**“Calculation Scoring Formula”**

1. **Depression Anxiety Stress Scale - 21 ( DASS-21)**

NB Scores on the DASS-21 will need to be multiplied by 2 to calculate the final score

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| --- | --- | --- | --- |
|  | **Depression** | **Anxiety** | **Stress** |
| Normal | 0-9 | 0-7 | 0-14 |
| Mild | 10-13 | 8-9 | 15-18 |
| Moderate | 14-20 | 10-14 | 19-25 |
| Severe | 21-27 | 15-19 | 26-33 |
| Extremely severe | 28+ | 20+ | 34+ |

1. **Anxiety Self-Rating Scale**

* MINIMAL ANXIETY - 0 to 8 point
* MILD ANXIETY - 8 to 16 points
* MODERATE ANXIETY - 17 to 24 points
* HIGH ANXIETY (Warning Level) - 25 to 32 points
* EXTREME ANXIETY (Warning Level) - 33 to 40 points

1. **Liebowitz Social Anxiety Scale (LSAS)**

This measure assesses the way that social phobia plays a role in your life across a variety of situations.

Combining the total scores for the Fear and Avoidance sections provides an overall score with a maximum of 144 points.

The clinician administered version of the test has four more subscale scores, which the self-administered test does not have. These additional four subscales are: fear of social interaction, fear of performance, avoidance of social interaction and avoidance of performance. Usually, the sum of the total fear and total avoidance scores are used in determining the final score

* Research supports a cut-off point of **30**, in which SAD is unlikely.
* The next cut-off point is at **60**, at which SAD is probable. Scores in this range are typical of persons entering treatment for the non-generalized type of SAD.
* Scores between **60 and 90** indicate that SAD is very probable. Scores in this range are typical of persons entering treatment for the generalized type of SAD.
* Scores higher than **90** indicate that SAD is highly probable.

1. **Patient Health Questionnare-9 (PHQ-9)**

Participants completed the two-page version of the PHQ, which consists of 9 self-report items.

To qualify for a Panic Disorder diagnosis, an individual has to first identify as having “had an anxiety attack, suddenly feeling fear or panic” within the last 4 weeks. Additionally, they must also endorse that such attacks have happened before, that some of them “come out of the blue” and that these attacks either bother them a lot or that they are worried by the prospect of having more. Finally, they have to endorse four out of eleven somatic symptoms as having been present during their last attack.

| Provisional Diagnosis and Proposed Treatment Actions | | |
| --- | --- | --- |
| **PHQ-9 Score** | **Depression Severity** | **Proposed Treatment Actions** |
| 0 – 4 | None-minimal | None |
| 5 – 9 | Mild | Watchful waiting; repeat PHQ-9 at follow-up |
| 10 – 14 | Moderate | Treatment plan, considering counseling, follow-up and/or pharmacotherapy |
| 15 – 19 | Moderately Severe | Active treatment with pharmacotherapy and/or psychotherapy |
| 20 – 27 | Severe | Immediate initiation of pharmacotherapy and, if severe impairment or poor response to therapy, expedited referral to a mental health specialist for psychotherapy and/or collaborative management |

1. **Generalized Anxiety Disorder (GAD-7)**

The Generalised Anxiety Disorder Assessment (GAD-7) is a seven-item instrument that is used to measure or assess the severity of generalised anxiety disorder (GAD). Each item asks the individual to rate the severity of his or her symptoms over the past two weeks. Response options include “not at all”, “several days”, “more than half the days” and “nearly every day”.

The GAD-7 has been validated for primary care patients, general population, and adolescents with GAD.

The GAD-7 is a self-administered patient questionnaire and it takes about 1-2 minutes to complete.

Your total score is a guide to how severe your anxiety disorder may be:

* 0 to 4 = mild anxiety
* 5 to 9 = moderate anxiety
* 10 to 14 = moderately severe anxiety
* 15 to 21 = severe anxiety