October 2, 2012

To whom it may concern,

Thank you for your interest in the Behavioral Activation for Depression Scale – Short Form (BADS-SF).

The short form is 9 items, 8 of which are from the original BADS (with a few minor changes) and one new item. The range of scores is 0 to 54, with high scores representing higher activation.

Factor analyses have identified 2 subscales of the short form, which are Activation (AC) and Avoidance (AV). Because of the small number of items in the subscales, we do not recommend that they be calculated and used separately from the total scale, but they do give a sense for the composition of the total scale and what a total scale score means.

Even though we do not recommend it, if you do want to score the subscales, sum the items for each subscale to generate subscale scores (indicated by hash marks on the columns on the right). None of the items should be reverse scored for the subscales.

For the total score (T), follow the markings on the column furthest to the right. High scores on the total scale indicate greater levels of activation. Items with an “R” in the scoring template should be reverse scored for the total score only. This means that an item on the Avoidance subscale will get reverse-scored when computing the total score of the BADS-SF, but it will not get reverse-scored when computing the Avoidance subscale score (which we don’t recommend you use anyway). This procedure makes the subscale and total scale scores consistent with the title of the subscale or scale. In other words, a high score on the total scale means more activation, while a high score on the Avoidance subscale means more avoidance.

The short form has several advantages over the original and you may want to consider using it. Specifically, the BADS-SF is more focused directly on the types of activation and avoidance targets in BA treatments and does not contain items on impairment, which may be conceptualized as resulting from changes in activation and avoidance rather than part of the processes taking place in BA treatments. The BADS-SF is also shorter (9 items), has good construct validity demonstrated by significant correlations with measures of depression (CES-D) as well as a variety of other measures (i.e., AAQ, ATQ, BAI, CBAS, EROS, PES), and predictive validity over a one-week time period predicting engagement in highly rewarding or pleasant activities or unrewarding and unpleasant activities.
The proper reference for the short form is:


Please contact Dr. Jonathan Kanter by email at jkanter@uwm.edu or by phone at 414-229-3834 if you have any comments or questions about either the BADS or the BADS-SF.

In accepting this scale from us, you are giving us permission to contact you at a later date so we may inquire about its use and any data you may have on it. There is no obligation to share data with us but we do hope for a collegial response to later requests for updates or possible collaborations on publications regarding the continued development and evaluation of these measures.

Thank you and good luck with your work.

Sincerely,

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