A Critical Examination of the Multidimensional Anxiety Scale for Children

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INTRODUCTION

The purpose of the MASC is to classify anxiety symptoms prevalent amongst individuals of 8-19 years of age. The MASC is one of the most widely used self-report measures created to assess anxiety.

The MASC measures 4 major scales (6 subscales): physical symptoms, harm avoidance, social anxiety, and separation/panic. Approximately 39 items are used in this assessment.

The items used in this assessment were all based on a 4-point Lickert scale (ranging from "never true about me" to "often true about me") and were set at a 4th grade reading level.

RESEARCH QUESTION

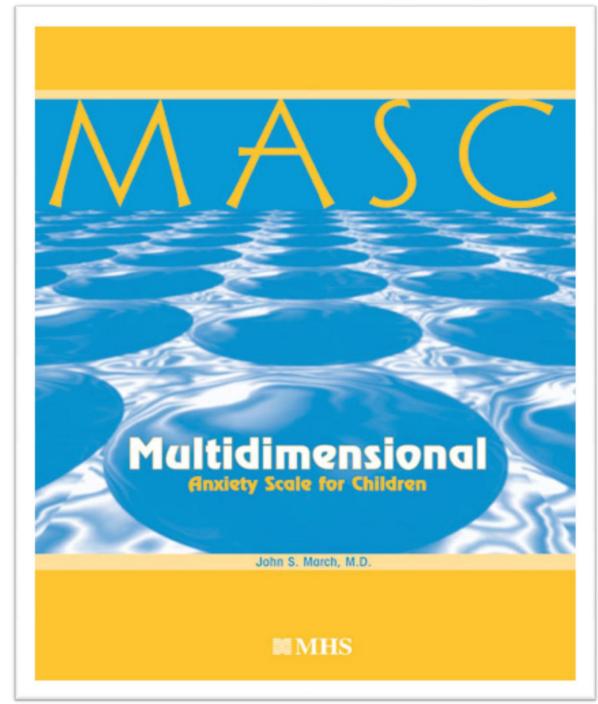
The objective of this paper is to critically evaluate the Multidimensional Anxiety Scale for Children (MASC).

Four major areas of the assessment were evaluated: test development, norm development, test reliability, and test validity.

APPROACH

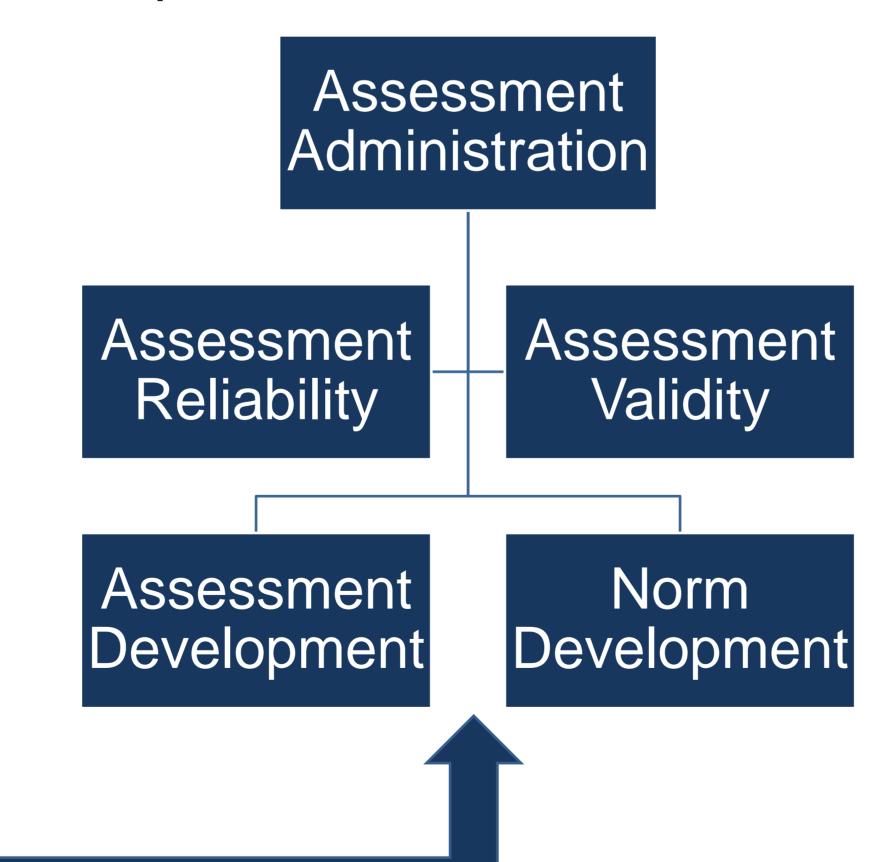
The Mental Measurement Yearbook was used to gather data about various criticisms of the MASC.

In addition, the MASC *Test Manual* was used to as a primary source to gather information about validity and reliability coefficients.



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Test Development Process



FINDINGS

Test Development - The item-wording of the MASC could be more female-oriented, thus males may be reluctant to circle a higher point on the Lickert scale.

Norm Development - The MASC inaccurately sampled the Hispanic population according to the national census.

Reliability - The test-retest reliability was excellent. The MASC (interclass correlation coefficient) yielded a score of 0.785 (3 week interval) and 0.933 (three month interval).

Validity - The MASC was able to create a distinction between clinical respondents and non-clinical respondents with correlations ranging from 84-90 for all 7 major scales.

CONCLUSION

In conclusion, the MASC has proved itself to be a valid and reliable tool to screen for childhood anxiety compared to other self-report measures.

Overall, even though more research in regards to reliability is required for the MASC, it has proven itself to be a sufficient tool to assess anxiety in children and adolescence.