

# Validity and Reliability of the Perinatal Anxiety Screening Scale in a Portuguese sample of pregnant women

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ERA 2019  
27th  
EUROPEAN  
CONGRESS  
PSYCHIATRY

## INTRODUCTION

Although distinguishing normal and pathologic anxiety is particularly difficult in the perinatal period, anxiety disorders affect approximately 10% of the women in this period.

The evidence that perinatal anxiety leads to negative outcomes for family as a whole highlights the need for its early identification (Pereira et al. 2014)

To our knowledge there is only one instrument which items take into account this specific period, the Perinatal Anxiety Screening Scale (PASS; Somerville et al. 2014).

## OBJETIVES

To study the psychometric properties of the PASS Portuguese version, in pregnancy: factor structure using confirmatory factor analysis (CFA), internal consistency and correlations pattern with other psychological distress constructs.

## METHOD

### PARTICIPANTS AND PROCEDURE

Participants were recruited at Maternidade Bissaya Barreto and filled the assessment instruments in the 2<sup>nd</sup> trimester of pregnancy.



Second Trimester  
(Mean gestation  
weeks 17.13±4.929 )

350 Women  
Mean age  
32.18±5.246

- ✓ PASS
- ✓ Perinatal Depression Screening Scale (PDSS-24; Pereira et al., 2013)
- ✓ Profile of Mood States (POMS-27; Marques et al., 2017)

### STATISTICAL ANALYSIS

SPSS 23.0 and AMOS software were used.

## RESULTS

After deleting two items (1 and 2) and some errors were correlated, CFA indicated a good fit for the second-order factor ( $\chi^2/df=2.302$ ;  $CFI=0.913$ ;  $GFI=0.864$ ,  $RMSEA=0.061$ ;  $p[rmsea \leq 0.01] < 0.001$ ). The Cronbach alpha for the PASS 29 items version was  $\alpha=0.937$ , and for the four dimensions, the alphas were all  $\alpha > 0.790$  (Figure 1).

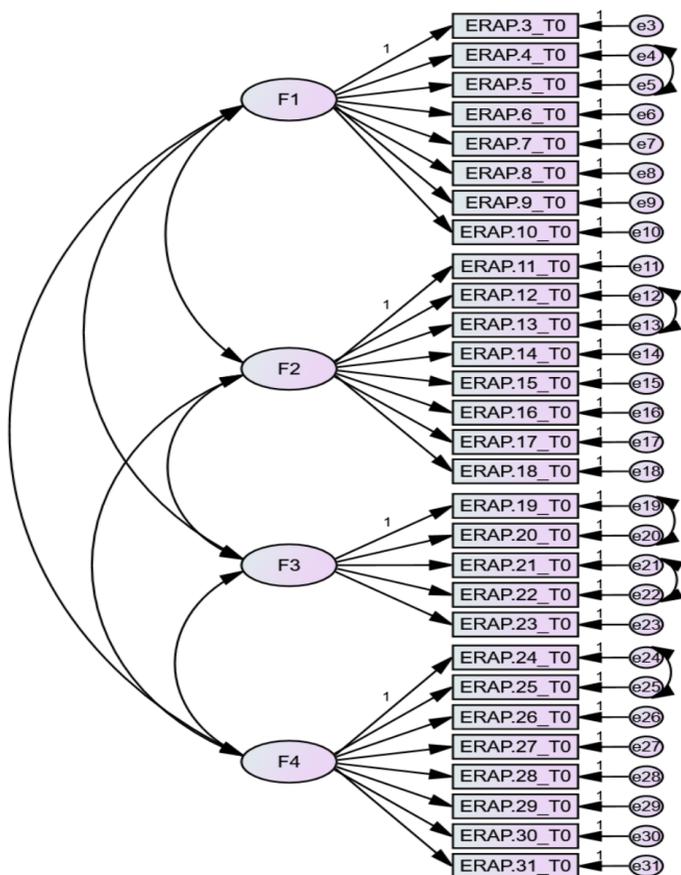


Figure 1. Confirmatory factor analysis of the second order model of PASS, excluding items 1 and 2 and correlated 5 pairs items errors.

F1- Excessive Worries and Specific Fears; F2- Perfectionism, Control, Trauma; F3- Social Anxiety; F4- Acute Anxiety and Adjustment.

### CONVERGENT-DIVERGENT VALIDITY

PASS total and dimensional scores were correlated positively, with moderately magnitude, with the dimensions Depression, Anxiety and Fatigue (POMS) and with a high magnitude with PDSS. PASS correlated negatively, with moderate magnitude with Vigor (POMS). In its dimensions PASS also correlated positively and moderately with Depression, Anxiety and Fatigue (POMS) and in high magnitude with PDSS. PASS dimensions correlated negatively, yet with moderate magnitude, with Vigor (POMS) (Table 1).

Table 1. Pearson's correlations between PASS dimensions and POMS dimensions and between PASS dimensions and PDSS.

	Depression (POMS)	Anxiety (POMS)	Vigor (POMS)	Fatigue (POMS)	PDSS
PASS_Total	.508**	.511**	-.455**	.420**	.684**
F1 Excessive Worries and Specific Fears	.497**	.483**	-.458**	.440**	.661**
F2 Perfectionism, Control, Trauma	.393**	.449**	-.332**	.379**	.540**
F3 Social Anxiety	.396**	.389**	-.332**	.256**	.529**
F4 Acute Anxiety and Adjustment	.489**	.440**	-.439**	.352**	.654**

\* p < .01, \*\* p < .05, \*\*\* p < .001.

## CONCLUSION

The PASS Portuguese version has good construct and convergent validity and reliability.

In the near future we will determine the PASS cut-offs with the best combination of sensitivity and specificity to screen for anxiety disorders in pregnancy and postpartum..

## REFERENCES

Marques C et al. 2017 Confirmatory factor analysis of the postpartum depression screening scale-21 in a sample of Portuguese women. European Psychiatry, 41, S241; Pereira AT et al. 2013. Short forms of the postpartum depression screening scale: as accurate as the original form. Archives of women's mental health, 16(1), 67-77; Pereira AT et al. 2014. Rastreamento da depressão e ansiedade no período perinatal. In, A. Macedo e A.T. Pereira (Coords.). Saúde Mental Perinatal. Maternidade nem sempre rima com felicidade. Lide; Somerville S et al. 2014 The perinatal anxiety screening scale: development and preliminary validation. Archives of women's mental health. 2014.