Appendix 1 (as supplied by the authors): Diagnostic Interview Questions DSM-IV (SCID)

DSM-IV Criteria	Participant Response
(1) In the last month has there been a period of time when you were feeling depressed or down most of the day, nearly every day? (nearly every day? for as long as 2 weeks?)	Yes/No
(2) In the last month have you lost interest in things that you'd usually enjoy? (nearly every day? for as long as 2 weeks?)	Yes/No
(3) Have there been any changes in your appetite or weight?, have you felt like eating less or more than usual? Or force yourself to eat? (nearly every day? for as long as 2 weeks?)	Yes/No
(4) How have you been sleeping? trouble falling asleep? maybe waking frequently in the night or early morning? Or have you been sleeping more than usual? (nearly every day? for as long as 2 weeks?)	Yes/No
(5) Have you been feeling so fidgety or restless, that you feel unable to sit still? Or what about moving or talking more slowly than normal? Feeling like you're in slow motion? (nearly every day? for as long as 2 weeks?)	Yes/No
(6) Have you noticed a decrease in your energy level? Have you felt fatigued or feel a loss of energy nearly every day (nearly every day? for as long as 2 weeks?)	Yes/No
(7) How have you been feeling about yourself? Are you feeling guilty or blame yourself about things you have or haven't done? Have you felt like a failure or felt worthless as a person? (nearly every day? for as long as 2 weeks?)	Yes/No
(8) Have you had a problems concentrating or thinking? Or has it been hard to make decisions about everyday things? (nearly every day? for as long as 2 weeks?)	Yes/No
(9) Sometimes if a person feels down or depressed they feel like life's not worth living or have thoughts of dying, have you felt like that at all?	Yes/No
(10) For items 1–9: If 2–4 items or \geq 5 items are rated 'Yes' (which <i>must</i> include either item 1 or item 2), proceed to items 11–14	<u>Score =</u>
(11) Have these problems made it hard for you to do your work, take care of things at home, or get along with other people?	Yes/No
(12a) Just before this began were you physically ill?	Yes/No
Just before this began were you using any medication?	Yes/No
(12b) Just before this began were you drinking or using any drugs?	Yes/No
(13) Did this begin soon after someone close to you died?	Yes/No
(14) Have you had a baby recently? Y/N Did this start within 4 weeks of the birth?	Yes/No

DSM-IV criteria are identical for assessment of depressive disorder in the antenatal and postnatal period. Questions 1–9 define symptom score as below:

- Criteria for minor depression met IF 2-4 questions rated 'Yes' (one of which must include either question 1 or question 2).

- Criteria for major depression met IF \geq 5 questions rated 'Yes' (one of which must include either question 1 or question 2).

Questions 12–14 rule out other effects/conditions.

Guidance according to Structured Clinical Interview for DSM-IV – Clinical Version (SCID-CV).¹

Reference

1. First MB, Spitzer RL, Gibbon M, et al. *Structured clinical interview for DSM-IV — clinical version (SCID-CV) (user's guide and interview)*. Washington (DC): American Psychiatric Press; 1997.