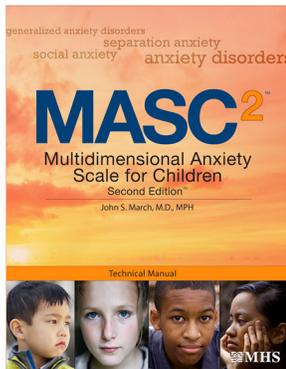


UnMASC Anxiety

Assess the range and severity of symptoms related to anxiety disorders in youth aged 8 to 19



Age

8 to 19 years

Forms

Parent-completed
Self-report

Number of Items

50

Administration Time

15 minutes

Format(s)

Online (administration and scoring)

Qualification Level

B-level



MHS.com/MASC2

The Multidimensional Anxiety Scale for Children 2nd Edition™ (MASC 2™)

John S. March, M.D., MPH

Understanding a child's anxiety is an important step to successful treatment. The Multidimensional Anxiety Scale for Children 2nd Edition™ (MASC 2™) is a comprehensive, multi-rater assessment of anxiety dimensions in children and adolescents aged 8 to 19 years. The MASC 2 indexes the range and severity of anxiety symptoms, and can be a useful adjunct to the process of diagnosing anxiety disorders. When combined with other valid sources of information, the MASC 2 can aid in the early identification of anxiety-prone youth, as well as help to monitor treatment effects.

- **Complete a Comprehensive Evaluation**

With the introduction of a parent form, gather an in-depth perspective from multiple raters.

- **Gain Valuable Insight**

A new model which includes an Anxiety Probability Score, General Anxiety Disorder (GAD) Index, and the Obsessions & Compulsions (OCD) Scale.

- **Implement Intervention**

Develop an easy to follow treatment plan with an intervention section authored by Dr. John March.

- **Discover Important Details Often**

Uncover details about a child's emotional, physical, cognitive and behavioral symptoms of anxiety that broadband measures and screening tools often miss.

- **Research you can Trust**

An updated normative sample representative of youth aged 8 to 19 years across North America.



Why can't Mom come with me?

Separation Anxiety/Phobias

Components and Administration

The MASC 2 can be administered and scored online via the MHS Online Assessment Center+. The multidimensional scales ensure that a broad range of anxiety-related concerns are captured. The MASC 2 can be administered multiple times throughout an intervention period to evaluate progress and effectiveness of treatment. The MASC 2 has parent and self-report forms for children and youth aged 8 to 19 years. Both forms have 50 items and include an Inconsistency Index, a Total Score, the Anxiety Probability Score, as well as the following 10 scale and subscale scores: (see Figure 1).

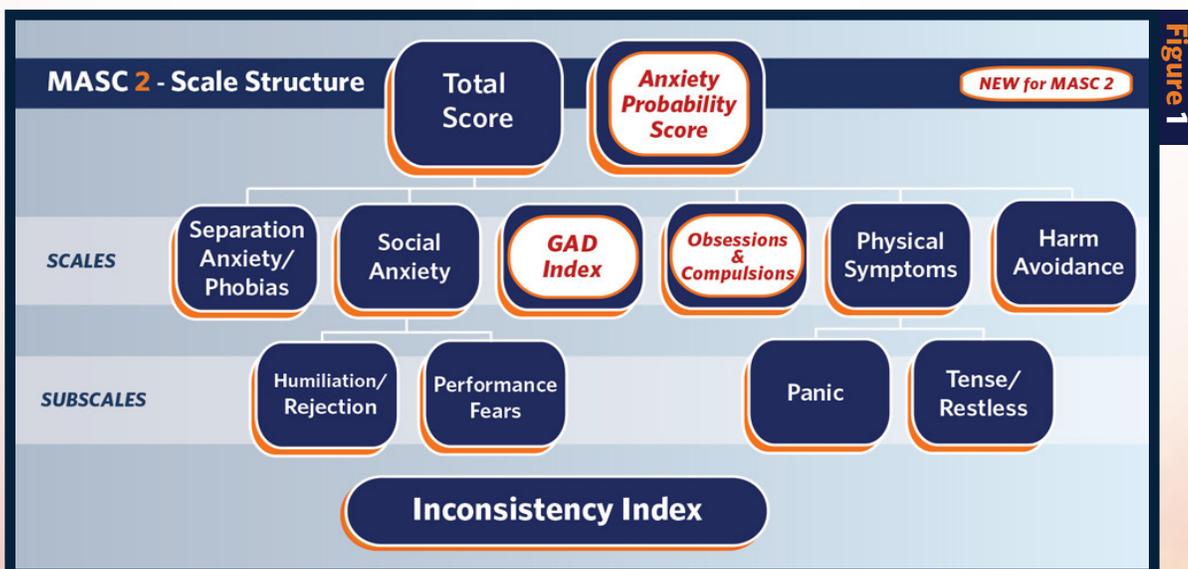


Figure 1

MASC²

UnMASC the many faces of anxiety.

I'm so
anxious my
stomach hurts

Physical Symptoms

I should
keep the light on...
I'm worried about getting sick...
I feel so tense...

GAD Index



Social Anxiety

Why do I
always feel on
edge and jumpy?

Tense/Restless

If I raise my
hand and get the wrong
answer everyone will
laugh at me.

Humiliation/Rejection



Panic



Performance
Fears

Three Valuable Reports Available

Generate up to three user-friendly reports using the MHS Online Assessment Center+.



Assessment Reports – Provide information about a single MASC 2 administration including the youth's scores, how he/she compares to other children, and which scales and subscales are elevated.



Progress Reports – Provide an overview of change over time by combining and comparing results of up to four administrations.



Comparative Reports – Compare the responses provided by the child with those provided by the child's parent(s), thereby offering an overview of the child's anxiety symptom status from multiple perspectives.



Normative Samples Representative of the U.S. Population

The MASC 2 normative samples (self-report $N = 1,800$, parent $N = 1,600$) are representative of the U.S. and Canadian populations of children and adolescents. Age and gender were balanced across the normative samples, while race/ethnicity, geographic region, and parental education level were statistically weighted to match U.S. and Canadian census targets. All targeted values fell within 3.5% of the census targets (most fell within 0.5% of targets; see Figure 2).

			Self	Parent	Target
Race/ Ethnicity	U.S.	Asian	3.9	4.5	4.2
		Black	14.2	13.7	13.9
		Hispanic/Latino	21.5	21.1	21.1
		White	55.9	56.0	56.5
		Other	4.5	4.7	4.2
		Total	100.0	100.0	100.0
	Canada	White	82.0	82.8	80.0
		Non-White	18.0	17.2	20.0
		Total	100.0	100.0	100.0
		N		1,800	1,600
Parental Education Level	U.S.	High School or Less	45.7	45.6	43.3
		Some College	28.4	28.4	28.9
		College or Higher	26.0	26.0	27.9
		Total	100.0	100.0	100.0
	Canada	High School or Less	36.0	40.1	39.4
		Some College	39.9	37.0	37.7
		College or Higher	24.2	22.9	22.9
		Total	100.0	100.0	100.0
Geographic Region	U.S.	Northeast	17.3	16.9	17.0
		Midwest	21.4	22.0	21.7
		South	36.9	37.4	37.3
		West	24.4	23.8	24.1
		Total	100.0	100.0	100.0
	Canada	Central/East	73.0	71.3	69.8
		Prairies/West	27.0	28.7	30.2
		Total	100.0	100.0	100.0

Figure 2

Dependable, Reliable, and Valid

Internal Consistency Reliability

- Cronbach's alpha values for the Total Score and the MASC 2 Scales were strong:
 - Parent Total Score $\alpha = .89$
 - Self-Report Total Score $\alpha = .92$

Test—Retest Reliability

- Interval between test administrations: 1- to 4-weeks.
- Excellent test-retest reliability was found:
 - Parent Total Score $r = .93$
 - Self-Report Total Score $r = .89$

Discriminative Validity

In order to test the discriminative validity of the MASC 2, data were collected from three samples of children who were previously diagnosed with one of the following anxiety disorders: Separation Anxiety Disorder, Generalized Anxiety Disorder, or Social Phobia. Scores from these three groups were compared to scores from the normative sample on the Total Score, as well as on the three Anxiety Scales (i.e., Separation Anxiety/Phobias, GAD Index, Social Anxiety: Total; see Figures 3 to 5). These results provide strong evidence for the discriminative validity of the MASC 2.

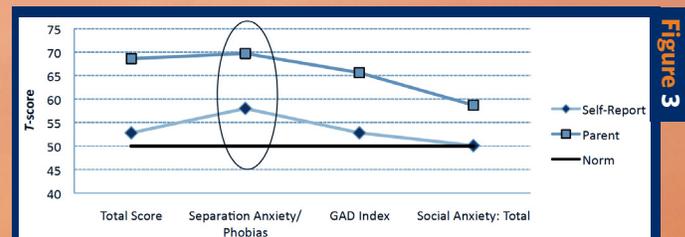


Figure 3

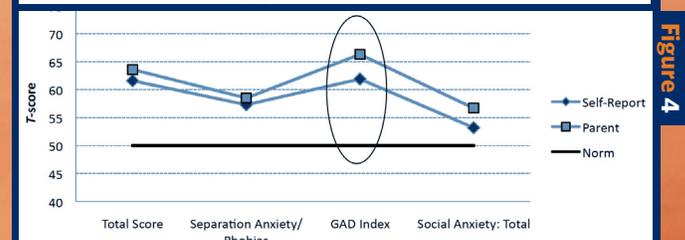


Figure 4

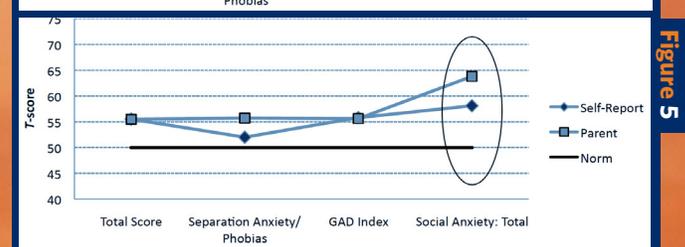


Figure 5

MHS Online Assessment Center+

**Administer, Score, and Report the MASC 2™
with the MHS Online Assessment Center+**

- **Save Time**
Fast, easy, and accurate administration with automated scoring.
- **Assess from Anywhere**
View reports with an online connection.
- **Improve Efficiency and Accuracy**
When items are absent prompts appear to ensure information is not missed.
- **User-Friendly**
Easy to use interface for practitioners and respondents.
- **Gain Information Easily**
Email a link to the form directly to the respondent.
- **Tailored Organization**
Data can be customized to how you work.



For more information and pricing please scan the QR Code:

