The KADs was developed to assist in the public health and clinical identification of young people at risk for depression. It was created by clinicians and researchers expert in the area of adolescent depression and the application of various scales and tools in clinical, research and institutional settings. Work on the KADs was conducted in samples of secondary school students, in clinical settings and in clinical research projects.

There are three different KADS scales: the 6-item, the 11-item and the 16 item. The 16 item is designed for clinical research purposes and is not available on the Sun Life Financial Chair in Adolescent Mental Health website.

The 11-item KADs has been incorporated into the Chehil-Kutcher Youth Depression Diagnosis and Monitoring Tool. This tool is designed for use in clinical settings in which health providers treat young people who have depression.

Researchers interested in using the KADs can contact the office of the Sun Life Chair at (902) 470-6598 or Dr. Kutcher directly by email at skutcher@dal.ca.

The 6-item KADs is designed for use in institutional settings (such as schools or primary care settings) where it can be used as a screening tool to identify young people at risk for depression or by trained health care providers (such as public health nurses, primary care physicians) or educators (such as guidance counselors) to help evaluate young people who are in distress or who have been identified as possibly having a mental health problem.

The tool is a self-report scale and is meant to be completed by the young person following direction from the health provider, educator or other responsible person. The youth should be instructed that this tool will help the person conducting the assessment to better understand what difficulties they might be having and to assist the assessor in determining if the young person may have one of the more common emotional health problems found in adolescents – depression. The young person should be told that depending what the assessment of their problem identifies (the KADs plus the discussion with the assessor) the use of the KADs will help in the determination of next steps.

The KADs is written at approximately a grade six reading level and is useful in assessing young people ages 12 to 22. It has a sensitivity for depression of over 90 percent and a specificity for depression of over 70 percent – putting it into the top rank of self-report depression assessment tools currently available. It is also much shorter than other available tools and unlike many others, is free of charge. It has been recommended for use in a number of expert reports including the National Institute for Clinical Evaluation (UK) and the GLAD-PC Guidelines (USA and Canada). The KADs has been translated into many different languages and is used globally.

KADs Scoring

The KADs is scored using a zero to three system with “hardly ever” scored as a zero and “all of the time” scored as a three. A score of six or greater is consistent with a diagnosis of Major Depressive Disorder and should trigger a more comprehensive mental health assessment of the young person. The KADs will also often identify young people who suffer from substantial anxiety such as Panic Disorder and Social Anxiety Disorder but it has not been validated for that specific purpose.

Another use of the KADs is for monitoring of symptoms in the young person being treated for depression. This should ideally be done at each visit and the scores recorded and reviewed for evidence of improvement.

The last item on the KADs is very sensitive to suicide risk. Any young person scoring one or higher on the last item should have a more thorough suicide risk assessment. We suggest that this be conducted using the adolescent suicide risk assessment guide – the TASR – A. A copy of the TASR – A can be accessed on the clinical tools section of our website.

The KADs can be used by expert clinicians (such as child and adolescent mental health staff working in sub-speciality or academic settings) without additional training. Training in the use of the KADs for others is advised and can be arranged for groups of 10 or more by contacting the office of the Chair. Depending on the group, the duration of KADs training ranges from one to three hours.
Permission to use the KADS

The KADS is available freely for use but may not be sold, copied or otherwise distributed without the express written consent of Dr. Stan Kutcher.

We appreciate any feedback on the use, outcome or suitability of the KADS from any individual or group who is using it. Feedback can be directed to Dr. Stan Kutcher by email at skutcher@dal.ca.

Clinicians, educators, youth workers and others interested in other training programs pertaining to youth depression and suicide offered by the Chair can find further information by visiting the training programs section of our website.

More Information

Further information about the KADS can be found in these sources:


Sun Life Financial Chair in Adolescent Mental Health

IWK Health Centre - Maritime Outpatient Psychiatry
5850 University Ave. P.O. Box 9700
Halifax, NS CANADA B3K 6R8
Tel: (902) 470-6598
Fax: (902) 492-0383
Email: info@teenmentalhealth.org
www.teenmentalhealth.org

Kutcher Adolescent Depression Scale (KADS)

This is a permission form to request use of the Kutcher Adolescent Depression Scale (KADS). Please complete the form below and fax or email it to the office of the Sun Life Financial Chair in Adolescent Mental Health. Response from Dr. Stan Kutcher will be sent to you upon completion of this form.

Describe your project _____________________________________________________________________________________________________
______________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________

Describe the purpose of using the KADS _____________________________________________________________________________________
______________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________

Describe how the KADS will be used _______________________________________________________________________________________
______________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________

Describe who the project will benefit ________________________________________________________________________________________
______________________________________________________________________________________________________________________

I acknowledge that I am a physician and/or health provider with expertise in assessment and treatment of young people with depressive disorder.

I understand that the KADS is copy-written and cannot be used for any other purposes other than that noted above without the expressed written consent of the authors Dr. Stan Kutcher and Dr. Sonia Chehil. I understand that permission includes non-exclusive world rights in all languages to use the material and will not limit any future publications—including future editions and revisions—by myself or others authorized by me.

Signature _____________________________________    Printed Name   ________________________________________

Date  _____________________________________    Institution         ________________________________________
Кучерова скала депресије за адолесценте: КАДС-6

Име и презиме ______________________________, године_______

ТОКОМ ПРОШЛЕ НЕДЕЉЕ, КАКАВ/А СИ У ПРОСЕКУ ИЛИ ОБИЧНО БИО/ЛА ОКО НАВЕДЕНИХ СТВАРИ: (стави X у кућицу испод сваке реченице)

1. нерасположен/а, тужан/а, потиштен/а, депресиван/а, немогућност да се бавим нечим.
   ○  ○  ○  ○
   0 – Готово никада  1 – Већи део времена  2 – Највећи део времена  3 – Све време

2. осећања безвредности, безнадежности, разочаравања људи, да нисам добра особа.
   ○  ○  ○  ○
   0 – Готово никада  1 – Већи део времена  2 – Највећи део времена  3 – Све време

3. осећање исцрпљености, осећање умора, недостатак енергије, тешко се мотивисати, силом радити ствари, потреба за одмором или лежањем.
   ○  ○  ○  ○
   0 – Готово никада  1 – Већи део времена  2 – Највећи део времена  3 – Све време

4. осећање да живот није баш интересантан, не осећати се добро онда када би то требало (пре болести), не уживати у забавним стварима као обично (пре болести).
   ○  ○  ○  ○
   0 – Готово никада  1 – Већи део времена  2 – Највећи део времена  3 – Све време

5. осећање забринутости, нервозе, панике, тензије, узбуђења, анксиозности.
   ○  ○  ○  ○
   0 – Готово никада  1 – Већи део времена  2 – Највећи део времена  3 – Све време

6. мисли, планови или акције о самоубиству или самоповређивању.
   ○  ○  ○  ○
   0 – Готово никада  1 – Већи део времена  2 – Највећи део времена  3 – Све време