



BASC-3 Scales, Composites and Indexes for the TRS, PRS and SRP

This document contains information about the scales, composites and indexes provided for the BASC™-3 Teacher Rating Scales, Parent Rating Scales, and Self Report of Personality Forms. For additional information please refer to the BASC-3 manual.

Teacher Rating Scales and Parent Rating Scales

Rating scales are particularly well suited to the recording of specific and observable behaviors. Teachers and parents usually observe children in different social and activity settings. The TRS and PRS assess both broad- and narrow-based behavioral and emotional domains across these settings, as well as both maladaptive and adaptive behavior. Three levels are provided for each: preschool (ages 2 through 5), child (ages 6 through 11), and adolescent (ages 12 through 21). Table 1.1 shows the composites, scales, and indexes for all TRS and PRS levels.

Table I.I TRS and PRS Scales and Indexes

Scale	TRS			PRS		
	P	C	A	P	C	A
Composite						
Adaptive Skills	•	•	•	•	•	•
Behavioral Symptoms Index	•	•	•	•	•	•
Externalizing Problems	•	•	•	•	•	•
Internalizing Problems	•	•	•	•	•	•
School Problems		•	•			
Clinical and adaptive scales						
Activities of Daily Living				•	•	•
Adaptability	•	•	•	•	•	•
Aggression	•	•	•	•	•	•
Anxiety	•	•	•	•	•	•
Attention Problems	•	•	•	•	•	•
Atypicality	•	•	•	•	•	•
Conduct Problems		•	•		•	•
Depression	•	•	•	•	•	•
Functional Communication	•	•	•	•	•	•
Hyperactivity	•	•	•	•	•	•
Leadership		•	•		•	•
Learning Problems		•	•			
Social Skills	•	•	•	•	•	•
Somatization	•	•	•	•	•	•
Study Skills		•	•			
Withdrawal	•	•	•	•	•	•
Content scale						
Anger Control	•	•	•	•	•	•
Bullying	•	•	•	•	•	•
Developmental Social Disorders	•	•	•	•	•	•
Emotional Self-Control	•	•	•	•	•	•
Executive Functioning	•	•	•	•	•	•
Negative Emotionality	•	•	•	•	•	•
Resiliency						
Clinical Index						
ADHD Probability Index		•	•		•	•
Autism Probability Index		•	•		•	•
Clinical Probability Index	•			•		
EBD Probability Index		•	•		•	•
Functional Impairment Index	•	•	•	•	•	•
Executive Functioning Index						
Attentional Control Index	•	•	•	•	•	•
Behavioral Control Index	•	•	•	•	•	•
Emotional Control Index	•	•	•	•	•	•
Overall Executive Functioning Index	•	•	•	•	•	•
Problem Solving Index		•	•		•	•

TRS and PRS Clinical Scale Descriptions

Aggression—The tendency to act in a hostile manner (either verbal or physical) that is threatening to others

Anxiety—The tendency to be nervous, fearful, or worried about real or imagined problems

Attention Problems—The tendency to be easily distracted and unable to concentrate more than momentarily

Atypicality—The tendency to behave in ways that are considered odd or commonly associated with psychosis

Conduct Problems—The tendency to engage in antisocial and rule-breaking behavior; including destroying property

Depression—Feelings of unhappiness, sadness, and stress that may result in an inability to carry out everyday activities or may bring on thoughts of suicide

Hyperactivity—The tendency to be overly active, rush through work or activities, and act without thinking

Learning Problems—The presence of academic difficulties, particularly understanding or completing homework

Somatization—The tendency to be overly sensitive to and complain about relatively minor physical problems and discomforts

Withdrawal—The tendency to evade others to avoid social contact

TRS and PRS Adaptive Scale Descriptions

Activities of Daily Living—The skills associated with performing basic, everyday tasks in an acceptable and safe manner

Adaptability—The ability to adapt readily to changes in the environment

Functional Communication—The ability to express ideas and communicate in a way others can easily understand

Leadership—The skills associated with accomplishing academic, social, or community goals, including the ability to work with others

Social Skills—The skills necessary for interacting successfully with peers and adults in home, school, and community settings

Study Skills—The skills that are conducive to strong academic performance, including organizational skills and good study habits

Content scale Descriptions

Anger Control—The tendency to become irritated and/or angry quickly and impulsively, coupled with an inability to regulate affect and self-control

Bullying—The tendency to be intrusive, cruel, threatening, or forceful to get what is wanted through manipulation or coercion

Developmental Social Disorders—The tendency to display behaviors characterized by deficits in social skills, communication, interests, and activities; such behaviors may include self-stimulation, withdrawal, and inappropriate socialization

Emotional Self-control—The ability to regulate one's affect and emotions in response to environmental changes

Executive Functioning—The ability to control behavior by planning, anticipating, inhibiting, or maintaining goal-directed activity, and by reacting appropriately to environmental feedback in a purposeful, meaningful way

Negative Emotionality—The tendency to react in an overly negative way to any changes in everyday activities or routines

Resiliency—The ability to access both internal and external support systems to alleviate stress and overcome adversity

Probability, Impairment, and Executive Functioning Indexes

Clinical Probability Index

The Clinical Probability Index, available at the preschool level of the TRS and PRS, provides an overall indication of the similarity between the obtained behavioral ratings and the ratings of similarly aged children known to have a behavioral or emotional problem or classification.

EBD Probability Index

The EBD Probability Index, available at the child and adolescent levels of the TRS and PRS, provides an indication of the similarity between the obtained behavioral ratings and the ratings of children identified as having an emotional or behavioral disturbance or disability (a classification typically given in educational settings when making placement decisions).

Autism Probability Index

The Autism Probability Index, available at the child and adolescent levels of the TRS and PRS, provides an indication of the similarity between the obtained behavioral ratings and the ratings of children identified as having an autism spectrum disorder.

ADHD Probability Index

The ADHD Probability Index, available at the child and adolescent levels of the TRS and PRS, provides an indication of the similarity between the obtained behavioral ratings and the ratings of children identified as having attention-deficit/hyperactivity disorder.

Functional Impairment Index

The Functional Impairment Index, available at all levels of the TRS and PRS, provides an indication of the level of difficulty a child has engaging in successful or appropriate behavior across a variety of situations including interactions with others, performing age-appropriate tasks, regulating mood, and performing school-related tasks.

Executive Functioning Indexes

New to the BASC-3 TRS and PRS forms are the executive functioning indexes, which include the Problem-Solving Index, Attentional Control Index, Behavioral Control Index, Emotional Control Index, and Overall Executive Functioning Index. These indexes are available only via Q-global software reports.

Problem-Solving Index

This index measures one's ability to demonstrate planfulness and to make decisions and solve problems effectively in everyday life; this is often different from the problem-solving required on abstract tasks such as on an intelligence test. People with elevated scores on this scale are often disorganized or scattered in their approach to life's problems and even in carrying out daily activities.

Attentional Control Index

This index measures one's ability to sustain attention and attend to the current task. High scorers are likely to be easily distracted, unable to focus attention on any one task for a viable period of time, and frequently move unpredictably from task to task unproductively.

Behavioral Control Index

This index measures one's ability to maintain self-control and avoid distracting or interrupting others. People who score high on this scale often expend considerable effort not to engage in a variety of behavior, such as interrupting, speaking out, and acting impulsively, but are still unable to control such behaviors in most circumstances. They are often mistakenly seen as attention-seeking, when in fact they lack the control of ordinary inhibitory mechanisms used by others of the same age and development.

Emotional Control Index

This index measures one's ability to maintain control over emotions in challenging situations. High scores are indicative of individuals who very often overreact and may be seen as histrionic as well as being difficult to console. They often recognize the intrusiveness of such emotions later and may be regretful, but they continue to have difficulty controlling their emotions and regulating not so much the type but the level of emotional response they produce.

Overall Executive Functioning Index

This index is composed of all of the items from each of the executive functioning indexes just described, providing an overall indication of executive functioning. High scores indicate pervasive problems with self-regulation in the multiple domains of what is considered executive functioning. These individuals often have issues with many ADHD-like symptoms and are often diagnosed with ADHD and other disorders of the self-regulation of behavior. Traumatic brain injury patients are likely to have high scores on this scale. High scorers fail to integrate the necessary components of executive functioning successfully to engage in age-appropriate levels of day-to-day planning, problem-solving, and organization necessary for success in most learning environments.

Self-report of Personality

In contrast to rating scales, self-report scales lend themselves well to recording what goes on in the inner world of the child; they are best suited to report thoughts, feelings, attitudes, and internal reactions to people and events, which give information on the respondent's position on various personality dimensions. The SRP is an omnibus personality inventory consisting of statements that respondents answer in one of two ways. Four levels are provided: interview (SRP-I; ages 6 through 7), child (SRP-C; ages 8 through 11), adolescent (SRP-A; ages 12 through 21), and college (SRP-COL; ages 18 through 25).

Table 1.2 SRP Scales and Indexes

Scale	I	C	A	COL
Composite				
Emotional Symptoms		•	•	•
Inattention/Hyperactivity		•	•	•
Internalizing Problems		•	•	•
Personal Adjustment		•	•	•
School Problems		•	•	
Total Score	•			
Clinical and adaptive scales				
Alcohol Abuse				•
Anxiety		•	•	•
Attention Problems		•	•	•
Attitude to School		•	•	
Attitude to Teachers		•	•	
Atypicality		•	•	•
Depression		•	•	•
Hyperactivity		•	•	•
Interpersonal Relations		•	•	•
Locus of Control		•	•	•
Relations With Parents		•	•	•
School Maladjustment				•
Self-Esteem		•	•	•
Self-Reliance		•	•	•
Sensation Seeking			•	•
Sense of Inadequacy		•	•	•
Social Stress		•	•	•
Somatization			•	•
Content scale				
Anger Control			•	•
Ego Strength			•	•
Mania			•	•
Test Anxiety			•	•
Clinical Index				
Functional Impairment Index		•	•	

SRP Scale Descriptions

Alcohol Abuse—The tendency to use alcohol to feel better or to calm down and to experience adverse outcomes as a result of alcohol use

Anxiety—Feelings of nervousness, worry, and fear; the tendency to be overwhelmed by problems

Attention Problems—The tendency to report being easily distracted and unable to concentrate more than momentarily

Attitude to School—Feelings of alienation, hostility, and dissatisfaction regarding school

Attitude to Teachers—Feelings of resentment and dislike of teachers; beliefs that teachers are unfair, uncaring, or overly demanding

Atypicality—The tendency toward bizarre thoughts or other thoughts and behaviors considered “odd”

Depression—Feelings of unhappiness, sadness, and dejection; a belief that nothing goes right

Hyperactivity—The tendency to report being overly active, rushing through work or activities, and acting without thinking

Interpersonal Relations—The perception of having good social relationships and friendships with peers

Locus of Control—The belief that rewards and punishments are controlled by external events or people

Relations With Parents—A positive regard toward parents and a feeling of being esteemed by them

School Maladjustment—Perceived difficulties associated with attending postsecondary institutions, including feeling overwhelmed, unmotivated, and forced to attend school

Self-Esteem—Feelings of self-esteem, self-respect, and self-acceptance

Self-Reliance—Confidence in one’s ability to solve problems; a belief in one’s personal dependability and decisiveness

Sensation Seeking—The tendency to take risks and to seek excitement

Sense of Inadequacy—Perceptions of being unsuccessful in school, unable to achieve one’s goals, and generally inadequate

Social Stress—Feelings of stress and tension in personal relationships; a feeling of being excluded from social activities

Somatization—The tendency to be overly sensitive to, to experience, or to complain about relatively minor physical problems and discomforts

SRP Content Scale Descriptions

Anger Control—The tendency to become irritated and/or angry quickly and impulsively, coupled with an inability to regulate affect and self-control

Ego Strength—The expression of a strong self-identity and overall emotional competence, including feelings of self-awareness, self-acceptance, and positive perception of one’s social support network

Mania—The tendency toward extended periods of heightened arousal, excessive activity (at times obsessive in focus), and rapid idea generation in the absence of normal fatigue

Test Anxiety—The propensity for irrational worry over and fear of taking routine school tests of aptitude or academic skills, regardless of one’s degree of study preparation or confidence in knowledge of the test content

SRP Composites

School Problems

This factor is a broad measure of adaptation to school. Regardless of the setting where a child is seen (e.g., private office, clinic, psychiatric hospital), it is important for the clinician to recognize that school and the child’s relationships in the school setting are extremely salient in the child’s life.

Internalizing Problems

The Internalizing Problems composite can be characterized as a broad index of inwardly directed distress that reflects internalizing problems a child may experience.

Inattention/Hyperactivity

The Inattention/Hyperactivity composite scale represents an aggregated score containing scales most directly associated with ADHD symptomatology. When coupled with results from the TRS and/or PRS, Inattention/Hyperactivity composite scores in the At-Risk or Clinically Significant range may warrant further consideration of an ADHD diagnosis.

Personal Adjustment

The Personal Adjustment composite consists of the Relations With Parents, Interpersonal Relations, Self-Esteem, and Self-Reliance scales. Unlike scores on the clinical scale composites, high scores on this composite indicate positive levels of adjustment, and low scores indicate problematic levels of adjustment. At-risk scores suggest problems with interpersonal relationships, self-acceptance, identity development, and ego strength.

Emotional Symptoms Index

The Emotional Symptoms Index (ESI) is the SRP's most global indicator of serious emotional disturbance, particularly internalized disorders. It is composed of four scales from the Internalizing Problems composite (Social Stress, Anxiety, Depression, and Sense of Inadequacy) and two scales from the Personal Adjustment composite (Self-Esteem and Self-Reliance).

Functional Impairment Index

The final type of score provided on the SRP-C and SRP-A is the Functional Impairment Index. This index indicates the level of difficulty a child has engaging in successful or appropriate behavior across a variety of situations including interactions with others, performing age-appropriate tasks, regulating mood, and performing school-related tasks.



Behavioral Assessment System for Children, Third Edition

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