

Adaptation and Validation of the Screen for Child Anxiety Related Emotional Disorders (SCARED) on 8 to 11 year old Tamil Speaking School Children in the Colombo District.

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The research problem and main objective of this study was to translate and validate the Screen For Child Anxiety Related Emotional Disorders (SCARED) (Birmaher, et al., 1999) on a group of Tamil speaking school going children (n=416) between the ages of 8 to 11 years from the Colombo district.

The civil war in Sri Lanka, which lasted over two decades and ended in 2009 has had a severely debilitating effect on the mental health of adults and children alike. Two studies in the northeast of the country found prevalence rates of 25% and 30% for Post-traumatic Stress Disorder (PTSD) and 20% for major depression (Catani et al., 2008 & Elbert et al., 2009 as cited in Tol et al., 2012).

The SCARED is a 41-item instrument that measures anxiety in children. A systematic method was abided by to translate the original SCARED in to the Tamil language. A Delphi process which contained a five member panel of experts from the mental health field evaluated the content and consensual validity of the translated SCARED. Afterwards, the SCARED Tamil version was pretested on school children (n=20) of the same target population but outside the main study group. Reliability and validity was assessed on 416 school going Tamil speaking children from the Colombo district.

Reliability (n=24) was assessed by establishing Internal consistency reliability (Cronbach's $\alpha=0.875$) and test-retest reliability (14 day interval) (*Person's r* correlation=0.641). Convergent validity was assessed by evaluating the correlation of the SCARED and Spence Children's Anxiety Scale (SCAS) scores (Cronbach's $\alpha=0.639$). Exploratory Factor Analysis, with principal component varimax rotation, resulted in four factors: Generalized Anxiety Disorder; Panic Disorder or Significant Somatic Symptoms; Social Phobia and Separation Anxiety.

The current study would have yielded further accurate results if a clinical sample or children in the northeast of Sri Lanka were used. To further refine the study it is recommended to use a clinical sample or children in the northeast. Also it would be more beneficial for diagnosis

purposes to validate the parent version of the SCARED as well. This study could also be carried out on an adolescent population.

The result of the present validation study indicates that the SCARED Tamil version is an appropriate scale to screen anxiety disorders in children.

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