

## Spence Children's Anxiety Scale – Parent Report - Brief Version (SCAS-P-8)

Your child's name:

Your name:

Date:

**BELOW IS A LIST OF ITEMS THAT DESCRIBE CHILDREN. FOR EACH ITEM PLEASE CIRCLE THE RESPONSE THAT BEST DESCRIBES YOUR CHILD. PLEASE ANSWER ALL THE ITEMS.**

1. My child worries about things	Never	Sometimes	Often	Always
2. My child complains of feeling afraid	Never	Sometimes	Often	Always
3. My child worries about being away from us / me	Never	Sometimes	Often	Always
4. My child feels afraid that (s)he will make a fool of him/herself in front of people	Never	Sometimes	Often	Always
5. My child has trouble going to school in the mornings because (s)he feels nervous or afraid	Never	Sometimes	Often	Always
6. My child worries that something bad will happen to him/her	Never	Sometimes	Often	Always
7. My child worries what other people think of him/her	Never	Sometimes	Often	Always
8. All of a sudden my child feels really scared for no reason at all	Never	Sometimes	Often	Always

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