Center for Epidemiological Studies Depression Scale for Children (CES-DC)

Instructions: Below is a list of the ways you might have felt or acted. Please check how much you have felt this way during the past week.

| DURING THE PAST WEEK | Not At All | A Little | Some | A Lot |
|--|------------|----------|------|-------|
| I was bothered by things that usually don't bother me. | 0 | 0 | 0 | 0 |
| 2. I did not feel like eating, I wasn't very hungry. | 0 | © | 0 | 0 |
| 3. I wasn't able to feel happy, even when my family or friends tried to help me feel better. | 0 | 0 | 0 | 0 |
| 4. I felt like I was just as good as other kids. | • | © | 0 | 0 |
| 5. I felt like I couldn't pay attention to what I was doing. | 0 | 0 | 0 | 0 |
| 6. I felt down and unhappy. | 0 | © | 0 | 0 |
| 7. I felt like I was too tired to do things. | • | 0 | 0 | 0 |
| 8. I felt like something good was going to happen. | 0 | © | 0 | 0 |
| 9. I felt like things I did before didn't work out right. | • | © | 0 | 0 |
| 10. I felt scared. | 0 | © | 0 | 0 |
| 11. I didn't sleep as well as I usually sleep. | • | © | 0 | 0 |
| 12. I was happy. | 0 | © | 0 | 0 |
| 13. I was more quiet than normal. | 0 | © | 0 | 0 |
| 14. I felt lonely, like I didn't have any friends. | 0 | © | 0 | 0 |
| 15. I felt like kids I know were not friendly or that they didn't want to be with me. | 0 | © | 0 | 0 |
| 16. I had a good time. | 0 | © | 0 | 0 |
| 17. I felt like crying. | 0 | 0 | 0 | 0 |
| 18. I felt sad. | • | 0 | 0 | 0 |
| 19. I felt people didn't like me. | • | 0 | 0 | 0 |
| 20. It was hard to get started doing things. | 0 | 0 | 0 | 0 |