

Center for Epidemiological Studies Depression Scale for Children (CES-DC)

Number _____

Score _____

INSTRUCTIONS

Below is a list of the ways you might have felt or acted. Please check how much you have felt this way during the past week.

Table with 5 columns: DURING THE PAST WEEK, Not At All, A Little, Some, A Lot. Rows 1-5 describing feelings like 'bothered', 'not eating', 'not happy', 'not as good as other kids', 'couldn't pay attention'.

R

Table with 5 columns: DURING THE PAST WEEK, Not At All, A Little, Some, A Lot. Rows 6-10 describing feelings like 'felt down', 'too tired', 'something good going to happen', 'things didn't work out', 'felt scared'.

R

Table with 5 columns: DURING THE PAST WEEK, Not At All, A Little, Some, A Lot. Rows 11-15 describing feelings like 'didn't sleep well', 'was happy', 'more quiet', 'felt lonely', 'kids not friendly'.

R

Table with 5 columns: DURING THE PAST WEEK, Not At All, A Little, Some, A Lot. Rows 16-20 describing feelings like 'had a good time', 'felt like crying', 'felt sad', 'people didn't like me', 'hard to get started'.

R