

# Psychometrics and correlates of the Adolescent Dissociative Experiences Scale in psychological disturbed and normal Portuguese adolescents

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## Introduction

### Background

Adolescence is a critical period for dissociation, which decreases by 18-21 years as more effective coping strategies are put into action [1,2]. Failing to integrate cognitive functions associated with consciousness, identity, memory, emotion, perception, body representation, motor control, and behavior [3] in a chronic manner is likely to interfere with the ability to construct a cohesive sense of self [2], may thwart the acquisition of more adaptive coping strategies [4], and may potentiate the buildout of later psychopathology [5,6].

Adolescent Dissociative Experiences Scale/A-DES was widely studied around the world, allowing to understand the prevalence of dissociation in many countries [4-7]. However, this study is yet to be done with Portuguese adolescents.

### Objectives

We intend to analyze the psychometric properties of the A-DES 11-item response format; compare normal/NA with psychological disturbed adolescents/PDA, across age (12 to 18 years), sex, education level, and with the results obtained in other countries. We also want to determine the variables that correlate with A-DES.

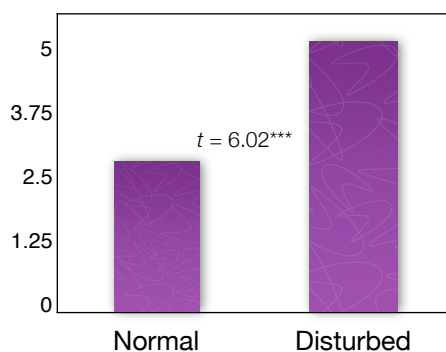
## Material & Methods

- ★ The sample included nonclinical ( $n = 69$ ) and psychological disturbed adolescents ( $n = 45$ ) aged between 11 to 18 years, 55.3% boys and 44.7% girls, education mean years 8.96 ( $SD = 2.74$ ).
- ★ The Adolescent Dissociative Experiences Scale/A-DES [8] is a 8 items measure in which item is rated on a response scale of 0 ("never") to 10 ("always").
- ★ The Youth Self Report/YSR [9] is a self-response questionnaire that describes and evaluates the social skills and behavior problems, as they are perceived by the child/adolescent. The first part consists of 17 items related to skills, social activities, and interests. The second part includes 103 items related to various behavioral and/or emotional disturbances and 16 items related to socially desirable behaviors.

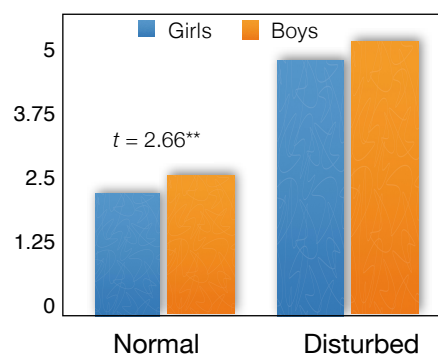
## Results

- ★ The A-DES had a very good internal consistency ( $\alpha = 0.94$ ), presenting significant large correlations with YSR ( $r = 0.67$ ).
- ★ Confirmatory factor analysis suggested a 1-factor structure, explaining 38.8% of the variance ( $KMO = 0.87$ ).
- ★ ROC analysis and Youden index revealed a cut-off score of 4 (sensitivity = 66.0%; specificity = 90.6%) discriminating healthy from psychological disturbed adolescents.
- ★ The total mean scores ( $2.78 \pm 1.82$ ; range = 0 to 8.80) were equivalent to those obtained in American, English, Japanese, and Turkish adolescent samples<sup>4-7</sup>.
- ★ The mean scores significantly discriminated ( $t = 6.02$ ;  $p < 0.001$ ; Cohen's  $d = 1.12$ ) between the nonclinical ( $M = 2.06 \pm 1.41$ ) and psychological disturbed adolescents ( $M = 3.89 \pm 1.84$ ).
- ★ There were differences between the sexes in the healthy sample ( $t = 2.66$ ;  $p < 0.01$ ; Cohen's  $d = 0.54$ ), but not in the psychological disturbed one.
- ★ A-DES presented significant large correlations with YSR Total ( $r = 0.67$ ), and with Internalizing and Externalizing, anti-social, attention, isolation, anxiety-depression, somatic, and thought problem scales ( $r = 0.59$  to  $0.42$ ).
- ★ Those who had more dissociative experiences were younger ( $r = 0.21$ ;  $p < 0.05$ ), less educated ( $r = 0.26$ ;  $p < 0.01$ ), and institutionalized ( $r = 0.3$ ;  $p < 0.01$ ) adolescents.
- ★ Hierarchical multiple regression including age, education, and YSR, revealed that only YSR was statistically significant in predicting levels of A-DES ( $\beta = 0.64$ ;  $p < 0.001$ ).

### Mean A-DES between samples



### Mean A-DES between sexes



### Correlates of A-DES

	A-DES	YSR	Age	Education	Group
A-DES	—	0.68**	-0.21*	-0.26**	0.30**
YSR		—	-0.14	-0.19*	0.12
Age			—	0.93**	-0.34**
Education				—	-0.41**
Group					—

\*  $p < 0.05$ ; \*\*  $p < 0.01$

## Conclusions

- ★ The Portuguese A-DES version seems a valid and reliable screening for dissociation amongst adolescents.
- ★ Similarly to other studies there were no differences between sexes, but only amongst the normal adolescents.
- ★ It would be important to test the A-DES on clinically identified adolescents samples.

## References

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