

Eating Disorders in Youth- Questionnaire

English Version

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Introduction

The Eating Disorders in Youth-Questionnaire (EDY-Q) is a 14-item instrument for assessing early-onset restrictive eating disturbances in 8-13 year old children via self-report. The items are based on: the criteria for Avoidant/Restrictive Food Intake Disorder (ARFID) in the Diagnostic and Statistical Manual of Mental Disorders Fifth Edition (DSM-5; American Psychiatric Association APA, 2013); the Great Ormond Street criteria (Bryant-Waugh & Lask, 1995); and literature on early-onset restrictive eating disturbances. The EDY-Q consists of fourteen items, twelve of which cover ARFID symptomatology, including its three proposed variants (Bryant-Waugh, Markham, Kreipe & Walsh, 2010), food avoidance emotional disorder (FAED), selective eating (SE), and functional dysphagia (FD). Two additional items briefly address Pica and Rumination Disorder, two other early-onset feeding or eating disorders described in the DSM-5 (APA, 2013). The English version of the EDY-Q was translated from the German version (van Dyck & Hilbert, 2016) by AH. This translation was controlled by a retranslation procedure through a licensed translator.

Scoring

Each item is rated on a 7-point Likert scale ranging from 0 = *never* to 6 = *always*. The items cover the three variants of ARFID, FAED (items 1-3), SE (items 8, 9, and 12), and FD (items 10 and 11). In addition, perceived weight problems with weighing too little (items 4 and 5) are assessed, referring to the ARFID-associated failure to meet appropriate energy needs. Distorted cognitions about weight or shape (items 6 and 7) are assessed as exclusion criterion of ARFID. The following composite scores can be derived from the EDY-Q:

- Total mean score (items 1-5 and 8-12).
- In Kurz, van Dyck, Dremmel, Munsch, and Hilbert (2015), all of the following indicators were required to be met at the specified thresholds in order to gauge the presence of symptoms of ARFID according to DSM-5:
 - At least one of the DSM-5-based examples of the variants of ARFID (items 2, 10, 12) reported at least often (≥ 4).
 - Weight problems (item 4) reported at least often (≥ 4).
 - Distorted cognitions about weight or shape (items 6 and 7) reported less than sometimes (< 3).

The items concerning pica (item 13) and rumination disorder (item 14) can be evaluated descriptively.

Psychometric properties

Psychometric evaluations for the total scale (Kurz et al., 2015; Kurz, van Dyck, Dremmel, Munsch, & Hilbert, 2016; van Dyck et al., 2013) revealed a low rate of missing data, medium-to-high item difficulty, and low-to-medium corrected item-total correlations. The internal consistency for the EDY-Q mean score was acceptable for a brief, middle childhood assessment (Cronbach's $\alpha = .62$). Exploratory factor analyses confirmed a factor structure with the three proposed variants of ARFID, however, with low internal consistencies related to the brevity of assessment encompassing two or three items. Evidence of convergent and divergent validity, as well as discriminant validity, is available.

Instructions

Previous research supports the use of the EDY-Q in children ages 8-13 years; evaluations at other ages are outstanding. Especially when conducting the EDY-Q with young children, it may be important to read the questions to them and/or explain the terminology.

References

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