

## Depression Anxiety Stress Scales (DASS) Information Sheet

### Description

The DASS21 (Lovibond & Lovibond, 1995) is a 21-item measure that includes 3 subscales assessing symptoms of depression, anxiety, and stress. With permission from Peter Lovibond, the scale's developer, we added two items to assess suicidality, and we named the new measure the DASS23. The DASS is also available in a 42-item version. The DASS is quick to complete, suitable for most outpatients, and is responsive to treatment-related changes (Brown, Chorpita, Korotitsch, & Barlow, 1997).

The subscales of the DASS are:

- *Depression* – low positive affect, hopelessness, and anhedonia (e.g., “felt downhearted and blue,” “difficult to work up the initiative to do things”) (items 3, 5, 10, 13, 16, 17, 21)
- *Anxiety* – panic and physiological arousal (e.g., “felt I was close to panic,” “trembling”) (items 2, 4, 7, 9, 15, 19, 20)
- *Stress* – high negative affect, what Barlow (2002) terms “anxious apprehension” (e.g., “hard to wind down,” “rather touchy”) (items 1, 6, 8, 11, 12, 14, 18)

Two items of the DASS23 assess suicidality:

- Suicidal ideation (“thought about death or suicide”)
- Suicidal wishes (“wanted to kill myself”)

### Psychometric Properties

The DASS21 and DASS42 have good test-retest reliability, high internal consistency, and adequate convergent and discriminant validity with other measures of anxiety and depression (Antony et al., 1998; Brown, Chorpita, Korotitsch, & Barlow, 1997). Little overlap has been found between the three subscales, which is consistent with the tripartite model (Clark & Watson, 1991) upon which the DASS is based. Brown and colleagues (1997) found the depression scale to be most strongly correlated with measures of depression and positive affect, the anxiety scale to be most strongly correlated with measures of physiological arousal and panic, and the stress scale to be most strongly correlated with measures of worry and negative affect than the other two scales. A list of publications related to the DASS can be found at <http://www2.psy.unsw.edu.au/groups/dass/pub.htm>.

### Scoring

Respondents rate each item to reflect how much it applies to their experience over the preceding week on a Likert scale ranging from 0 (“did not apply to me at all”) to 3 (“applied to me very much”).

Subscale score totals on the DASS21 are multiplied by 2 in order to be comparable to the DASS means norms, which are based on the 42-item version of the scale. Thus, possible scores on each subscale range from 0 to 42. The two suicidality items (items 22 and 23) are not included in the subscales.

The cutoff scores for each subscale are as follows:

<i>Depression</i>	0-9 = normal range; 10-13 = mild; 14-20 = moderate; 21-42 = severe
<i>Anxiety</i>	0-7 = normal range; 8-9 = mild; 10-14 = moderate; 15-42 = severe
<i>Stress</i>	0-14 = normal range; 15-18 = mild; 19-25 = moderate; 26-42 = severe

## Reliable and Clinically Significant Change

Table 6 below is reprinted from Tolin (2016, p. 133), based on data from research on the DASS (T.A. Brown, Chorpita, Korotitsch, & Barlow, 1997; Lovibond & Lovibond, 1995) and the free online calculator (at [www.psych.org/stats/resc.htm](http://www.psych.org/stats/resc.htm)).

**TABLE 6.1. Determining Reliable and Clinically Significant Change for the Depression Anxiety Stress Scales**

DASS scale	Clinical (unhealthy) mean	Clinical (unhealthy) SD	Normative (healthy) mean	Normative (healthy) SD	Test-retest reliability	For reliable change you need . . .	For clinically significant change (closer to the healthy mean than to the unhealthy mean) you need . . .
Depression	25.31	10.24	6.34	6.97	0.71	A decrease of 16 points or more	A score of 14 or lower
Anxiety	15.48	8.81	4.70	4.91	0.78	A decrease of 12 points or more	A score of 8 or lower
Stress	22.36	9.90	10.11	7.91	0.81	A decrease of 12 points or more	A score of 15 or lower

## Availability

The measure is in the public domain. Detailed information can be found in the DASS manual (Lovibond & Lovibond, 1995) as well as at <http://www2.psy.unsw.edu.au/groups/dass/>

## References

- Antony, M. M., Bieling, P. J., Cox, B. J., Enns, M. W., & Swinson, R. P. (1998). Psychometric properties of the 42-item and 21-item versions of the Depression Anxiety Stress Scales in clinical groups and a community sample. *Psychological Assessment*, 10(2), 176–181. <https://doi.org/10.1037/1040-3590.10.2.176>
- Brown, T. A., Chorpita, B. F., Korotitsch, W., & Barlow, D. H. (1997). Psychometric properties of the Depression Anxiety Stress Scales (DASS) in clinical samples. *Behaviour Research and Therapy*, 35(1), 79–89. [https://doi.org/10.1016/S0005-7967\(96\)00068-X](https://doi.org/10.1016/S0005-7967(96)00068-X)
- Clark, L. A., & Watson, D. (1991). Tripartite model of anxiety and depression: Psychometric evidence and taxonomic implications. *Journal of Abnormal Psychology*, 100(3), 316–336. <https://doi.org/10.1037/0021-843X.100.3.316>
- Lovibond, S. H., & Lovibond, P. F. (1995). *Manual for the Depression Anxiety Stress Scales* (Second). Psychology Foundation.
- Tolin, D. F. (2016). *Doing CBT: A comprehensive guide to working with behaviors, thoughts, and emotions*. The Guilford Press.