

Comment on The Children's Depression Scale: Some further psychometric data by Garry Tonkin and Alan Hudson;
Miriam Tisher and Moshe Lang, authors of Children's Depression Scale.

We are very pleased that research efforts are being made to look at psychometric properties of the Children's Depression Scale, and we welcome the work reported by Garry Tonkin and Alan Hudson.

Since the review of the research edition of the CDS is somewhat critical (particularly of the level of reliability and of the norms supplied in the manual), we wish to comment specifically regarding these two areas of the paper.

We note the overall scale co-efficient alpha of 0.92, somewhat lower than that reported in the manual (0.96), but fairly similar. We note also the test-retest reliability co-efficient of 0.74. As noted by psychometricians (e.g. Nunnally, 1978), the test-retest method has serious defects; however, these data, in addition to other information already available on the scale, are useful.

An alternative explanation of the results of their factor analysis (their Table 5) would seem to be that the first factor is 'depression' because it loads on nearly all the D items, while the weaker second factor is 'lack of pleasure' because it loads predominantly on the P items. If this is confirmed on more subjects, it would positively support the construct validity of the CDS. (This explanation suggested by Dr Russell Langley, Applied Psychology Department, Caulfield Institute of Technology.)

Unfortunately, no data are reported with respect to socio-economic status of the families of the children studied; the only information is that: 'Almost all of the children lived in high-rise accommodation and were of migrant background', and 'The teachers described many of the children as aggressive, acting out, and lacking in appropriate social relationships'. Tonkin and Hudson acknowledge this as a possible explanation of the discrepancy between scores of their 'normal' sample and those reported in the manual.

We now have available several sets of scores from different samples, and they are set out in Table 1.

Table 1 Showing Comparative Mean and SD Scores on Full D Scale for Different Samples Studied

Sample			Total D score	
			X	SD
Lang & Tisher	Control group	Boys (N = 22)	106.3	36.5
		Girls (N = 15)	132.5	30.3
	Experimental group	Boys (N = 25)	153.6	25.3
		Girls (N = 15)	162.6	31.9
	Clinical group	Total (N = 19)	134.5	23.9
Tonkin and Hudson (1980)	Boys (N = 33)	132.46	24.24	
	Girls (N = 27)	141.32	25.95	
Gardiner (1980)	Boys (N = 88)	145.773	32.197	
	Girls (N = 102)	144.157	27.910	
Kodaki (1980)	Boys (N = 195)	123.140	21.424	
	Girls (N = 194)	127.604	24.774	

No socio-economic correlational data is available in respect to the three samples other than that of Lang and Tisher. But samples of Tonkin and Hudson and of Gardiner are from inner-suburban schools, and include a heavy percentage of migrant children.

Findings of levels of depression comparable to that of a general clinical control group may be quite appropriate and indicate the importance of a wide-scale assessment of depression in the community. The control group reported in the manual (Lang and Tisher's sample) is probably a 'super-normal' group in that it was defined by very clear empirical criteria which precluded children from migrant families and children who had missed more than ten school days in the year. It is also important to note age differences in samples reported; on the basis of preliminary data available it appears that age may be a factor in determining CDS scores obtained.

Finally, with respect to the conclusion drawn by Tonkin and Hudson, we would certainly agree that the CDS should not be the sole basis for the diagnosis of childhood depression - and we advise users of this scale strongly in this direction in the manual. The CDS is still in research edition at this stage; scores supplied are clearly preliminary and readers of the manual are cautioned not to accept these scores as 'norms', but to use them as guidelines only. We would caution against sole reliance upon any scale for diagnostic purposes; in our view all scales must be used and results interpreted within the context of all other information available about the client and of the relationships.

We look forward to further work examining reliability and validity of the CDS, as well as to reports on different samples of children with associated correlation data.

Reference

Nunnally, J.C. Psychometric Theory. (2nd ed.) New York: MCgraw-Hill, 1978.

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