

The Hospital Anxiety and Depression Scale (HADS)

- assesses anxiety and depression in a non-psychiatric population.
- has 2 subscales: depression and anxiety, both with 7 items.
- Other than physically ill individuals, the HADS is also used with community samples/populations.

ICF Domain:

Body Function – Subcategory: Mental Function.

Number of Items:

14

Instructions for Administration and Scoring:

Administration:

- Self-report format
- Responses are based on the relative frequency of symptoms over the past week, using a four point Likert scale ranging from 0 (not at all) to 3 (very often indeed)
- can be completed in around **5 minutes**.

Equipment: None.

Scoring:

- Responses are summed to provide separate scores for anxiety and depression symptomology; each of anxiety or depression scale have a score range of 0-21.

Interpretability:

MCID: not established

SEM: not established

MDC: not established

- Higher scores indicating greater likelihood of depression or anxiety.
- A cut-off point of 8/21 for the Anxiety subscale gave a specificity of 0.78 and sensitivity of 0.9; a cut-off point of 8/21 for the Depression subscale gave a specificity of 0.79 and a sensitivity of 0.83.
- No normative data for the SCI population has been established
- Published data is available to compare results for individuals with SCI (see interpretability section of Study Details sheet).

Languages:

Versions of the scale are available in English, Arabic, Dutch, French, German, Hebrew, Swedish, Italian, and Spanish.

Training Required:

No special training is required to administer or score the tool.

Availability:

Freely available online at

http://www.sandbachgps.nhs.uk/uploaded_files/files/ashfields/HADS.pdf

Clinical Considerations:

- It is unclear if the few somatic items influence the reliability and validity of this measure with an SCI population. Further research is needed to confirm psychometric properties within this population.
- The HADS should only be used as a screening instrument. It is one of two instruments with an anxiety specific scale that has had its measurement properties evaluated for the SCI population.

Measurement Property Summary:

of studies reporting psychometric properties: 4

Reliability:

- Internal consistency of the Anxiety subscale of the HADS is **excellent** (Cronbach's $\alpha=0.8463-0.85$)
- Internal consistency of the Depression subscale of the HADS is **adequate to excellent** (Cronbach's $\alpha=0.79-0.8122$).

[Woolrich et al. 2006, Berry & Kennedy 2003]

Validity:

- Correlation of the total HADS scale is **adequate** with the:
 - Life Satisfaction Questionnaire (Pearson's $r=-0.585$)
 - Sexual Adjustment Scale (Pearson's $r=-0.49$)
 - Emotional Quality of the Relationship scale (-0.38).
- Correlation of the Anxiety subscale of the HADS is **adequate** with the:
 - Spinal Cord Lesion Coping Strategies – Acceptance subscale (Pearson's $r=-0.45$)
 - Spinal Cord Lesion Coping Strategies - Fighting Spirit subscale (Pearson's $r=-0.40$)
- Correlation of the Depression subscale of the HADS is **adequate** with the:
 - Spinal Cord Lesion Coping Strategies – Acceptance subscale (Pearson's $r=-0.58$)
 - Spinal Cord Lesion Coping Strategies – Fighting Spirit subscale (Pearson's $r=-0.49$).

[Woolrich et al. 2006, Berry & Kennedy 2003, Elfstrom et al. 2007, Kreuter et al. 1996]

Responsiveness:

No values were reported for the responsiveness of the HADS for the SCI population.

Floor/ceiling effect:

No values were reported for the presence of floor/ceiling effects in the HADS for the SCI population.

Reviewer:

Christie Chan

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