Purpose:
The BASC-2 is an integrated, ecological, multi-method/multi-dimensional evaluation system intended to assess observable behavior and self-perceptions of individuals ages 2-25. The primary purpose is to assist in the classification of emotional and behavioral disorders and to aid in the development of treatment plans.

Provides:
Components of the system (teacher- and parent-rating scales, self-report forms, structured developmental history, and direct observational formats) can be used in isolation or in conjunction with each other to provide an ecological, triangulated view of a child's social, emotional, behavioral, and adaptive functioning. Based on obtained ratings, performance is classified as “Normal,” “At-Risk,” or “Clinically-Significant” for a wide range of maladaptive and adaptive behaviors. In all, the test offers 16 primary scales, 7 optional “content” scales, along with 5 composite scales—though the number and nature of scales varies with the form used and age-level being assessed.

Standardization Issues:
In all, the sample included over 13,000 teacher report forms, parent rating scales, and self-report of personality forms, from children ages 2-18. The sample was matched to 2001 US Census data. Additional “College-Level norms” were developed based on 706 students, ages 18-25, for a college-version of the Self-Report of Personality. The overall sample was controlled for gender, race/ethnicity, geographic location (but not community size), SES/parent’s education, and included specific “special groups” for clinical comparisons (LD, Speech-Language, Cognitive Disability, EBD, Hearing Impairment, ADHD, Pervasive Developmental Disorder, and “other”). The special “clinical-samples” did not match demographically like the general norms sample.

Reliability and Validity Issues:
By nature of their subjectivity and rater-variables, the reliability of behavior rating scales can be problematic. However, the BASC-2 forms reported good mean internal-consistencies (.80s-.90s for composites; .60s-.90s for individual scales). Mean test-retest reliabilities
for the various composites were good on all forms, ranging from .70s to .90s. Mean interrater-reliabilities were acceptable on the Teacher and Parent forms. The manual reports good evidence for construct-validity, scale intercorrelations, factor analyses, and concurrent-validity with other well-established behavioral systems (i.e., Achenbach, Conners'). The impressive psychometric properties of the test's Parent- and Teacher-Rating Scales (and to a slightly lesser-degree, the Self-Report of Personality) are considered assets to the system and efforts are evident in the authors’ extensive reliability and validity data reporting.

**Additional Points:**

- Items were analyzed for bias during the test’s development, and items clearly biased toward gender and race/ethnicity were dropped.
- A Spanish-edition is available for the Parent Rating Scales, Self-Report of Personality, and Structured Developmental History. The Spanish-speaking population is included in the general norms but separate norms for this group are not available.
- Scores can be compared to the following groups: General Norms (combined or by gender), Clinical Norms (combined or by gender), Clinically-Identified ADHD group, LD-Identified Norms (combined or by gender).
- Use of the Clinical Norms may be helpful for rating scales which return with extremely high scores/profiles. Using this subgroup comparison may adjust for “ceiling-effects” on interpretation of “extreme” profiles, and allow for better differential diagnosis. It should be noted that the Clinical Norms subgroups are not representative of the general population, and consist of higher representation of boys, African-Americans, Hispanics, and (likely) lower-SES.
- Users of the BASC-2 Assist Plus software are able to calculate additional “Content Scales,” consisting of Anger Control, Ego Strength, Mania, Test Anxiety, Bullying, Developmental Social Disorders, Emotional Self-Control, Executive Functioning, Negative Emotionality, and Resiliency. The Assist Plus software also clusters specific items to match a variety of DSM-IV-TR criteria.
- The rating forms provide several internal validity scales (indexes) to assist in detecting possible patterns of responding which may threaten the validity of the form. Specifically, these scales assess for the presence of overly negative response set, inconsistencies in responding, omitted items, and patterned responses.
- The Manual also has sample profiles for several clinical groups: ADHD, Bipolar Disorder, Depression Disorders, Emotional/Behavioral Disturbance, Hearing Impairment, Learning Disability, Mental Retardation or Developmental Delay, Motor Impairment, Pervasive Developmental Disorders (including Asperger's and Autism), and Speech or Language Disorder. The Manual includes a discussion of the noteworthy features of each group's profiles, an important aid in differential diagnosis.
A comparison of IDEA’s EBD criteria to the respective corresponding BASC-2 scales is available in the manual, or online (under “Frequently Asked Questions; Table 5.1), at www.pearsonassessments.com/psyc/basc2faq.asp#16

While the various components (Parent and Teacher Rating Scales, Self-Report of Personality, Structured Developmental History, and Student Observation System) of the BASC-2 can be used in isolation, users are encouraged to use a “triangulated-approach” to assessing behavior (i.e., multiple informants, sources, and contexts).