

Gender \_\_\_\_\_

Rater \_\_\_\_\_

Date \_\_\_\_\_

**Please select the answer that best describes your child.**

		Never (0)	Sometimes (1)	Often (2)	Always (3)
12	My child complains of suddenly feeling as if they can't breathe when there is no reason for this	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19	My child suddenly starts to tremble or shake when there is no reason for this	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25	My child feels scared if they have to travel in the car, or on a bus or train	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
27	My child is afraid of being in crowded places (shopping centers, the movies, buses, playgrounds)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
28	All of a sudden my child feels really scared for no reason at all	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
30	My child complains of suddenly becoming dizzy or faint when there is no reason for this	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32	My child's complains of them heart suddenly starting to beat too quickly for no reason	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
33	My child worries that they will suddenly get a scared feeling when there is nothing to be afraid of	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
34	My child is afraid of being in small closed places, like tunnels or small rooms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Total** \_\_\_\_\_

**Percent(%)tile**

(See Table 1) \_\_\_\_\_

See Table 2 for recommendations based on the %tile.

**These difficulties negatively impact my child's daily, social, school functioning and/or leisure activities.**

None ( )

A little ( )

A lot ( )

**Spence Children's Anxiety Scale - Parent Version**

<https://www.scaswebsite.com/> Spence and Waters (2004). A parent report measure of children's anxiety. Behaviour

Nauta, Scholing, Rapee, Abbott, Spence and Waters (2004). A parent report measure of children's anxiety. Behaviour Research and Therapy. 42 (7), 813-839

# PANIC ATTACK (SCAS-P)

**Table 1. Percentile (Normative data based on Brazilian samples.)**

Total	6-9Years		10-13Years		14-17Years	
	Male (%)	Female (%)	Male (%)	Female (%)	Male (%)	女 (%)
0	0	0	0	0	0	0
1	54	29	53	47	56	31
2	65	41	69	67	66	52
3	70	54	74	76	73	61
4	74	64	80	81	78	67
5	79	74	82	85	84	76
6	93	79	87	90	89	80
7	95	82	91	92	90	83
8	96	83	94	93	91	86
9	97	85	96	94	94	90
10	100	86	97	95	96	92
11	100	92	98	97	98	94
12	100	93	99	98	100	95
13	100	95	99	98	100	96
14	100	97	100	99	100	96
15	100	100	100	99	100	97
16	100	100	100	99	100	99
17	100	100	100	99	100	100
18~27	100	100	100	100	100	100

A. R. Simioni, G. Polanczyk, L. A. Rohde, and G. A. Salum. "Translating Measurement-Based Care to Clinical Practice in the Real World: A Stratified Targeted Dimensional Approach to Child and Adolescent Mental Health". In: medRxiv (2020)

**Table 2.**

%	Level	Recommendations
<70	Minimum	What the child is experiencing is less than what most people experience, no specific intervention is indicated, but mental health can still be improved by adopting healthy lifestyle habits such as engaging in physical activity and improving sleep habits.
70-89	Mild	The symptoms are considered mild. Physical activity, sleep hygiene, and talking to someone who is supportive. Consider reassessing the child's symptoms in about 3 months, to find out if these problems are still bothering the child or if they have disappeared over time. If in 3 months symptoms persist or increase, consider assessing the level of functional impairments in a more detailed assessment and effective ways to respond to the challenges.
90-95	Moderate	The symptoms are considered moderate. Physical activity, sleep hygiene, and talking to someone who is supportive are essential. Look for psychoeducational materials specific to your challenges to find coping strategies and reduce symptoms. Assess the impacts on daily functioning, interpersonal relationships, and schoolwork. Consider reassessing your symptoms again in 2 weeks to find out if these problems are still bothering the child or if they have disappeared over time. If in 2 weeks symptoms persist or increase, or if impairments in daily life become more obvious, consider an evaluation by healthcare professionals.
>95	Severe	The symptoms are considered severe. In addition to physical activity, sleep hygiene, talking to someone supportive and looking for psychoeducational materials, seek an evaluation by healthcare professionals to learn about appropriate treatment. This is especially important if daily functioning, interpersonal relationships, and schoolwork are affected. If the impairments are severe, evaluate risks of self-harm and aggression.

# SEPARATION ANXIETY (SCAS-P)

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

Rater \_\_\_\_\_ Date \_\_\_\_\_

**Please select the answer that best describes your child.**

		Never (0)	Sometimes (1)	Often (2)	Always (3)
5	My child would feel afraid of being on their own at home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8	My child worries about being away from us/me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11	My child worries that something awful will happen to someone in our family	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14	My child is scared if they have to sleep on their own	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15	My child has trouble going to school in the mornings because they feel nervous or afraid	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38	My child would feel scared if they had to stay away from home overnight	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Total** \_\_\_\_\_

**Percentile**  
(See Table 1) \_\_\_\_\_

See Table 2 for recommendations based on the %tile.

**These difficulties negatively impact my child's daily, social, school functioning and/or leisure activities.**

None ( )      A little ( )      A lot ( )

# SEPARATION ANXIETY (SCAS-P)

Table 1. Percentile (Normative data based on Brazilian samples.)

Total	6-9 Years		10-13 Years		14-17 Years	
	Male (%)	Female (%)	Male (%)	Female (%)	Male (%)	Female (%)
0	0	0	0	0	0	0
1	2	3	4	6	8	6
2	3	5	13	13	32	20
3	10	11	28	23	58	36
4	17	14	40	39	68	49
5	24	23	51	48	72	58
6	29	34	62	53	80	65
7	34	46	70	60	87	77
8	45	59	77	68	91	82
9	53	66	82	76	96	92
10	61	72	88	84	98	94
11	70	78	90	88	100	96
12	81	84	92	93	100	100
13	85	92	95	95	100	100
14	91	97	96	97	100	100
15	94	100	98	99	100	100
16	97	100	99	99	100	100
17	99	100	100	100	100	100
18	100	100	100	100	100	100

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# SHYNESS/SOCIAL ANXIETY (SCAS-P)

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

Rater \_\_\_\_\_ Date \_\_\_\_\_

**Please select the answer that best describes your child.**

		Never (0)	Sometimes (1)	Often (2)	Always (3)
6	My child is scared when they have to take a test	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7	My child is afraid when they have to use public toilets or bathrooms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9	My child feels afraid that they will make a fool of him/herself in front of people	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10	My child worries that they will do badly at school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26	My child worries what other people think of them	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
31	My child feels afraid when they have to talk in front of the class	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Total** \_\_\_\_\_

**Percentile**

(See Table 1) \_\_\_\_\_

See Table 2 for recommendations based on the %tile.

**These difficulties negatively impact my child's daily, social, school functioning and/or leisure activities.**

None ( )

A little ( )

A lot ( )

# SHYNESS/SOCIAL ANXIETY (SCAS-P)

**Table 1. Percentile (Normative data based on Brazilian samples.)**

Total	6-9 Years		10-13 Years		14-17 Years	
	Male (%)	Female (%)	Male (%)	Female (%)	Male (%)	Female (%)
0	0	0	0	0	0	0
1	3	0	2	1	0	0
2	9	3	6	3	11	4
3	16	11	15	8	13	13
4	24	18	26	15	21	17
5	30	32	42	29	37	30
6	43	47	55	42	59	40
7	63	57	66	51	69	47
8	75	62	76	61	74	57
9	82	69	84	72	78	65
10	85	80	89	80	81	73
11	88	89	92	85	83	85
12	91	95	93	88	89	94
13	93	97	97	91	91	96
14	94	98	98	95	96	98
15	100	99	99	98	100	99
16	100	100	99	98	100	99
17	100	100	100	99	100	100
18	100	100	100	100	100	100

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# OBSESSION/COMPULSION (SCAS-P)

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

Rater \_\_\_\_\_ Date \_\_\_\_\_

**Please select the answer that best describes your child.**

	Never (0)	Sometimes (1)	Often (2)	Always (3)
13 My child has to keep checking that they have done things right (the switch is off, the door is locked, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17 My child can't seem to get bad or silly thoughts out of their head	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
24 My child has to think special thoughts (numbers, word, etc.) to stop bad things from happening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
35 My child has to do some things over and over again (washing hands, cleaning or putting things in a certain order, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
36 My child gets bothered by bad or silly thoughts or pictures in their head	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
37 My child has to do certain things in just the right way to stop bad things from happening	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Total** \_\_\_\_\_

**Percentile**

(See Table 1) \_\_\_\_\_

See Table 2 for recommendations based on the %tile.

**These difficulties negatively impact my child's daily, social, school functioning and/or leisure activities.**

None ( ) A little ( ) A lot ( )

**Spence Children's Anxiety Scale - Parent Version**

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# OBSESSION/COMPULSION (SCAS-P)

Table 1. Percentile (Normative data based on Brazilian samples.)

合計点	6-9歳		10-13歳		14-17歳	
	男 (%)	女 (%)	男 (%)	女 (%)	男 (%)	女 (%)
0	0	0	0	0	0	0
1	31	13	26	26	37	11
2	44	39	44	42	51	28
3	50	54	61	58	61	43
4	59	68	71	68	72	56
5	65	74	80	77	77	71
6	71	81	86	84	82	78
7	79	89	89	86	85	82
8	85	95	91	90	87	88
9	91	97	94	92	91	90
10	97	99	96	93	94	94
11	98	100	97	95	96	98
12	98	100	98	96	97	99
13	99	100	99	97	98	99
14	100	100	99	98	99	100
15	100	100	99	98	100	100
16	100	100	99	99	100	100
17	100	100	99	99	100	100
18	100	100	100	100	100	100

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Table 2.

%	Level	Recommendations
<70	Minimum	What the child is experiencing is less than what most people experience, no specific intervention is indicated, but mental health can still be improved by adopting healthy lifestyle habits such as engaging in physical activity and improving sleep habits.
70-89	Mild	The symptoms are considered mild. Physical activity, sleep hygiene, and talking to someone who is supportive. Consider reassessing the child's symptoms in about 3 months, to find out if these problems are still bothering the child or if they have disappeared over time. If in 3 months symptoms persist or increase, consider assessing the level of functional impairments in a more detailed assessment and effective ways to respond to the challenges.
90-95	Moderate	The symptoms are considered moderate. Physical activity, sleep hygiene, and talking to someone who is supportive are essential. Look for psychoeducational materials specific to your challenges to find coping strategies and reduce symptoms. Assess the impacts on daily functioning, interpersonal relationships, and schoolwork. Consider reassessing your symptoms again in 2 weeks to find out if these problems are still bothering the child or if they have disappeared over time. If in 2 weeks symptoms persist or increase, or if impairments in daily life become more obvious, consider an evaluation by healthcare professionals.
>95	Severe	The symptoms are considered severe. In addition to physical activity, sleep hygiene, talking to someone supportive and looking for psychoeducational materials, seek an evaluation by healthcare professionals to learn about appropriate treatment. This is especially important if daily functioning, interpersonal relationships, and schoolwork are affected. If the impairments are severe, evaluate risks of self-harm and aggression.

# SPECIFIC PHOBIA (SCAS-P)

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

Rater \_\_\_\_\_ Date \_\_\_\_\_

**Please select the answer that best describes your child.**

	Never (0)	Sometimes (1)	Often (2)	Always (3)
2 My child is scared of the dark	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16 My child is scared of dogs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
21 My child is scared of going to the doctor or dentist	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23 My child is scared of heights	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
28 All of a sudden my child feels really scared for no reason at all	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Total** \_\_\_\_\_

**Percentile**

(See Table 1) \_\_\_\_\_

See Table 2 for recommendations based on the %tile.

**These difficulties negatively impact my child's daily, social, school functioning and/or leisure activities.**

None ( )

A little ( )

A lot ( )

# SPECIFIC PHOBIA (SCAS-P)

Table 1. Percentile (Normative data based on Brazilian samples.)

合計点	6-9歳		10-13歳		14-17歳	
	男 (%)	女 (%)	男 (%)	女 (%)	男 (%)	女 (%)
0	0	0	0	0	0	0
1	0	3	10	6	35	10
2	6	11	28	20	52	13
3	14	23	43	32	61	31
4	33	33	57	46	73	57
5	45	45	71	56	84	74
6	52	58	83	65	87	80
7	58	77	89	76	91	88
8	70	84	92	85	94	96
9	81	87	95	89	98	100
10	91	94	97	94	100	100
11	97	100	98	96	100	100
12	98	100	99	98	100	100
13	100	100	100	99	100	100
14	100	100	100	100	100	100
15	100	100	100	100	100	100

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>95	Severe	The symptoms are are considered severe. In addition to physical activity, sleep hygiene, talking to someone supportive and looking for psychoeducational materials, seek an evaluation by healthcare professionals to learn about appropriate treatment. This is especially important if daily functioning, interpersonal relationships, and schoolwork are affected. If the impairments are severe, evaluate risks of self-harm and aggression.

# SADNESS, WITHDRAWAL, LOSS OF PLEASURE (SMFQ-P)

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

Rater \_\_\_\_\_ Date \_\_\_\_\_

**Please select the answer that best describes your child in the past two weeks.**

	Not True (0)	Sometimes (1)	True (2)
1 My child felt miserable or unhappy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2 My child didn't enjoy anything at all	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3 My child felt so tired that they just sat around and did nothing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4 My child was very restless	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5 My child felt they were no good anymore	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6 My child cried a lot	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7 My child found it hard to think properly or concentrate	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8 My child hated themselves	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9 My child felt they were a bad person	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10 My child felt lonely	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11 My child thought nobody really loved them	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12 My child thought they could never be as good as other kids	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13 My child felt they did everything wrong	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Total** \_\_\_\_\_

**Percent(%)tile**

(See Table 1) \_\_\_\_\_

See Table 2 for recommendations based on the %tile.

**These difficulties negatively impact my child's daily, social, school functioning and/or leisure activities.**

None ( )

A little ( )

A lot ( )

**Has your child ever tried to hurt themselves or had thoughts of suicide? (PHQ-A)**

No ( )

Yes ( )

## Mood and Feelings Questionnaire - Parent Report Short Version

[https://www.scaswebsite.com/ence-and-Waters-\(2004\).](https://www.scaswebsite.com/ence-and-Waters-(2004).) A parent report measure of children's anxiety. Behaviour  
Angold, A., Costello, E. J., Messer, S. C., Pickles, A., Winder, F., & Silver, D. (1995) The development of a  
short questionnaire for use in epidemiological studies of depression in children and adolescents.  
International Journal of Methods in Psychiatric Research, 5, 237 – 249.

# SADNESS, WITHDRAWAL, LOSS OF PLEASURE (SMFQ-P)

Table 1. Percentile (Normative data based on Brazilian samples.)

14-17歲			14-17歲		
合計点	男 (%)	女 (%)	合計点	男 (%)	女 (%)
0	0	0	16	99	86
1	22	22	17	99	87
2	37	35	18	100	91
3	54	45	19	100	92
4	65	53	20	100	94
5	72	59	21	100	95
6	77	64	22	100	96
7	81	68	23	100	97
8	85	70	24	100	97
9	88	73	25	100	98
10	90	77	26	100	100
11	91	79			
12	93	80			
13	94	82			
14	95	84			
15	96	85			

A. R. Simioni, G. Polanczyk, L. A. Rohde, and G. A. Salum. "Translating Measurement-Based Care to Clinical Practice in the Real World: A Stratified Targeted Dimensional Approach to Child and Adolescent Mental Health". In: medRxiv (2020)

Table 2.

%	Level	Recommendations
<70	Minimum	What the child is experiencing is less than what most people experience, no specific intervention is indicated, but mental health can still be improved by adopting healthy lifestyle habits such as engaging in physical activity and improving sleep habits.
70-89	Mild	The symptoms are considered mild. Physical activity, sleep hygiene, and talking to someone who is supportive. Consider reassessing the child's symptoms in about 3 months, to find out if these problems are still bothering the child or if they have disappeared over time. If in 3 months symptoms persist or increase, consider assessing the level of functional impairments in a more detailed assessment and effective ways to respond to the challenges.
90-95	Moderate	The symptoms are considered moderate. Physical activity, sleep hygiene, and talking to someone who is supportive are essential. Look for psychoeducational materials specific to your challenges to find coping strategies and reduce symptoms. Assess the impacts on daily functioning, interpersonal relationships, and schoolwork. Consider reassessing your symptoms again in 2 weeks to find out if these problems are still bothering the child or if they have disappeared over time. If in 2 weeks symptoms persist or increase, or if impairments in daily life become more obvious, consider an evaluation by healthcare professionals.
>95	Severe	The symptoms are are considered severe. In addition to physical activity, sleep hygiene, talking to someone supportive and looking for psychoeducational materials, seek an evaluation by healthcare professionals to learn about appropriate treatment. This is especially important if daily functioning, interpersonal relationships, and schoolwork are affected. If the impairments are severe, evaluate risks of self-harm and aggression.

# INATTENTION (SNAP)

Child's  
Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

Rater \_\_\_\_\_ Date \_\_\_\_\_

**Please select the answer that best describes your child.**

		Never (0)	Sometimes (1)	Often (2)	Always (3)
1	Often fails to give close attention to details or makes careless mistakes in schoolwork or tasks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2	Often has difficulty sustaining attention in tasks or play activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3	Often does not seem to listen when spoken to directly	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4	Often does not follow through on instructions and fails to finish schoolwork, chores, or duties	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5	Often has difficulty organizing tasks and activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6	Often avoids, dislikes, or reluctantly engages in tasks requiring sustained mental effort	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7	Often loses things necessary for tasks or activities (e.g., toys, school assignments, pencils, or books.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8	Often is distracted by extraneous stimuli	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9	Often is forgetful in daily activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Total** \_\_\_\_\_

**Percentile**  
(See Table 1) \_\_\_\_\_

See Table 2 for recommendations based on the %tile.

**These difficulties negatively impact my child's daily, social, school functioning and/or leisure activities.**

None ( ) A little ( ) A lot ( )

## SNAP-IV 26 Parent Rating Scale

Swanson JM, Kraemer HC, Hinshaw SP, Arnold LE, Conners CK, Abikoff HB, et al. Clinical relevance of the primary findings of the MTA: success rates based on severity of ADHD and ODD symptoms at the end of treatment. Journal of the American Academy of Child and Adolescent Psychiatry. 2001;40:168-179.

# INATTENTION

## (SNAP)

Table 1. Percentile (Normative data based on Brazilian samples.)

6-9 Years							10-13 Years							14-17 Years						
Total	M (%)	F (%)	M (%)	F (%)	M (%)	F (%)	Total	M (%)	F (%)	M (%)	F (%)	M (%)	F (%)	Total	M (%)	F (%)	M (%)	F (%)	M (%)	F (%)
0	0	0	0	0	0	0	16	93	96	93	96	92	97	17	94	97	95	97	93	98
1	13	20	13	23	15	22	18	96	98	96	97	94	98	19	97	98	97	98	95	99
2	24	33	22	37	23	32	20	98	98	98	98	96	99	21	98	99	98	99	97	99
3	35	47	33	49	31	42	22	98	99	99	99	98	99	22	98	99	99	99	98	99
4	46	58	42	58	39	53	23	99	99	99	99	99	99	24	99	99	100	99	99	100
5	55	66	51	66	46	63	26	99	100	100	99	99	99	26	99	100	100	99	99	100
6	63	73	58	73	53	71	27	99	100	100	100	100	100	27	100	100	100	100	100	100
7	70	77	65	78	60	76														
8	75	81	71	82	68	81														
9	80	86	76	86	73	84														
10	83	89	79	88	77	86														
11	85	90	82	90	81	89														
12	87	92	85	91	84	90														
13	88	93	87	93	86	93														
14	91	95	89	94	89	95														
15	92	96	92	95	90	97														

A. R. Simioni, G. Polanczyk, L. A. Rohde, and G. A. Salum. "Translating Measurement-Based Care to Clinical Practice in the Real World: A Stratified Targeted Dimensional Approach to Child and Adolescent Mental Health". In: medRxiv (2020)

Table 2.

%	Level	Recommendations
<70	Minimum	What the child is experiencing is less than what most people experience, no specific intervention is indicated, but mental health can still be improved by adopting healthy lifestyle habits such as engaging in physical activity and improving sleep habits.
70-89	Mild	The symptoms are considered mild. Physical activity, sleep hygiene, and talking to someone who is supportive. Consider reassessing the child's symptoms in about 3 months, to find out if these problems are still bothering the child or if they have disappeared over time. If in 3 months symptoms persist or increase, consider assessing the level of functional impairments in a more detailed assessment and effective ways to respond to the challenges.
90-95	Moderate	The symptoms are considered moderate. Physical activity, sleep hygiene, and talking to someone who is supportive are essential. Look for psychoeducational materials specific to your challenges to find coping strategies and reduce symptoms. Assess the impacts on daily functioning, interpersonal relationships, and schoolwork. Consider reassessing your symptoms again in 2 weeks to find out if these problems are still bothering the child or if they have disappeared over time. If in 2 weeks symptoms persist or increase, or if impairments in daily life become more obvious, consider an evaluation by healthcare professionals.
>95	Severe	The symptoms are considered severe. In addition to physical activity, sleep hygiene, talking to someone supportive and looking for psychoeducational materials, seek an evaluation by healthcare professionals to learn about appropriate treatment. This is especially important if daily functioning, interpersonal relationships, and schoolwork are affected. If the impairments are severe, evaluate risks of self-harm and aggression.



# HYPERACTIVITY/IMPULSIVITY (SNAP)

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

Rater \_\_\_\_\_ Date \_\_\_\_\_

**Please select the answer that best describes your child.**

	Never (0)	Sometimes (1)	Often (2)	Always (3)
10 Often fidgets with hands or feet or squirms in seat	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11 Often leaves seat in classroom or in other situations in which remaining seated is expected	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12 Often runs or climbs excessively in situations in which it is inappropriate	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13 Often has difficulty playing or engaging in leisure activities quietly	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14 Often is "on the go" or acts as if "driven by a motor"	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15 Often talks excessively	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16 Often blurts out answers before questions have been completed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17 Often has difficulty awaiting turn	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18 Often interrupts or intrudes on others (e.g., butts into conversations or games)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Total** \_\_\_\_\_

**Percentile**

(See Table 1) \_\_\_\_\_

See Table 2 for recommendations based on the %tile.

**These difficulties negatively impact my child's daily, social, school functioning and/or leisure activities.**

None ( ) A little ( ) A lot ( )

## SNAP-IV 26 Parent Rating Scale

Swanson JM, Kraemer HC, Hinshaw SP, Arnold LE, Conners CK, Abikoff HB, et al. Clinical relevance of the primary findings of the MTA: success rates based on severity of ADHD and ODD symptoms at the end of treatment. Journal of the American Academy of Child and Adolescent Psychiatry. 2001;40:168-179.

# HYPERACTIVITY/IMPULSIVITY (SNAP)

Table 1. Percentile (Normative data based on Brazilian samples.)

6-9 Years							10-13 Years							14-17 Years						
Total	M (%)	F (%)	M (%)	F (%)	M (%)	F (%)	Total	M (%)	F (%)	M (%)	F (%)	M (%)	F (%)	Total	M (%)	F (%)	M (%)	F (%)	M (%)	F (%)
0	0	0	0	0	0	0	16	93	95	94	98	96	99	17	95	96	96	98	97	99
1	11	14	20	26	24	26	18	96	97	96	99	97	99	19	97	97	97	99	98	99
2	18	25	32	40	36	41	20	97	98	97	99	99	99	21	98	98	98	99	99	100
3	28	37	42	50	47	55	22	98	99	99	100	99	100	23	99	99	99	100	100	100
4	37	48	51	59	57	67	24	99	100	100	100	100	100	26	99	100	100	100	100	100
5	46	57	60	69	66	74	26	99	100	100	100	100	100	27	100	100	100	100	100	100
6	54	65	66	76	72	81														
7	61	72	71	78	77	85														
8	68	77	76	80	81	88														
9	73	81	80	88	84	91														
10	77	85	83	90	87	93														
11	82	88	85	92	90	95														
12	85	90	87	94	92	96														
13	88	92	89	95	93	98														
14	91	92	91	96	94	98														
15	92	93	93	97	95	98														

A. R. Simioni, G. Polanczyk, L. A. Rohde, and G. A. Salum. "Translating Measurement-Based Care to Clinical Practice in the Real World: A Stratified Targeted Dimensional Approach to Child and Adolescent Mental Health". In: medRxiv (2020)

Table 2.

%	Level	Recommendations
<70	Minimum	What the child is experiencing is less than what most people experience, no specific intervention is indicated, but mental health can still be improved by adopting healthy lifestyle habits such as engaging in physical activity and improving sleep habits.
70-89	Mild	The symptoms are considered mild. Physical activity, sleep hygiene, and talking to someone who is supportive. Consider reassessing the child's symptoms in about 3 months, to find out if these problems are still bothering the child or if they have disappeared over time. If in 3 months symptoms persist or increase, consider assessing the level of functional impairments in a more detailed assessment and effective ways to respond to the challenges.
90-95	Moderate	The symptoms are considered moderate. Physical activity, sleep hygiene, and talking to someone who is supportive are essential. Look for psychoeducational materials specific to your challenges to find coping strategies and reduce symptoms. Assess the impacts on daily functioning, interpersonal relationships, and schoolwork. Consider reassessing your symptoms again in 2 weeks to find out if these problems are still bothering the child or if they have disappeared over time. If in 2 weeks symptoms persist or increase, or if impairments in daily life become more obvious, consider an evaluation by healthcare professionals.
>95	Severe	The symptoms are considered severe. In addition to physical activity, sleep hygiene, talking to someone supportive and looking for psychoeducational materials, seek an evaluation by healthcare professionals to learn about appropriate treatment. This is especially important if daily functioning, interpersonal relationships, and schoolwork are affected. If the impairments are severe, evaluate risks of self-harm and aggression.

# IRRITABILITY/ANGER (ARI)

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

Rater \_\_\_\_\_ Date \_\_\_\_\_

**Please select the answer that best describes your child in the past 6 months.**

	Not True (0)	Somewhat True (1)	Certainly True (2)
1 Is easily annoyed by others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2 Often loses his/her temper	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3 Stays angry for a long time	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4 Is angry most of the time	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5 Gets angry frequently	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6 Loses temper easily	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Total** \_\_\_\_\_

**Percen(%)tile**  
(See Table 1) \_\_\_\_\_

See Table 2 for recommendations based on the %tile.

**These difficulties negatively impact my child's daily, social, school functioning and/or leisure activities.**

None ( )

A little ( )

A lot ( )

# IRRITABILITY/ANGER (ARI)

**Table 1. Percentile (Normative data based on Brazilian samples.)**

Total	6-9 Years		10-13 Years		14-17 Years	
	Male (%)	Female (%)	Male (%)	Female (%)	Male (%)	Female (%)
0	0	0	0	0	0	NA
1	25	14	22	19	0	NA
2	42	56	42	30	0	NA
3	60	70	54	42	14	NA
4	74	75	71	54	29	NA
5	88	80	78	59	50	NA
6	94	100	84	65	71	NA
7	100	100	88	71	86	NA
8	100	100	90	79	100	NA
9	100	100	92	82	100	NA
10	100	100	97	87	100	NA
11	100	100	100	94	100	NA
12	100	100	100	100	100	NA

A. R. Simioni, G. Polanczyk, L. A. Rohde, and G. A. Salum. "Translating Measurement-Based Care to Clinical Practice in the Real World: A Stratified Targeted Dimensional Approach to Child and Adolescent Mental Health". In: medRxiv (2020)

**Table 2.**

%	Level	Recommendations
<70	Minimum	What the child is experiencing is less than what most people experience, no specific intervention is indicated, but mental health can still be improved by adopting healthy lifestyle habits such as engaging in physical activity and improving sleep habits.
70-89	Mild	The symptoms are considered mild. Physical activity, sleep hygiene, and talking to someone who is supportive. Consider reassessing the child's symptoms in about 3 months, to find out if these problems are still bothering the child or if they have disappeared over time. If in 3 months symptoms persist or increase, consider assessing the level of functional impairments in a more detailed assessment and effective ways to respond to the challenges.
90-95	Moderate	The symptoms are considered moderate. Physical activity, sleep hygiene, and talking to someone who is supportive are essential. Look for psychoeducational materials specific to your challenges to find coping strategies and reduce symptoms. Assess the impacts on daily functioning, interpersonal relationships, and schoolwork. Consider reassessing your symptoms again in 2 weeks to find out if these problems are still bothering the child or if they have disappeared over time. If in 2 weeks symptoms persist or increase, or if impairments in daily life become more obvious, consider an evaluation by healthcare professionals.
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# INTERPERSONAL DIFFICULTIES (CAST)

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

Rater \_\_\_\_\_ Date \_\_\_\_\_

**Please select the answer that best describes your child.**

	No (1)	Yes (0)
1 Does your child join in playing games with other children easily?	<input type="radio"/>	<input type="radio"/>
2 Does your child come up to you spontaneously for a chat?	<input type="radio"/>	<input type="radio"/>
5 Is it important to your child to fit in with the peer group?	<input type="radio"/>	<input type="radio"/>
10 Does your child find it easy to interact with other children?	<input type="radio"/>	<input type="radio"/>
11 Can your child keep a two-way conversation going?	<input type="radio"/>	<input type="radio"/>
13 Does your child mostly have the same interests as their peers?	<input type="radio"/>	<input type="radio"/>
15 Does your child have friends, rather than just acquaintances?	<input type="radio"/>	<input type="radio"/>
16 Does your child often bring you things they are interested in to show you?	<input type="radio"/>	<input type="radio"/>
17 Does your child enjoy joking around?	<input type="radio"/>	<input type="radio"/>
21 Are people important to your child?	<input type="radio"/>	<input type="radio"/>
23 Is your child good at turn-taking in conversation?	<input type="radio"/>	<input type="radio"/>
27 Does your child make normal eye-contact?	<input type="radio"/>	<input type="radio"/>

**Total** \_\_\_\_\_

**Percentile**

(See Table 1) \_\_\_\_\_

See Table 2 for recommendations based on the percentile.

**These difficulties negatively impact my child's daily, social, school functioning and/or leisure activities.**

None ( )

A little ( )

A lot ( )

## Childhood Asperger Syndrome Test

[Nau FJ Sco](#), S Baron-Cohen, P Bolton, and C Brayne. "The CAST (Childhood Asperger Syndrome Test): Preliminary Development of a UK Screen for Mainstream Primary-School-Age Children." In: Autism 6.1 (2002), pp. 9-31

# INTERPERSONAL DIFFICULTIES (CAST)

**Table 1. Percentile (Normative data based on Brazilian samples.)**

Total	6-9 Years		10-13 Years		14-17 Years	
	Male (%)	Female (%)	Male (%)	Female (%)	Male (%)	Female (%)
0	0	0	0	0	0	0
1	57	68	59	67	52	48
2	81	88	82	84	75	74
3	92	94	90	93	84	86
4	96	97	95	96	91	94
5	98	99	97	98	96	97
6	99	100	98	99	98	99
7	99	100	99	99	99	100
8	100	100	100	100	100	100
9	100	100	100	100	100	100
10	100	100	100	100	100	100
11	100	100	100	100	100	100
12	100	100	100	100	100	100

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>95	Severe	The symptoms are considered severe. In addition to physical activity, sleep hygiene, talking to someone supportive and looking for psychoeducational materials, seek an evaluation by healthcare professionals to learn about appropriate treatment. This is especially important if daily functioning, interpersonal relationships, and schoolwork are affected. If the impairments are severe, evaluate risks of self-harm and aggression.

# RESTRICTED INTEREST/REPETITIVE BEHAVIOR (CAST)

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

Rater \_\_\_\_\_ Date \_\_\_\_\_

**Please select the answer that best describes your child.**

	No (0)	Yes (1)
7 Does your child tend to take things literally?	<input type="radio"/>	<input type="radio"/>
9 Does your child like to do things over and over again, in the same way all the time?	<input type="radio"/>	<input type="radio"/>
18 Does your child have difficulty understanding the rules for polite behavior?	<input type="radio"/>	<input type="radio"/>
20 Is your child voice unusual (e.g., overly adult, flat, or very monotonous)?	<input type="radio"/>	<input type="radio"/>
25 Does your child often do or say things that are tactless or socially inappropriate?	<input type="radio"/>	<input type="radio"/>
28 Does your child have any unusual and repetitive movements?	<input type="radio"/>	<input type="radio"/>
29 Is your child's social behavior very one-sided and always on their own terms?	<input type="radio"/>	<input type="radio"/>
30 Does your child sometimes say "you" or "s/he" when they mean "I"?	<input type="radio"/>	<input type="radio"/>
32 Does your child sometimes lose the listener because of not explaining what they are talking about?	<input type="radio"/>	<input type="radio"/>
34 Does your child try to impose routines on themselves, or on others, in such a way that it causes problems?	<input type="radio"/>	<input type="radio"/>
36 Does your child often turn conversations to their favorite subject rather than following what the other person wants to talk about?	<input type="radio"/>	<input type="radio"/>
37 Does your child have odd or unusual phrases?	<input type="radio"/>	<input type="radio"/>

**Total** \_\_\_\_\_

**Percentile**

(See Table 1) \_\_\_\_\_

See Table 2 for recommendations based on the percentile.

**These difficulties negatively impact my child's daily, social, school functioning and/or leisure activities.**

None ( ) A little ( ) A lot ( )

## Childhood Asperger Syndrome Test

Nauf FJ Sco, S Baron-Cohen, P Bolton, and C Brayne. "The CAST (Childhood Asperger Syndrome Test): Preliminary Development of a UK Screen for Mainstream Primary-School-Age Children." In: Autism 6.1 (2002), pp. 9-31

# RESTRICTED INTEREST/REPETITIVE BEHAVIOR (CAST)

**Table 1. Percentile (Normative data based on Brazilian samples.)**

Total	6-9 Years		10-13 Years		14-17 Years	
	Male (%)	Female (%)	Male (%)	Female (%)	Male (%)	Female (%)
0	0	0	0	0	0	0
1	19	24	24	27	22	22
2	47	54	54	57	49	52
3	66	74	71	76	70	71
4	78	85	83	86	83	82
5	87	90	91	91	89	89
6	92	94	95	95	93	93
7	96	96	97	97	97	96
8	98	98	99	98	98	98
9	99	99	99	99	99	98
10	99	99	100	100	100	99
11	100	100	100	100	100	100
12	100	100	100	100	100	100

A. R. Simioni, G. Polanczyk, L. A. Rohde, and G. A. Salum. "Translating Measurement-Based Care to Clinical Practice in the Real World: A Stratified Targeted Dimensional Approach to Child and Adolescent Mental Health". In: medRxiv (2020)

**Table 2.**

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