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A Review of the Adult Separation Anxiety Questionnaire (ASA-27): Community and Clinical Norms, Category Descriptors and Psychometric Properties

The Adult Separation Anxiety Questionnaire (ASA-27) was developed by Manicavasagar and colleagues (2003). It is a 27-item self-report measure that assesses the symptoms of separation anxiety in adults. This technical review provides clinicians with clinical and community norming data, gender-specific percentile rankings, and qualitative descriptors to enhance interpretation and clinical utility of the ASA-27.

View the ASA-27 on NovoPsych.com.au

December 2024

Developer

The Adult Separation Anxiety Questionnaire (ASA-27) was developed by Manicavasagar and colleagues (2003):

> Manicavasagar, V., Silove, D., Wagner, R., & Drobny, J. (2003). A self-report questionnaire for measuring separation anxiety in adulthood. *Comprehensive Psychiatry, 44*(2), 146–153. https://doi.org/10.1053/comp.2003.50024

This document was developed by NovoPsych to review contemporary literature and to describe original scoring methodologies and to provide interpretation material, enhance normative data and provide qualitative descriptors.

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Description

The Adult Separation Anxiety Questionnaire (ASA-27) is a self-report measure designed to assess the presence and severity of separation anxiety symptoms in adults (18+). It was developed using the diagnostic criteria for separation anxiety disorder found in the DSM (Manicavasagar et al., 2003). The scale is primarily used as a screening tool to identify adult separation anxiety disorder and assess the severity of symptoms, particularly among clinical populations or those with average to high levels of Adult Separation Anxiety Disorder (ASAD) in the community. It should be noted that ASAD is also referred to as SEPAD, Separation Anxiety Disorder in Adults.

Research reported in the *International Journal of Epidemiology* of over 665,000 individuals found that 6.7% experienced an anxiety disorder in the past 12 months (Steel et al., 2014). Among anxiety disorders, separation anxiety has gained recognition as a significant condition impacting adults (American Psychiatric Association, 2013; Patel et al., 2021). Traditionally considered a childhood condition, the DSM-5 expanded the criteria to include the manifestation of separation anxiety disorder in adulthood. Symptoms involve excessive fear or distress associated with separation from attachment figures or familiar environments, persistent worry about harm to loved ones, often manifesting in avoidance behaviours, dependence, or heightened emotional responses and even physical symptoms such as nausea or headache in actual or anticipated separation (American Psychiatric Association, 2013).

In therapy, the ASA-27 can be integrated into formulation, provide important detail for attachment-informed therapies and shape the clinician's approach to developing the therapeutic relationship. The scale can assist with the identification of treatment targets and interventions, such as the development of adaptive strategies for self-regulation and meeting attachment needs, as well as promoting self-awareness. Early evidence suggests that the presence of ASAD may influence treatment outcomes for individuals with comorbid anxiety disorders, highlighting the importance of ASAD identification and targeted interventions (see Silove et al., 2010).

Psychometric Properties

Research has shown that ASA-27 scores have a relationship with important psychobiological constructs. For example, higher scale scores have been associated with reduced mitochondrial translocator protein (TSPO) expression and density—key indicators of proper stress and anxiety regulation. This suggests that greater adult separation anxiety can result in dysregulated biological responses to stress (Abelli et al., 2010). Furthermore, ASA-27 scores have been linked to behavioural inhibition (shyness, withdrawal, fearfulness), a temperamental predisposition originating in childhood that can persist into adulthood and is a risk factor for developing an anxiety disorder (Pini et al., 2022).

The ASA-27 could also be used to give insight into risk, as higher scores have been linked with elevated suicidal risk (measured via scores on the Hamilton Depression Rating Scale) in outpatients diagnosed with mood and anxiety disorders. Specifically, outpatients with a score above the cut off for ASAD had 1.86x higher odds of experiencing suicidal thoughts compared to those with a score lower than the cut off (Pini et al., 2021).

Psychometric studies of the ASA-27 support its validity and reliability in both clinical and community settings. Internal reliability has been observed to be strong, with Cronbach's alpha values ranging from 0.89 to 0.95 across studies (Finsaas et al., 2020; Manicavasagar et al., 2003). Additionally, test-retest reliability over an average three-week interval ($r = 0.86$, $p < .001$), indicating stability of the measure over time (Manicavasagar et al., 2003). Principal components analysis has consistently revealed a unidimensional structure, with a dominant first factor accounting for 45% of the variance and item loadings ranging from 0.38 to 0.80 (Finsaas et al., 2020).

Convergent validity is supported by significant correlations with structured interview assessments for ASAD (Manicavasagar et al., 2003). The scale also demonstrated significant relationships with measures of related constructs, including complicated grief, peritraumatic dissociation, and avoidance/intrusion symptoms (Carmassi et al., 2015; Gesi et al., 2017). Items reflect DSM-derived criteria for ASAD, and items based on these criteria exhibit stronger construct relevance compared to non-DSM items, as confirmed by item response theory analyses (Finsaas et al., 2020). Furthermore, item discrimination parameters show the scale is able to differentiate individuals at varying levels of moderate to severe symptoms, and the scale is invariant or unbiased by gender (Finsaas et al., 2020).

Two cut off scores are provided, a primary point of ≥22, and a lower, high sensitivity cut off of ≥16. The primary cut off possesses a high sensitivity (81%) and specificity (84%) and an area under the curve of .9, supporting its ability to distinguish individuals with clinically significant ASAD from those without it (Carmassi et al., 2015; Manicavasagar et al., 2003). The alternative, high sensitivity cut off (≥16) aims to provide a wide net approach, making sure (at a 97% sensitivity) to capture all ASAD cases while making concessions to include non-cases. This results in a situation where a clinician can be confident that their client is not being incorrectly overlooked, but requires a more thorough evaluation.

Clinical and general population percentiles are available, computed by NovoPsych based on mean and standard deviation scores. The clinical sample consisted of 509 (34% male and 66% female) psychiatric outpatients with mood and anxiety disorders, with a mean age (SD) of 32.62(11.12) years, and a mean gender-combined score (SD) of 29.11(15.6) (Pini et al., 2021). The female non-clinical sample included 482 participants from the general population, with a mean age (SD) of 41.8(4.8). This group had a mean score (SD) of 10.34(9.61). The male non-clinical sample included 407 general population participants, with a mean age (SD) of 43.3(5.7). This group had a mean score (SD) of 8.10(8.46) (Finsaas et al., 2020).

Below are the clinical and general sample percentiles mapped to raw scores broken up by the standard (≥22) and high sensitivity (≥16) cut scores.

Community, Female:

- **Mean(SD):** 10.34(9.61)
- **22-81:** Percentiles = 88th to 99th: Probable adult separation anxiety disorder
- **16-21:** Percentiles = 69th to 87th: Some separation anxiety
- **0-15:** Percentile = 14th to 68th: Low or no separation anxiety

Community, Male:

- **Mean(SD):** 8.1(8.46)
- **22-81:** Percentiles = 94th to 99th: Probable adult separation anxiety disorder
- **16-21:** Percentiles = 80th to 93rd: Some separation anxiety
- **0-15:** Percentile = 17th to 79th: Low or no separation anxiety

Clinical, Combined Gender:

- **Mean(SD):** 29.11(15.60)
- **22-81:** Percentiles = 31st to 99th: Probable adult separation anxiety disorder
- **16-21:** Percentiles = 20th to 30th: Some separation anxiety

- **0-15:** Percentile = 3rd to 19th: Low or no separation anxiety

Scoring & Interpretation

ASA-27 results are reported in raw scores ranging from 0-81. Higher scores indicate more severe symptoms of adult separation anxiety.

Raw score descriptors are presented using primary (≥22) and high sensitivity cut offs (≥16):

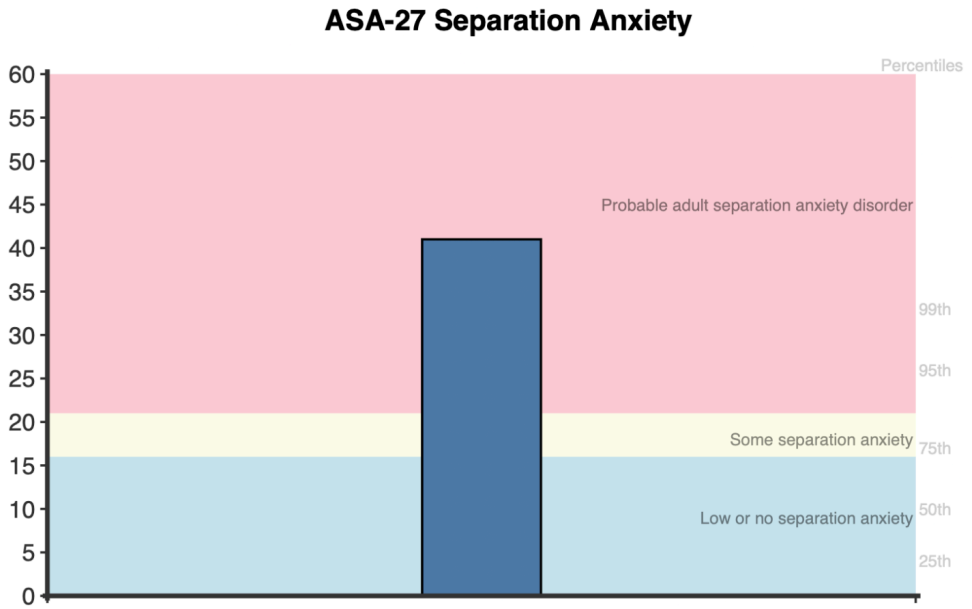
- **Low or no separation anxiety** (0–15): Minimal symptoms and alignment with typical adult functioning.
- **Some separation anxiety** (16–21): Mild to moderate symptoms of separation anxiety. This range is highly sensitive, identifying nearly all true cases of ASAD, but also includes false positives.
- **Probable adult separation anxiety disorder** (≥22): Indicates the presence of severe and pervasive symptoms of separation anxiety that involve avoidance behaviours, dependency, excessive worry about harm to attachment figures, and difficulty functioning independently.

Percentiles are also provided to allow comparison of the respondent's score to a community sample, where a percentile of 50 represents the average psychological distress of a member of the general population.

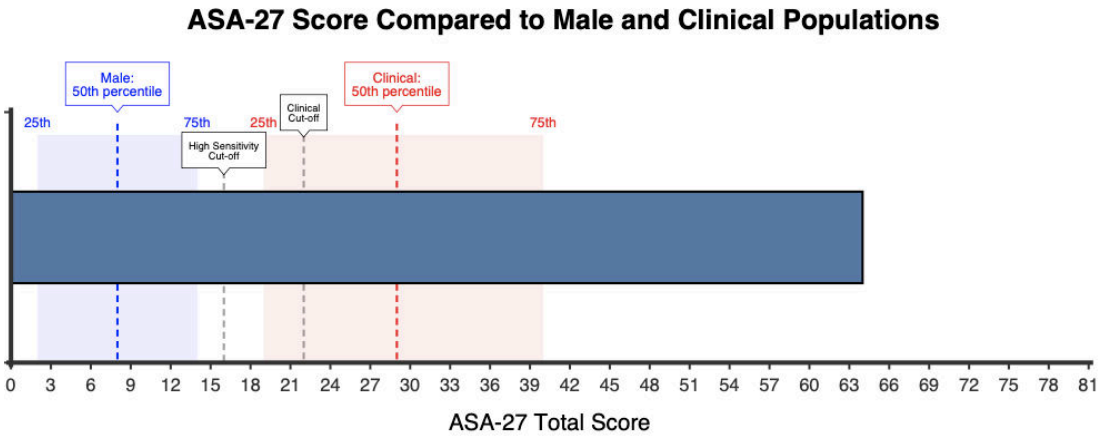
Results

	Raw Score (0-81)	Community Percentile	Descriptor
Separation Anxiety	41	99.99	Probable adult separation anxiety disorder

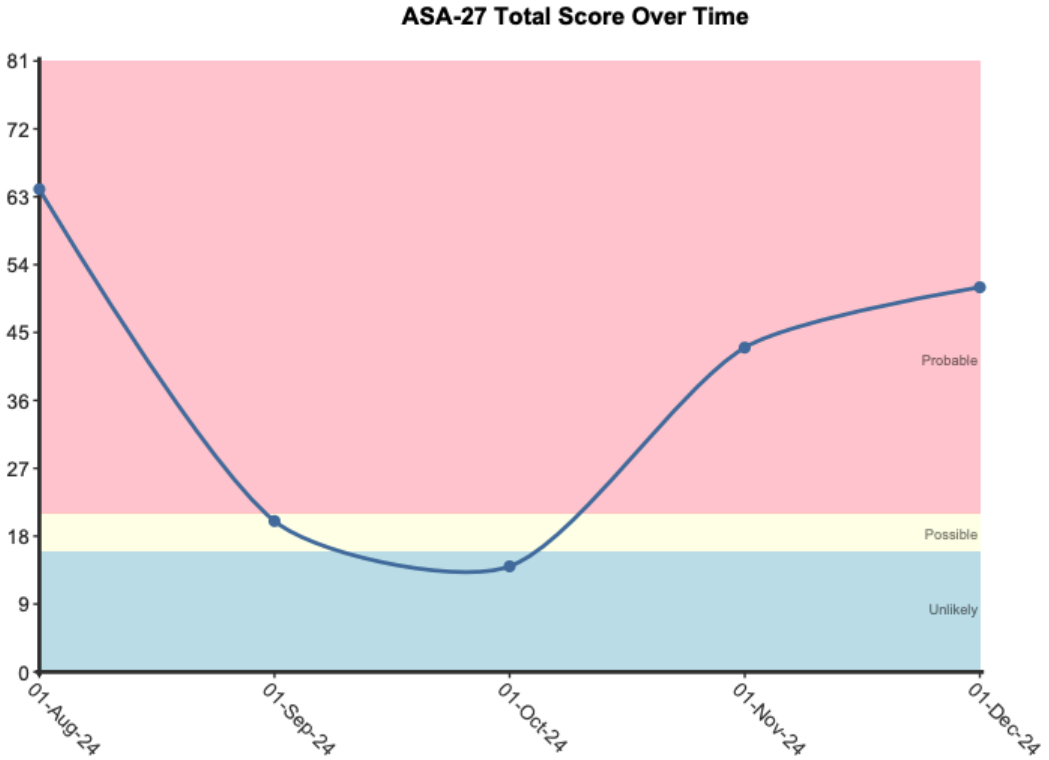
On first administration, a bar graph displaying the total raw score is presented, with three coloured ranges indicating Low or no separation anxiety (0-15), Some separation anxiety (16-21), and Probable adult separation anxiety disorder (≥22).



A horizontal bar graph is also shown, which compares the respondent's score to the distributions of both clinical and general populations.



When administered more than once, a graph showing the total raw score over time is produced. This is useful for tracking symptom progression, monitoring treatment progress or providing clients with feedback.



Supporting Information

This section details the community gender-specific norms for the ASA-27 as well as the clinical norms, based on research data. By accounting for gender differences in separation anxiety presentation, these norms enhance the

interpretability of ASA-27 scores, enabling clinicians to assess adult separation anxiety with greater precision. Table 1 shows the percentile tables for the clinical and community samples.

NovoPsych has used the means and standard deviations from Finsaas et al. (2020) and Pini et al. (2021) to convert ASA-27 scores to percentiles as shown in Table 1, according to the following equation.

$$\text{Percentile} = 100 \times \Phi(x - M)/SD)$$

Where:

- x is the score
- M is the mean
- SD is the standard deviation
- Φ is the standard normal cumulative distribution function

This equation first standardises the score to a z-score by subtracting the mean and dividing by the standard deviation, then converts the z-score to a percentile by applying the standard normal cumulative distribution function and multiplying by 100. The percentiles contextualise each score relative to typical scores among adults in clinical as well as general community settings, offering a clear perspective on how the respondent's level of separation anxiety compares to those of their peers.

Table 1. Percentiles for total ASA-27 scores, with community stratified by gender.

	Community		Clinical
Score	**Male**	**Female**	**Combined**
0	16.92	14.10	3.10
1	20.07	16.55	3.58
2	23.54	19.27	4.11
3	27.33	22.25	4.71
4	31.40	25.47	5.37
5	35.70	28.92	6.11
6	40.20	32.58	6.92
7	44.83	36.41	7.82
8	49.53	40.38	8.80
9	54.24	44.46	9.87
10	58.88	48.59	11.03

11	63.41	52.74	12.28
12	67.76	56.86	13.64
13	71.88	60.90	15.09
14	75.72	64.83	16.64
15	79.26	68.61	18.29
16	82.48	72.21	20.03
17	85.36	75.59	21.88
18	87.9	78.73	23.82
19	90.12	81.62	25.85
20	92.02	84.26	27.96
21	93.63	86.63	30.16
22	94.98	88.75	32.43
23	96.09	90.61	34.77
24	96.99	92.24	37.16
25	97.71	93.64	39.61
26	98.28	94.84	42.10
27	98.73	95.85	44.62
28	99.07	96.69	47.16
29	99.33	97.39	49.72
30	99.52	97.96	52.27
31	99.66	98.42	54.82
32	99.76	98.79	57.35
33	99.84	99.08	59.85
34	99.89	99.31	62.30
35	99.93	99.49	64.71

36	99.95	99.62	67.06
37	99.97	99.72	69.35
38	99.98	99.8	71.56
39	99.99	99.86	73.70
40	99.99	99.9	75.74
41	99.99	99.93	77.70
42	99.99	99.95	79.57
43	99.99	99.97	81.34
44	99.99	99.98	83.01
45	99.99	99.98	84.58
46	99.99	99.99	86.05
47	99.99	99.99	87.43
48	99.99	99.99	88.70
49	99.99	99.99	89.88
50	99.99	99.99	90.97
51	99.99	99.99	91.97
52	99.99	99.99	92.89
53	99.99	99.99	93.72
54	99.99	99.99	94.47
55	99.99	99.99	95.15
56	99.99	99.99	95.76
57	99.99	99.99	96.31
58	99.99	99.99	96.80
59	99.99	99.99	97.23
60	99.99	99.99	97.62

61	99.99	99.99	97.95
62	99.99	99.99	98.25
63	99.99	99.99	98.51
64	99.99	99.99	98.73
65	99.99	99.99	98.93
66-81	99.99	99.99	99.10

Interpretive Text

The interpretive text for the ASA-27 follows a structured format that adapts based on the client's scores and gender. The text begins with a general statement about the client's overall level of separation anxiety, categorizing their total score into one of the three possibilities.
Additional context is given in the next statements specific to each category range.

Low or no separation anxiety:

"The client's total score suggests minimal symptoms of adult separation anxiety. This indicates that the client is unlikely to be experiencing distress or impairment related to separation from attachment figures or familiar environments. While the scores were in the normal range, a response of note was:
<Top response included, and if tied the top two are included.>"

Some separation anxiety:

"The client's total score suggests some symptoms of separation anxiety."
Responses that were indicative of separation anxiety included:
<Top three responses included.>

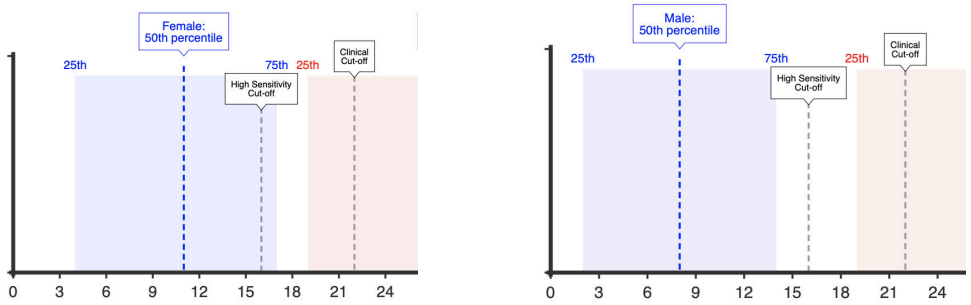
Probable adult separation anxiety disorder:

"The client's total score indicates significant symptoms of adult separation anxiety, consistent with probable adult separation anxiety disorder. They are likely to be experiencing pervasive symptoms such as distress, avoidance behaviours, dependency, and heightened worry about harm to attachment figures."
Responses that were indicative of separation anxiety included:
<Top five responses included.>

The text also includes specific percentile comparisons to both general population and clinical reference groups, with these comparisons being tailored to the client's gender.

"Their score indicates a clinically significant level of separation anxiety, higher than XX% of [females | males] among the general population and XX% of individuals in a clinical population."

These different community percentile distributions for males and females are also displayed according to gender in the blue rectangle area of the comparison graph:



For repeated/follow-up assessments, the text adds information about changes since the initial assessment such as the date of initial assessment, the direction of change (increased, decreased, or no change), movement between ranges (if applicable) and the magnitude of score change compared to first assessment.

"Since the respondent was first assessed on [Date], their total separation anxiety has [not shown change | increased | decreased][, from (initial range) to (current range)][if change > 0: (score change = X)]."

Full example of a female client in the probable adult separation anxiety range, having moved categories from a lower range.

"Since the respondent was first assessed on 15 March 2024, their total separation anxiety has increased, from Some separation anxiety to Probable adult separation anxiety disorder (score change = 8). The client's total score indicates significant symptoms of adult separation anxiety, consistent with probable adult separation anxiety disorder. They are likely to be experiencing pervasive symptoms such as distress, avoidance behaviours, dependency, and heightened worry about harm to attachment figures. Their score indicates a clinically significant level of separation anxiety, higher than 98% of females among the general population and 85% of individuals in a clinical population."

Responses that were indicative of separation anxiety included:
- 1. Have you felt more secure at home when you are with people that are close to you? (Fairly often)
- 9. Have you experienced symptoms such as headaches, stomach-aches or nausea (or other) before leaving for work or other regular activity outside the home? (Fairly often)
- 2. Have you experienced difficulty in staying away from home for several hours at a time? (Happens occasionally)
- 3. Have you been carrying around something in your purse or wallet that gives you a sense of security or comfort?

(Happens occasionally)
- 4. Have you experienced extreme stress before leaving home to go on a long trip? (Happens occasionally)

Developer

Manicavasagar, V., Silove, D., Wagner, R., & Drobny, J. (2003). A self-report questionnaire for measuring separation anxiety in adulthood. *Comprehensive Psychiatry, 44*(2), 146–153.

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Adult Separation Anxiety Questionnaire (ASA-27)

Instructions:

The following statements refer to symptoms that you might have experienced as an adult (over the age of 18 years). Please select the option for each item according to whether you have experienced that symptom.

		This has never happened	This happens occasionally	This happens fairly often	This happens very often
1	Have you felt more secure at home when you are with people that are close to you?	0	1	2	3
2	Have you experienced difficulty in staying away from home for several hours at a time?	0	1	2	3
3	Have you been carrying around something in your purse or wallet that gives you a sense of security or comfort?	0	1	2	3
4	Have you experienced extreme stress before leaving home to go on a long trip?	0	1	2	3
5	Have you suffered from nightmares or dreams about being separated from someone close to you?	0	1	2	3
6	Have you experienced extreme stress before leaving someone close to you when going away on a trip?	0	1	2	3
7	Have you become very upset when your usual daily routine is disrupted?	0	1	2	3
8	Have you been worried about the intensity of your relationship with those people closest to you, eg. that you are too strongly attached?	0	1	2	3
9	Have you experienced symptoms such as headaches, stomach-aches or nausea (or other) before leaving for work or other regular activity outside the home?	0	1	2	3
10	Do you find that you talk a lot in order to keep people close to you?	0	1	2	3
11	Have you been especially concerned about where people close to you are going when you are separated from them, eg. when you leave them to go to work or go out of the house?	0	1	2	3
12	Have you experienced difficulty in sleeping alone at night, eg. is your sleep better if someone close to you is in the house?	0	1	2	3
13	Have you noticed that you are better able to go off to sleep if you can hear the voices of people you are close to or the sound of the TV or the radio?	0	1	2	3
14	Have you become very distressed when thinking about being away from people that are close to you?	0	1	2	3
15	Have you suffered from nightmares or dreams about being away from home?	0	1	2	3
16	Have you been worrying a lot about people close to you coming to serious harm, for example, meeting with a car accident, or suffering from a fatal illness?	0	1	2	3

		This has never happened	This happens occasionally	This happens fairly often	This happens very often
17	Have you become very upset with changes to your usual daily routine if they interfere with your contact with persons close to you?	0	1	2	3
18	Have you been worrying a lot about people you care about leaving you?	0	1	2	3
19	Have you found that you sleep better if the lights are on in the house or in the bedroom?	0	1	2	3
20	Have you tried to avoid being at home alone especially when people close to you are out?	0	1	2	3
21	Have you suffered from sudden bouts of anxiety or panic attacks (eg. sudden shaking, sweating, shortness of breath, pounding heart) when thinking about leaving people close to you or about them leaving you?	0	1	2	3
22	Have you found that you get anxious if you do not speak to people that are close to you on the telephone regularly, eg. daily?	0	1	2	3
23	Have you been afraid that you would not be able to cope or could not go on if someone you cared about left you?	0	1	2	3
24	Have you suffered from sudden bouts of anxiety or panic attacks (eg. sudden shaking, sweating, shortness or breath, pounding heart) when separated from people close to you?	0	1	2	3
25	Have you been worrying a lot about possible events that may separate you from those close to you eg. because of work requirements?	0	1	2	3
26	Have people close to you mentioned that you 'talk a lot'?	0	1	2	3
27	Have you been worrying that your relationships with some people are so close that it may cause them problems?	0	1	2	3

NovoPsych

Sample Result

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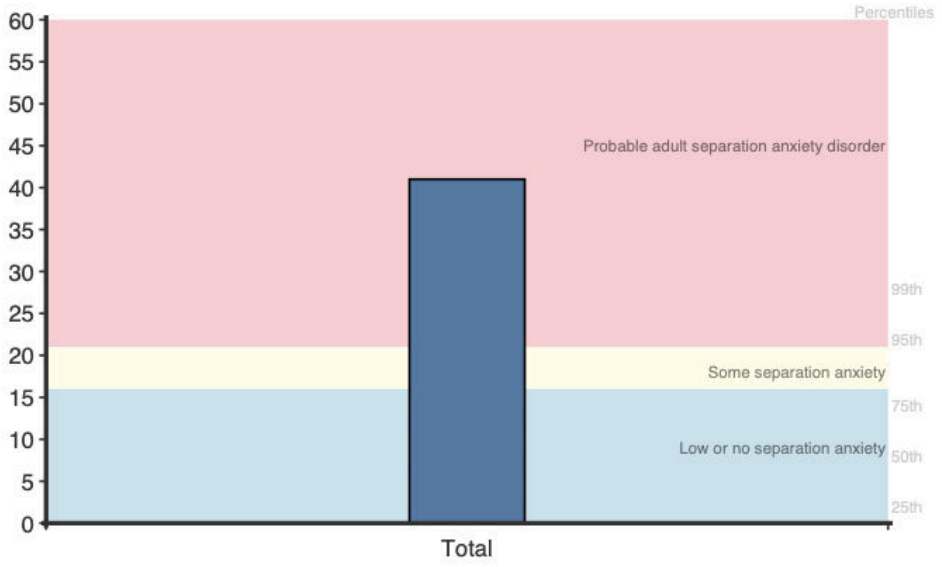
Adult Separation Anxiety Questionnaire (ASA-27)

Client Name	John Doe	*Date administered*	4 Dec 2024
Date of birth (age)	19 Jan 1999 (25)	*Time taken*	20s
Assessor	EmersonDev BartholomewDev		

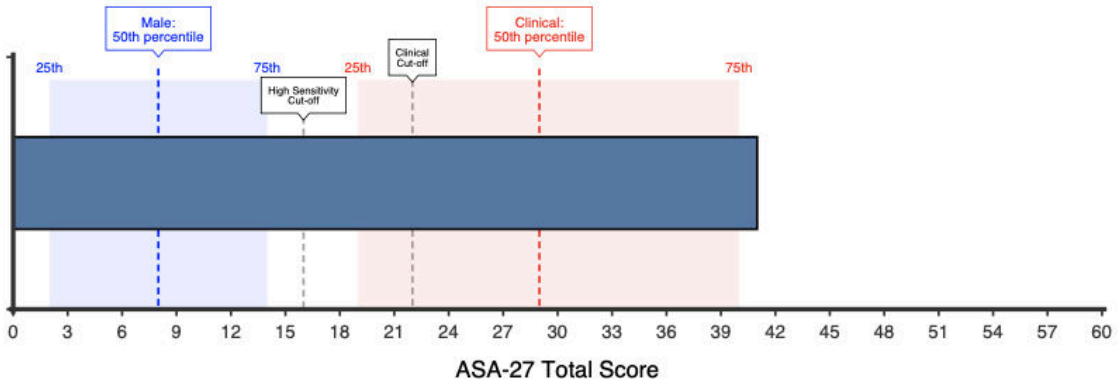
Results

	Raw Score (0-81)	Community Percentile	Descriptor
Separation Anxiety	41	99.99	Probable adult separation anxiety disorder

ASA-27 Separation Anxiety



ASA-27 Score Compared to Male and Clinical Populations



Assessment powered by NovoPsych

Client Name	John Doe

Interpretation

The client's total score indicates significant symptoms of adult separation anxiety, consistent with probable adult separation anxiety disorder. They are likely to be experiencing pervasive symptoms such as distress, avoidance behaviours, dependency, and heightened worry about harm to attachment figures. Their score indicates a clinically significant level of separation anxiety, higher than 99% of males among the general population and 78% of individuals in a clinical population.

Responses that were indicative of separation anxiety included:
- 2. Have you experienced difficulty in staying away from home for several hours at a time? (Fairly often)
- 6. Have you experienced extreme stress before leaving someone close to you when going away on a trip? (Fairly often)
- 8. Have you been worried about the intensity of your relationship with those people closest to you, eg. that you are too strongly attached?
(Fairly often)
- 9. Have you experienced symptoms such as headaches, stomach-aches or nausea (or other) before leaving for work or other regular activity outside the home? (Fairly often)
- 11. Have you been especially concerned about where people close to you are going when you are separated from them, eg. when you leave them to go to work or go out of the house? (Fairly often)

Scoring and Interpretation Information

For comprehensive information on the ASA-27, see here.

ASA-27 results are reported in raw scores ranging from 0-81. Higher scores indicate more severe symptoms of adult separation anxiety.

Raw score descriptors are presented using primary (22+) and high sensitivity cut offs (16+):

· Low or no separation anxiety separation anxiety (0–15): Minimal symptoms and alignment with typical adult functioning.
· Some separation anxiety (16–21): Mild to moderate symptoms of separation anxiety. This range is highly sensitive, identifying nearly all true cases of ASAD, but also includes false positives. Further evaluation is recommended to rule out ASAD for clients in this range.
· Probable adult separation anxiety disorder (22+): Indicates the presence of severe and pervasive symptoms of separation anxiety that involve avoidance behaviours, dependency, excessive worry about harm to attachment figures, and difficulty functioning independently.

Percentiles are also provided to allow comparison of the respondent's score to clinical and community samples, where a percentile of 50 represents the average psychological distress of a mental health client or member of the general population.

On first administration, a bar graph displaying the total raw score is presented, with three coloured ranges indicating Low or no separation anxiety (0-15), Some separation anxiety (16-21), and Probable adult separation anxiety disorder (22+) categories. A horizontal bar graph will also be shown, which compares the respondent's score to the distributions of both clinical and general populations.

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Client Name	John Doe

Scoring and Interpretation Information (cont.)

When administered more than once, a graph showing the total raw score over time is produced. This is useful for tracking symptom progression, monitoring treatment progress or providing clients with feedback.

Client Responses

		This has never happened	This happens occasionally	This happens fairly often	This happens very often
1	Have you felt more secure at home when you are with people that are close to you?	0	**1**	2	3
2	Have you experienced difficulty in staying away from home for several hours at a time?	0	1	**2**	3
3	Have you been carrying around something in your purse or wallet that gives you a sense of security or comfort?	0	**1**	2	3
4	Have you experienced extreme stress before leaving home to go on a long trip?	0	**1**	2	3
5	Have you suffered from nightmares or dreams about being separated from someone close to you?	0	**1**	2	3
6	Have you experienced extreme stress before leaving someone close to you when going away on a trip?	0	1	**2**	3
7	Have you become very upset when your usual daily routine is disrupted?	0	**1**	2	3
8	Have you been worried about the intensity of your relationship with those people closest to you, eg. that you are too strongly attached?	0	1	**2**	3
9	Have you experienced symptoms such as headaches, stomach-aches or nausea (or other) before leaving for work or other regular activity outside the home?	0	1	**2**	3
10	Do you find that you talk a lot in order to keep people close to you?	0	**1**	2	3
11	Have you been especially concerned about where people close to you are going when you are separated from them, eg. when you leave them to go to work or go out of the house?	0	1	**2**	3
12	Have you experienced difficulty in sleeping alone at night, eg. is your sleep better if someone close to you is in the house?	0	1	**2**	3
13	Have you noticed that you are better able to go off to sleep if you can hear the voices of people you are close to or the sound of the TV or the radio?	0	**1**	2	3
14	Have you become very distressed when thinking about being away from people that are close to you?	0	1	**2**	3
15	Have you suffered from nightmares or dreams about being away from home?	0	1	**2**	3
16	Have you been worrying a lot about people close to you coming to serious harm, for example, meeting with a car accident, or suffering from a fatal illness?	0	1	**2**	3
17	Have you become very upset with changes to your usual daily routine if they interfere with your contact with persons close to you?	0	**1**	2	3

Assessment powered by
NovoPsych

Client Name	John Doe

Client Responses (cont.)

		This has never happened	This happens occasionally	This happens fairly often	This happens very often
18	Have you been worrying a lot about people you care about leaving you?	0	1	**2**	3
19	Have you found that you sleep better if the lights are on in the house or in the bedroom?	0	**1**	2	3
20	Have you tried to avoid being at home alone especially when people close to you are out?	0	1	**2**	3
21	Have you suffered from sudden bouts of anxiety or panic attacks (eg. sudden shaking, sweating, shortness of breath, pounding heart) when thinking about leaving people close to you or about them leaving you?	0	**1**	2	3
22	Have you found that you get anxious if you do not speak to people that are close to you on the telephone regularly, eg. daily?	0	**1**	2	3
23	Have you been afraid that you would not be able to cope or could not go on if someone you cared about left you?	0	1	**2**	3
24	Have you suffered from sudden bouts of anxiety or panic attacks (eg. sudden shaking, sweating, shortness or breath, pounding heart) when separated from people close to you?	0	1	**2**	3
25	Have you been worrying a lot about possible events that may separate you from those close to you eg. because of work requirements?	0	**1**	2	3
26	Have people close to you mentioned that you 'talk a lot'?	0	1	**2**	3
27	Have you been worrying that your relationships with some people are so close that it may cause them problems?	0	**1**	2	3