## <u>scoring the wsas</u>

"A WSAS score above 20 appears to suggest moderately severe or worse psychopathology. Scores between 10 and 20 are associated with significant functional impairment but less severe clinical symptomatology. Scores below 10 appear to be associated with subclinical populations. Whether such a pattern will generalise to other disorders (apart from OCD and depression) remains to be tested."

Mundt, J. C., I. M. Marks, et al. (2002). "The Work and Social Adjustment Scale: a simple measure of impairment in functioning." <u>Br J Psychiatry</u> **180**: 461-4.

BACKGROUND: Patients' perspectives concerning impaired functioning provide important information. AIMS; To evaluate the reliability and validity of the Work and Social Adjustment Scale (WSAS). METHOD: Data from two studies were analysed. Reliability analyses included internal scale consistency, test-retest and parallel forms. Convergent and criterion validities were examined with respect to disorder severity. RESULTS: Cronbach's alpha measure of internal scale consistency ranged from 0.70 to 0.94. Test-retest correlation was 0.73. Interactive voice response administrations of the WSAS gave correlations of 0.81 and 0.86 with clinician interviews. Correlations of WSAS with severity of depression and obsessive-compulsive disorder symptoms were 0.76 and 0.61, respectively. The scores were sensitive to patient differences in disorder severity and treatment-related change. CONCLUSIONS: The WSAS is a simple, reliable and valid measure of impaired functioning. It is a sensitive and useful outcome measure offering the potential for readily interpretable comparisons across studies and disorders.