

= Beck Depression Inventory =

The Beck Depression Inventory ( BDI , BDI @-@ 1A , BDI @-@ II ) , created by Aaron T. Beck , is a 21 @-@ question multiple @-@ choice self @-@ report inventory , one of the most widely used psychometric tests for measuring the severity of depression . Its development marked a shift among mental health professionals , who had until then , viewed depression from a psychodynamic perspective , instead of it being rooted in the patient 's own thoughts .

In its current version , the BDI @-@ II is designed for individuals aged 13 and over , and is composed of items relating to symptoms of depression such as hopelessness and irritability , cognitions such as guilt or feelings of being punished , as well as physical symptoms such as fatigue , weight loss , and lack of interest in sex .

There are three versions of the BDI ? the original BDI , first published in 1961 and later revised in 1978 as the BDI @-@ 1A , and the BDI @-@ II , published in 1996 . The BDI is widely used as an assessment tool by health care professionals and researchers in a variety of settings .

The BDI was used as a model for the development of the Children 's Depression Inventory ( CDI ) , first published in 1979 by clinical psychologist Maria Kovacs .

= = Development and history = =

Historically , depression was described in psychodynamic terms as " inverted hostility against the self " . By contrast , the BDI was developed in a novel way for its time ; by collating patients ' verbatim descriptions of their symptoms and then using these to structure a scale which could reflect the intensity or severity of a given symptom .

Beck drew attention to the importance of " negative cognitions " described as sustained , inaccurate , and often intrusive negative thoughts about the self . In his view , it was the case that these cognitions caused depression , rather than being generated by depression .

Beck developed a triad of negative cognitions about the world , the future , and the self , which play a major role in depression . An example of the triad in action taken from Brown ( 1995 ) is the case of a student obtaining poor exam results :

The student has negative thoughts about the world , so he may come to believe he does not enjoy the class .

The student has negative thoughts about his future , because he thinks he may not pass the class .

The student has negative thoughts about his self , as he may feel he does not deserve to be in college .

The development of the BDI reflects that in its structure , with items such as " I have lost all of my interest in other people " to reflect the world , " I feel discouraged about the future " to reflect the future , and " I blame myself for everything bad that happens " to reflect the self . The view of depression as sustained by intrusive negative cognitions has had particular application in cognitive behavioral therapy ( CBT ) , which aims to challenge and neutralize them through techniques such as cognitive restructuring .

= = = BDI = = =

The original BDI , first published in 1961 , consisted of twenty @-@ one questions about how the subject has been feeling in the last week . Each question has a set of at least four possible responses , ranging in intensity . For example :

( 0 ) I do not feel sad .

( 1 ) I feel sad .

( 2 ) I am sad all the time and I can 't snap out of it .

( 3 ) I am so sad or unhappy that I can 't stand it .

When the test is scored , a value of 0 to 3 is assigned for each answer and then the total score is compared to a key to determine the depression 's severity . The standard cut @-@ off scores are as follows :

0 ? 9 : indicates minimal depression  
10 ? 18 : indicates mild depression  
19 ? 29 : indicates moderate depression  
30 ? 63 : indicates severe depression .

Higher total scores indicate more severe depressive symptoms .

Some items on the BDI have more than one statement marked with the same score . For instance , there are two responses under the Mood heading that score a 2 : ( 2a ) I am blue or sad all the time and I can 't snap out of it and ( 2b ) I am so sad or unhappy that it is very painful .

== BDI @-@ IA ==

The BDI @-@ IA was a revision of the original instrument developed by Beck during the 1970s , and copyrighted in 1978 . To improve ease of use , the " a and b statements " described above were removed , and respondents were instructed to endorse how they had been feeling during the preceding two weeks . The internal consistency for the BDI @-@ IA was good , with a Cronbach 's alpha coefficient of around 0 @. @ 85 , meaning that the items on the inventory are highly correlated with each other .

However , this version retained some flaws ; the BDI @-@ IA only addressed six out of the nine DSM @-@ III criteria for depression . This and other criticisms were addressed in the BDI @-@ II .

== BDI @-@ II ==

The BDI @-@ II was a 1996 revision of the BDI , developed in response to the American Psychiatric Association 's publication of the Diagnostic and Statistical Manual of Mental Disorders , Fourth Edition , which changed many of the diagnostic criteria for Major Depressive Disorder .

Items involving changes in body image , hypochondriasis , and difficulty working were replaced . Also , sleep loss and appetite loss items were revised to assess both increases and decreases in sleep and appetite . All but three of the items were reworded ; only the items dealing with feelings of being punished , thoughts about suicide , and interest in sex remained the same . Finally , participants were asked to rate how they have been feeling for the past two weeks , as opposed to the past week as in the original BDI .

Like the BDI , the BDI @-@ II also contains 21 questions , each answer being scored on a scale value of 0 to 3 . Higher total scores indicate more severe depressive symptoms . The standardized cutoffs used differ from the original :

0 ? 13 : minimal depression  
14 ? 19 : mild depression  
20 ? 28 : moderate depression  
29 ? 63 : severe depression .

One measure of an instrument 's usefulness is to see how closely it agrees with another similar instrument that has been validated against information from a clinical interview by a trained clinician . In this respect , the BDI @-@ II is positively correlated with the Hamilton Depression Rating Scale with a Pearson r of 0 @. @ 71 , showing good agreement . The test was also shown to have a high one @-@ week test ? retest reliability ( Pearson r = 0 @. @ 93 ) , suggesting that it was not overly sensitive to daily variations in mood . The test also has high internal consistency ( ? = .91 ) .

= Two @-@ factor approach to depression =

Depression can be thought of as having two components : the affective component ( e.g. mood ) and the physical or " somatic " component ( e.g. loss of appetite ) . The BDI @-@ II reflects this and can be separated into two subscales . The purpose of the subscales is to help determine the primary cause of a patient 's depression .

The affective subscale contains eight items : pessimism , past failures , guilty feelings , punishment feelings , self @-@ dislike , self @-@ criticalness , suicidal thoughts or wishes , and worthlessness .

The somatic subscale consists of the other thirteen items : sadness , loss of pleasure , crying , agitation , loss of interest , indecisiveness , loss of energy , change in sleep patterns , irritability , change in appetite , concentration difficulties , tiredness and / or fatigue , and loss of interest in sex . The two subscales were moderately correlated at 0 .57 , suggesting that the physical and psychological aspects of depression are related rather than totally distinct .

= = Impact = =

The development of the BDI was an important event in psychiatry and psychology ; it represented a shift in health care professionals ' view of depression from a Freudian , psychodynamic perspective , to one guided by the patient 's own thoughts or " cognitions " . It also established the principle that instead of attempting to develop a psychometric tool based on a possibly invalid theory , self -report questionnaires when analysed using techniques such as factor analysis can suggest theoretical constructs .

The BDI was originally developed to provide a quantitative assessment of the intensity of depression . Because it is designed to reflect the depth of depression , it can monitor changes over time and provide an objective measure for judging improvement and the effectiveness or otherwise of treatment methods . The instrument remains widely used in research ; in 1998 , it had been used in over 2000 empirical studies . It has been translated into multiple European languages as well as Arabic , Chinese , Japanese , Persian , and Xhosa .

= = Limitations = =

The BDI suffers from the same problems as other self -report inventories , in that scores can be easily exaggerated or minimized by the person completing them . Like all questionnaires , the way the instrument is administered can have an effect on the final score . If a patient is asked to fill out the form in front of other people in a clinical environment , for instance , social expectations have been shown to elicit a different response compared to administration via a postal survey .

In participants with concomitant physical illness the BDI 's reliance on physical symptoms such as fatigue may artificially inflate scores due to symptoms of the illness , rather than of depression . In an effort to deal with this concern Beck and his colleagues developed the " Beck Depression Inventory for Primary Care " ( BDI -PC ) , a short screening scale consisting of seven items from the BDI -II considered to be independent of physical function . Unlike the standard BDI , the BDI -PC produces only a binary outcome of " not depressed " or " depressed " for patients above a cutoff score of 4 .

Although designed as a screening device rather than a diagnostic tool , the BDI is sometimes used by health care providers to reach a quick diagnosis .

The BDI is copyrighted , a fee must be paid for each copy used , and photocopying it is a violation of copyright . There is no evidence that the BDI -II is more valid or reliable than other depression scales , and public domain scales such as the Patient Health Questionnaire ? Nine Item ( PHQ -9 ) have been studied as a useful tool .