

## EARLY DETECTION OF DEPRESSION IN CHILDREN AND ADOLESCENTS: THE NEW CHILDREN'S DEPRESSION SCREENER (CHILD-S) AND THE DEPRESSION SCREENER FOR TEENAGERS (DESTEEN)

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**Introduction:** Depression in children and adolescents is still underdiagnosed. Valid and brief screening-tools for these age groups are missing.

**Objective:** For children and adolescents in particular, we developed the screening-tools ChilD-S and DesTeen and assessed their validity as opposed to established instruments.

**Methods:** Both screeners were validated in a paediatric (228 children, 316 adolescents) and a clinical sample (77 children, 87 adolescents). Gold standard for validation were ICD-10 diagnoses of a depressive episode or dysthymia based on a structured interview. Using receiver operating characteristic analyses, the area under the curve (AUC) and the cut-offs with the highest sum of sensitivity and specificity were computed. In addition, it was examined whether the instruments differed significantly in validity measures.

**Results:** Point-prevalences were 5.3% (children) and 9.8% (adolescents) in paediatric care and 23.5% and 26.1% in clinical care. The 8-item ChilD-S yielded AUCs of 98% and 93% in the paediatric and in the clinical sample. Sensitivities were 100% and 94%, with specificities of 87% and 78%. The abbreviated 6-item DesTeen showed an AUC of 95% in both settings. Sensitivities were 100% and 91% in the paediatric and in the clinical sample, specificities were 82% and 89%. Being even shorter, the two screening-tools performed equally well or better than the established instruments.

**Conclusions:** The ChilD-S and the DesTeen discriminate well between depression and depression-like symptoms in somatic diseases as well as between depression and other forms of mental disorders. Valid and brief, they can both be recommended for usage in paediatric and clinical settings.