CORRELATIONS BETWEEN TWO MULTIDIMENSIONAL ANXIETY SCALES FOR CHILDREN

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Summary.—The correlation between scores on two new anxiety questionnaires for children (n=54 boys, 54 girls), the Screen for Child Anxiety Related Emotional Disorders and the Multidimensional Anxiety Scale for Children was .72, with values for subscales ranging between .35 and .63.

Recently, two new multidimensional scales were designed to measure the major domains of anxiety in children, the Screen for Child Anxiety Related Emotional Disorders (1), a 38-item 3-point rating scale with five subscales: somatic/panic, general anxiety, separation anxiety, social phobia, and school phobia, and the Multidimensional Anxiety Scale for Children (2), a 39-item 4-point rating scale of four subscales: physical symptoms, social anxiety, separation anxiety, and harm avoidance. Unlike previous self-report anxiety scales for children, these are multidimensional measures, i.e., they tap several domains of anxiety, e.g., somatic/panic, social, etc. The present study examined correlations between scores on these measures.

Children (54 boys and 54 girls), between 9 and 13 years (Mean = 10.5, SD = 0.8), completed each measure. Analyses showed that both questionnaires possess satisfactory internal consistency. For the Screen, Cronbach alphas were .91 for the total score and ranged between .63 (school phobia) and .85 (somatic/panic) for the separate subscales. For the Multidimensional Anxiety Scale, alphas were .89 for the total score and varied between .70 (harm avoidance) and .85 (social anxiety) for the various dimensions.

Pearson correlations, while controlling for sex and age, were computed between the sets of scores. There was a positive correlation of .72 (p < .001) between the total scores of both scales. As expected, substantial values emerged between scores for the Screen’s somatic/panic and for the Multidimensional scale’s physical symptoms (r = .63, p < .001), between the Screen’s social phobia and the Multidimensional scale’s social anxiety (r = .42, p < .001), and between the two separation anxiety scales (r = .58, p < .001). Interestingly, the association was positive for scores on the Screen’s general anxi-

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ety and the Multidimensional scale's harm/avoidance ($r = .35$, $p < .001$). Further inspection indicated that children who had higher scores on general anxiety also exhibited higher scores on anxious coping. This seems to be in line with previous studies on coping in children with symptoms of generalized anxiety disorder (3). The pattern of associations between scores on these two new multidimensional anxiety questionnaires was meaningful.

REFERENCES


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