

The Validation of the Automatic Thoughts Questionnaire-8 among Vietnamese University Students

Truc Nguyen- Thanh*, Bich-Tuyen Nguyen-Thi



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ABSTRACT

Introduction: The research conducted across diverse cultures and populations has demonstrated a significant correlation between negative beliefs and thoughts and psychological issues, particularly depression. **Method:** The current study aimed to evaluate the psychometric properties of the Vietnamese version of the Automatic Thoughts Questionnaire-8 (ATQ-8) in assessing negative automatic thoughts and their impact on depressive symptoms. A convenience sampling method utilizing a cross-sectional descriptive design was employed to recruit 1,066 university students from Northern, Central, and Southern Vietnam. All participants completed the ATQ-8 and the Depression subscale (DASS-21-D) of the Depression, Anxiety, and Stress Scale (DASS-21). The psychometric evaluation was conducted using exploratory and confirmatory factor analyses, along with assessments of internal consistency and demographic comparisons to ensure reliability and validity.

Results : The findings from the Exploratory Factor Analysis (EFA) and Confirmatory Factor Analysis (CFA) support a one-factor structure for the ATQ-8 ($\chi^2/df = 4.376$, GFI = .987, CFI = .993, TLI = .985, RMSEA = .056, PCLOSE = .224). The ATQ-8 demonstrated excellent internal consistency, with a Cronbach's alpha coefficient of .936, and item-total correlation values for all items exceeding .300. The significant differences in mean ATQ-8 scores were observed based on gender, region, and academic performance. The automatic negative thoughts were found to have a substantial effect on depressive symptoms ($R^2 = .598$, $p < .001$), which aligns with Beck's cognitive model of depression.

Conclusion: These findings suggest that the Vietnamese ATQ-8 is a valid instrument for evaluating the negative automatic thoughts among university students and shows promise for application in both research and clinical settings.

Key words: ATQ-8, validation, depression, negative automatic thoughts, university students, Vietnam

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INTRODUCTION

In the 1960s, Beck developed the cognitive model of depression, which revolutionized the understanding and treatment of this mental health condition by emphasizing the strong correlation between negative automatic thoughts and the presence of persistent depressive symptoms¹⁻³. For individuals experiencing depression, these thought patterns occur frequently and significantly influence their feelings and behaviours². This model serves as a foundation for further research aimed at assessing the contributory role of negative automatic thoughts in the progression of depression.

According to Beck's theory (see Figure 1), an individual's interpretation of experiences and events is influenced by maladaptive thought patterns and cognitive distortions, which subsequently contribute to the development of depression. Beck's model also underscores the importance of cognitive distortions, defined as mental biases that reinforce negative thought patterns².

The following three related unhelpful thought patterns, also referred to as core beliefs or schemas¹, contribute to the development and persistence of depression.

Negative view of self: People with depression tend to develop a negative self-image, perceiving themselves as incompetent, worthless, or defective.

Negative view of others and the world: Individuals with depression frequently perceive their experiences through a pessimistic lens, leading them to believe that others and the world around them are unsympathetic, demanding, or unforgiving.

Negative view of the future: People with depression tend to anticipate a bleak future, believing their challenges are insurmountable and believing that their suffering will never end.

Negative automatic thoughts play a crucial role in Beck's cognitive model. These thoughts are defined as unhelpful statements that arise from cognitive distortions and are continually reinforced by core beliefs or schemas. Such thoughts may transform into irritating

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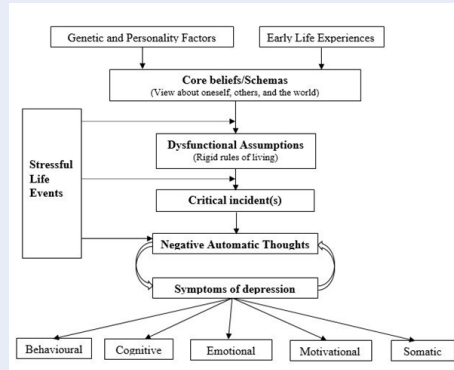


Figure 1: The longitudinal schematic based on Beck's model of depression. [Source: The authors]

emotions such as distress, guilt, and anxiety, which are characteristic symptoms of depression¹⁻³.

Studies from diverse cultures and populations have demonstrated that negative beliefs, dysfunctional schemas, and maladaptive thoughts are strongly associated with symptoms of depression^{4,5}, anxiety, and stress⁶. Through a meta-analysis, Şoflâu and David (2017) revealed that irrational beliefs and automatic thoughts significantly impact psychological symptoms⁷. This finding is further corroborated by studies conducted in Arab countries⁸, Pakistan⁹, China¹⁰, Egypt¹¹, Turkey¹², and Japan¹³.

Only a few scales have been developed to evaluate negative automatic thoughts across different dimensions. Among these, the ATQ-8 is the most commonly used tool for measuring the frequency of negative automatic thoughts that individuals have experienced over the past week¹⁴. The ATQ-8 was derived from the original four-factor Automatic Thoughts Questionnaire-30 (ATQ-30) but has been significantly shortened, reducing the number of items and thereby saving time and effort for both clinicians and respondents¹⁵. Due to its concise and practical structure, the ATQ-8 is widely utilized in both clinical and non-clinical settings, making it particularly valuable in studies with limited survey duration and participant availability. Several previous studies provide strong evidence for the validity, reliability, and psychometric properties of the ATQ-8 in measuring the negative automatic thoughts in Spain⁶, China¹⁰, and Colombia¹⁶, establishing it as an excellent alternative to the original ATQ¹⁵. However, a significant limitation exists in the research examining the validity and reliability of the ATQ-8 within Vietnamese samples, highlighting the need for a study that explores the relationship between negative automatic thoughts and various psychological issues.

Based on the analysis presented above, this study was conducted with the following hypotheses: (a) The Vietnamese version of the ATQ-8 possesses a one-factor structure, demonstrates reliability, and holds the scientific value in assessing negative automatic thoughts among university students; (b) The frequency of negative automatic thoughts will significantly differ between male and female students, as well as among students from Northern, Central, and Southern Vietnam, and across varying levels of academic performance; and (c) Negative automatic thoughts will account for a substantial proportion of the variance in depressive symptoms among students.

MATERIALS-METHODS

DATA COLLECTION AND PROCEDURES

This study included students from universities located in various geographical regions of North to South Vietnam. Our objective was to achieve a sample size of at least 200 students from each region using convenience sampling. Prior to participation in the survey, we obtained informed consent from all students via a Google Forms link. The study received approval from the hospital's Science Advisory Board, with which the authors are affiliated. The data were collected daily from April to July 2024 through online surveys.

The study participants consisted of 1,066 students (622 female, 444 male; mean age = 19.96 years, SD = 1.39) from universities across the Northern (19.61%), Central (27.20%), and Southern (53.19%) regions of Vietnam. See Table 1 for an overview of the demographic characteristics of the study sample.

MEASURES

*The Automatic Thought Questionnaire-8 (ATQ-8)*¹⁴: The ATQ-8 was constructed using a 5-point Likert scale to assess the frequency of eight negative thought patterns experienced for one week (1 = Not at all to 5 = All the time). The internal consistency of the ATQ-8 has been extensively validated in previous research, demonstrating its reliability as a measure of negative automatic thoughts. For instance, Netemeyer et al. (2002) reported a Cronbach's alpha of .920 for the ATQ-8, indicating excellent internal consistency. Similarly, Ruiz et al. (2017) found alpha and omega coefficients of .890 in a Colombian sample, further confirming its robustness. The sample items include: "I'm so disappointed in myself," "My future is bleak," and "I can't finish anything."

The ATQ-8 was independently translated into Vietnamese by two individuals holding Master's degrees

in psychology. We subsequently merged the two translations into a single version, incorporating feedback from experts in psychology and linguistics. The Vietnamese version of the ATQ-8 was then back-translated to assess semantic compatibility and re-evaluated by a panel of experts for linguistic, cultural, and contextual validity. The final version of this questionnaire was pilot-tested with 30 university students using both qualitative and quantitative research methods to ensure its adaptation to Vietnamese culture while preserving the psychometric properties of the original scale. Skewness and kurtosis values of 0.004 and -0.668 confirm the ATQ-8's adherence to the normality assumption^{17,18}.

The Depression subscale (DASS-21-D) from the Vietnamese Depression, Anxiety, and Stress Scale (DASS-21)¹⁹: The DASS-21-D was utilized because prior studies have consistently demonstrated a strong correlation between the frequency of negative thoughts and depressive symptoms. The DASS-21-D subscale assesses negative emotional states experienced over the past week through seven items rated on a 4-point Likert scale (0 = Did not apply to me at all to 3 = Applied to me very much, or most of the time). The example items include: "I couldn't seem to experience any positive feelings at all," "I found it difficult to work up the initiative to do things," "I felt down-hearted and blue," and "I felt that life was meaningless." The DASS-21-D subscale has been widely employed in previous studies, demonstrating high internal reliability with a Cronbach's alpha of $\alpha = .848$ ²⁰. In the present study, the DASS-21-D subscale exhibited a Cronbach's α coefficient of .902, indicating high internal reliability. We used the DASS-21-D subscale solely to examine the association between negative automatic thoughts and the presence of depressive symptoms, rather than for the clinical diagnosis of corresponding psychological disorders.

DATA ANALYSIS

Harman's one-factor test for the model in this study revealed an extracted variance of 47%, indicating the absence of common method bias²¹. The data were analyzed using the Statistical Package for the Social Sciences (SPSS) version 27.0 (IBM Corp., Armonk, NY, USA) and Analysis of Moment Structures (AMOS) version 24. Using SPSS and AMOS in this study allowed us to conduct the necessary statistical analyses to test the research hypotheses. This included the exploratory factor analysis (EFA) to explore the factor structure of the ATQ-8, the confirmatory factor analysis (CFA) to validate the factor structure of the ATQ-8, the reliability analysis using Cronbach's alpha coefficient, and the comparison of mean ATQ-8 scores

across different demographic groups.

To assess the fit of the ATQ-8 model, we considered the following indices, based on the recommendations of Hu and Bentler (1999): χ^2/df (Chi-square/df) ≤ 5 , RMSEA (Root Mean Square Error of Approximation) $\leq .06$, CFI (Comparative Fit Index) $\geq .90$, GFI (Goodness of Fit Index) $\geq .90$, TLI (Tucker-Lewis Index) $\geq .90$, and PCLOSE (p-value for Close Fit) $\geq .05$ ²².

RESULTS

As shown in Table 2, the Cronbach's alpha coefficient for the ATQ-8 was .936, and the item-total correlation values for all items ranged from .655 to .830, surpassing the recommended benchmark values.

The results of the EFA (Table 3), which employed the Principal Component Analysis (PCA) extraction method, confirmed the presence of a single factor, as shown in Table 3. This factor accounts for 69.12% of the total variance. The Kaiser-Meyer-Olkin (KMO) test revealed a high value (KMO = .937), while Bartlett's Test of Sphericity produced the significant results ($\chi^2 = 6369.005$, $df = 28$, $p < .001$), thereby validating the factor analysis. The findings from the rotated components matrix, utilizing Varimax rotation, indicated that eight items were retained, with factor loadings ranging from .727 (item AT6) to .876 (item AT4), collectively forming a coherent single factor.

As illustrated in Figure 2, this study presents a well-fitting model with the following indices: $\chi^2/df = 4.376$, GFI = .987, CFI = .993, TLI = .985, RMSEA = .056, PCLOSE = .224, which confirms the one-factor structure of the Vietnamese version of the ATQ-8. With standardized regression weights exceeding 0.67 ($p < .05$), all items demonstrate the excellent explanatory power for the scale.

It is evident from Table 1 that an Independent Samples t-test revealed female students exhibit more negative thoughts than male students, $t(1064) = -6.607$, $p < .001$. A one-way ANOVA confirmed that the effect of academic performance on negative thoughts was significant, $F(3, 1062) = 5.453$, $p = .001$. Additionally, the results from Welch's F-test indicated a statistically significant difference in negative thoughts across regions, $F = 15.381$, $p < .001$. We conducted Welch's ANOVA because the data did not meet the assumption of homogeneity of variances, as indicated by Levene's test. The results are summarized in Table 1.

Students reported a high frequency of negative automatic thoughts ($M = 23.83$, $SD = 0.80$) and the moderate levels of depressive symptoms ($M = 9.04$, $SD = 5.70$). The results of the Pearson correlation analysis

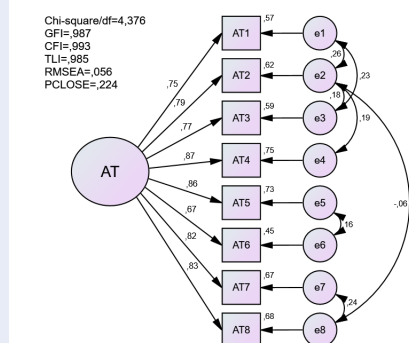


Figure 2: The standardized Model of the Vietnamese Version of the ATQ-8. [Source: The authors]

revealed a strong relationship between negative automatic thoughts and depressive symptoms, $r(1064) = .773, p < .001$. As illustrated in Figure 3, a significant regression was identified ($F(1, 1064) = 1582.605, p < .001$). The R^2 value was .598, indicating that negative automatic thoughts explained approximately 59.80% of the variance in depressive symptoms. The confidence intervals suggested that the slope for predicting depressive symptoms based on negative automatic thoughts was 95% likely to fall between .638 and .704.

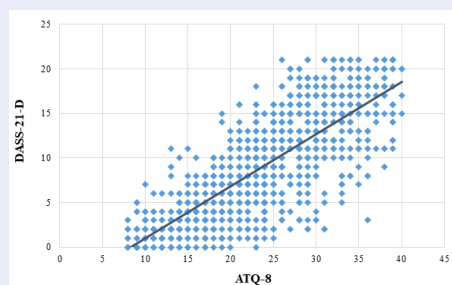


Figure 3: The scatterplot illustrating the positive relationship between the mean scores of the ATQ-8 and DASS-21-D. [Source: The authors]

DISCUSSION

The findings of this study confirmed the internal consistency and single-factor structure of the Vietnamese

version of the ATQ-8. The high Cronbach's alpha coefficient ($\alpha = .936$) and item-total correlations exceeding the minimum standard demonstrated the exceptional reliability²³. Ruiz et al. (2020) further substantiated these findings in a Spanish sample. Their study, which included two nonclinical groups (undergraduates and the general population), revealed the high internal consistency ($\alpha = .89, \omega = .89$) and the satisfactory item-total correlations (ranging from .38 to .74). Measurement invariance analyses confirmed the stability of the ATQ-8 across gender, age, education level, and sample type. These results suggest that the ATQ-8 is a psychometrically sound tool for diverse populations, maintaining both reliability and construct validity.

The EFA results revealed a one-factor structure explaining over 69.12% of the total variance, with factor loadings ranging from .727 to .876, which is consistent with the theoretical framework of the original scale. The CFA results further corroborated these findings, demonstrating excellent fit indices ($\chi^2/df = 4.376$, GFI = .987, CFI = .993, TLI = .985, RMSEA = .056, and PCLOSE = .224). The high standardized regression weights indicated that the items effectively measure the construct of negative automatic thoughts. These results align with previous studies conducted in other countries and provide compelling evidence for the applicability of the ATQ-8 in the Vietnamese cultural context^{6,15,24}. The Vietnamese version of the ATQ-8 holds significant potential for assessing negative automatic thoughts and supporting the development of psychological interventions, such as the Cognitive Behavioural Therapy (CBT), in both research and clinical practice in Vietnam.

Although these results meet our expectations, they are not surprising, as indicated by previous studies. What distinguishes this study is that item AT6 ("Tôi cảm thấy cần phải thay đổi điều gì đó thôi [Something has to change]") has the lowest standardized regression weight, signifying its minimal contribution to the overall scale. In contrast, the studies conducted by Ruiz et al. (2017, 2020) identified item AT8 ("I can't finish anything") as having the lowest standardized regression weight across the scale. This discrepancy may reflect cultural differences in the trait of negative thinking between Vietnamese culture and other countries, such as Spain⁶ and Colombia¹⁶. This presents an intriguing avenue for future prospective studies.

In this study, the mean ATQ-8 score among the student population was 23.83 (SD = 0.8). This finding aligns with the research conducted by Flett et al. (2012) and Flett et al. (2016), which indicated a moderate to high frequency of negative automatic

thoughts among university students^{25,26}. However, the level of negative automatic thoughts in Vietnam was comparable to, or even lower than, that observed in other Asian countries^{10,13}. Our study revealed differences in negative thinking among students based on demographic characteristics.

Specifically, female students exhibited a higher tendency toward negative thinking compared to their male counterparts. These gender differences can be attributed to both biological and social factors. Numerous studies have demonstrated that women tend to experience higher levels of stress and anxiety compared to men²⁷. Women may be more vulnerable to external influences, such as societal pressures regarding appearance, expectations related to gender roles, and heightened sensitivity to interpersonal relationships. According to Beck (1976), automatic negative thoughts often arise from individuals' interpretations of life events. For women, social pressures may exacerbate the frequency of these negative thoughts, particularly in stressful academic environments. This may elucidate why female students in the study exhibited a higher incidence of negative thoughts than their male counterparts.

Our research indicates that students residing in Hanoi and Northern Vietnam tend to exhibit more negative thought patterns. This disparity may be attributed to a combination of cultural, socioeconomic, and environmental factors. Northern Vietnam has a long-standing Confucian cultural tradition that emphasizes discipline, order, and academic achievement. This cultural backdrop can impose significant pressure on students, leading to heightened anxiety and negative thinking. Although Hanoi serves as the political and economic centre of the country, it is also characterized by intense competition in both academic and professional spheres, which can further exacerbate stress and anxiety among students. Additionally, the densely populated and noisy city can adversely affect mental health and increase the risk of psychological issues²⁸.

The study examining differences in academic performance among students found that those with poor academic outcomes tend to exhibit more negative thinking patterns. According to Beck's (1976) theory of automatic negative thoughts, individuals who struggle to achieve their goals are more likely to develop negative beliefs about themselves¹. Students who perform poorly academically may experience a lack of confidence, anxiety about the future, and feelings of worthlessness, all of which can contribute to

an increase in negative thinking. Furthermore, Seligman's (1975) research on the theory of learned helplessness suggests that individuals who encounter repeated failures may develop a sense of helplessness, leading them to believe that their efforts do not yield positive results²⁹. This belief can further exacerbate negative thoughts about themselves and their circumstances.

Combining the aforementioned factors, it is evident that automatic negative thinking among students is influenced not only by individual characteristics but also significantly shaped by cultural and social contexts. This presents a substantial challenge for psychological support programs in universities, as it is essential to develop psychological policies and interventions that are tailored to each individual. These interventions should take into account not only gender factors but also the living and learning environments of students.

In this paper, we demonstrated a significant positive relationship between negative automatic thoughts and depressive symptoms, as indicated by the Pearson correlation coefficient. The survey conducted by Ruiz et al. (2020) revealed a correlation of $r = .61$ (6) between negative thinking and depression, which was slightly lower than the findings of the current study. The similar results were reported in studies by Tanaka et al. (2006) and Pan et al. (2016). Additionally, the results from the linear regression analysis further emphasized this relationship, showing that negative automatic thoughts accounted for up to 59.80% of the variance in depressive symptoms.

The relationship between negative automatic thoughts and depression can be understood through Beck's cognitive model. This model posits that negative, irrational, and distorted thinking patterns about oneself, the world, and the future - collectively known as the negative cognitive triad - play a central role in the development and maintenance of depression. Negative automatic thoughts, which are spontaneous, frequent, and characterized by negative content, represent a specific manifestation of this cognitive triad. The prevalence of negative automatic thoughts can lead individuals to become overwhelmed by feelings of sadness, anxiety, frustration, guilt, and hopelessness, which are emotions commonly associated with depression³.

Negative automatic thoughts can lead to avoidance behaviours, social isolation, and the abandonment of cherished activities, thereby exacerbating depressive symptoms³⁰. Furthermore, these thoughts can trigger the body's stress response, resulting in symptoms such as insomnia, fatigue, loss of appetite, and

decreased sexual desire, all of which are common among individuals with depression. Negative automatic thoughts, negative moods, and negative behaviours interact with one another, creating a vicious cycle that intensifies depression and makes it increasingly difficult to escape³⁰. The research conducted by Chioqueta and Stiles (2004), Hjemdal et al. (2013), Ruiz et al. (2020), and Chahar Mahali et al. (2020) has also demonstrated that negative thinking is a significant predictor of depressive symptoms^{4-6,8}. The results of the study confirmed all three initial hypotheses.

Limitations and recommendations : Like any other study, the validation process of the Vietnamese ATQ-8 was confronted with inherent limitations. The ATQ-8 was originally designed primarily for clinical practice settings to measure the frequency of negative thinking in individuals with depression. However, this study exclusively involved university students through a convenience sampling method, and no clinical sample was included, which may introduce sampling bias. Future research should examine the stability of the ATQ-8 across different demographic groups, including age, education level, and socioeconomic status, to validate its applicability in broader contexts.

CONCLUSIONS

The current study underscores the validity of the Vietnamese version of the ATQ-8 in assessing negative automatic thoughts among university students. With a high internal consistency ($\alpha = .936$) and one-factor structure, this instrument demonstrates significant potential for widespread application in psychological research and clinical practice in Vietnam.

Clinically, the ATQ-8 can be integrated into psychological screening processes at universities or healthcare facilities to identify early indicators of depression among adolescents. Additionally, the ATQ-8 can assist therapists in evaluating patients' levels of negative thinking, thereby informing the design of CBT interventions. The observed differences in gender, region, and academic performance underscore the need for tailored psychological support programs. For instance, female students and those in Northern Vietnam may require more psychological care due to unique cultural and environmental stressors. Our study confirmed that automatic negative thoughts significantly influence depressive symptoms, aligning with Beck's cognitive model of depression. The use of the ATQ-8 not only standardizes the assessment of negative thoughts but also enhances the effectiveness of psychological intervention programs, contributing to improved mental well-being among students.

LIST OF ABBREVIATIONS

AMOS: Analysis of Moment Structures
ATQ-8: Automatic Thoughts Questionnaire-8
CBT: Cognitive Behavioural Therapy
DASS-21-D: The Depression, Anxiety, and Stress Scale-Depression subscale
SPSS: Statistical Package for the Social Sciences

COMPETING INTERESTS

The authors declare that they have no competing interests.

AUTHORS' CONTRIBUTIONS

Conception and methodology: Truc Nguyen-Thanh; acquisition of data: Bich-Tuyen Nguyen-Thi; data analysis and interpretation: Truc Nguyen-Thanh; writing and editing: Truc Nguyen-Thanh and Bich-Tuyen Nguyen-Thi.

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Table 1: The demographic Characteristics of the Study Sample (n = 1,066)

Demographic Characteristics		Frequency (Percentage)	M (SD)	t/F	p
Gender	1. Male	444 (41.65)	2.76 (0.91)	-6.607	.000
	2. Female	622 (58.35)	3.14 (0.93)		
Region	1. HCMC and the Southern Region	567 (53.19)	2.84 (0.91)	15.381*	.000
	2. Da Nang and the Central Region	290 (27.20)	3.11 (1.02)		
	3. Hanoi and the Northern Region	209 (19.61)	3.18 (0.84)		
Academic Performance	1. Excellent/Good	155 (14.54)	2.79 (0.93)	5.453	.001
	2. Fair	502 (47.09)	2.94 (0.97)		
	3. Average	352 (33.02)	3.07 (0.90)		
	4. Poor	57 (5.35)	3.28 (0.79)		

Note: *Welch F-Test ANOVA Statistics

[Source: The authors]

Table 2: Reliability analysis of the Vietnamese version of ATQ-8

Item Coded	Description	Item-Total Correlation	Cronbach's α if Item Deleted
AT1	1. "Tôi không tốt [I'm no good]."	.753	.929
AT2	2. "Tôi thật thất vọng về bản thân mình [I'm so disappointed in myself]."	.790	.926
AT3	3. "Tôi bị sao thế này? [What's wrong with me?]."	.765	.928
AT4	4. "Tôi cảm thấy mình thật vô dụng [I'm worthless]."	.830	.923
AT5	5. "Tôi cảm thấy mình thật bất lực [I feel so helpless]."	.821	.924
AT6	6. "Tôi cảm thấy cần phải thay đổi điều gì đó thôi [Something has to change]."	.655	.936
AT7	7. "Tương lai tôi thật ảm đạm [My future is bleak]."	.792	.926
AT8	8. "Tôi không thể hoàn thành bất cứ điều gì [I can't finish anything]."	.790	.926

[Source: The authors]

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Table 3: The Exploratory Factor Analysis (EFA) of the Vietnamese Version of the ATQ-8

Component Matrix ^a				
Item Coded	Description	Component	KMO	Bartlett's
		1		
AT4	4. “Tôi cảm thấy mình thật vô dụng [I’m worthless]”.	0.876	.937	$\chi^2 =$ 6369.005 df = 28 p < .001
AT5	5. “Tôi cảm thấy mình thật bất lực [I feel so helpless]”.	0.868		
AT7	7. “Tương lai tôi thật ảm đạm [My future is bleak]”.	0.845		
AT2	2. “Tôi thật thất vọng về bản thân mình [I’m so disappointed in myself]”.	0.845		
AT8	8. “Tôi không thể hoàn thành bất cứ điều gì [I can’t finish anything]”.	0.844		
AT3	3. “Tôi bị sao thế này? [What’s wrong with me?]”.	0.824		
AT1	1. “Tôi không tốt [I’m no good]”.	0.814		
AT6	6. “Tôi cảm thấy cần phải thay đổi điều gì đó thôi [Something has to change]”.	0.727		
Extraction Method: Principal Component Analysis. a.1 components extracted.				

[Source: The authors]

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Độ hiệu lực của Bảng câu hỏi Suy nghĩ Tự động 8 mục (ATQ-8) ở sinh viên Việt Nam

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TÓM TẮT

Các nghiên cứu được thực hiện trên nhiều nền văn hóa và dân số khác nhau đã chứng minh mối tương quan đáng kể giữa niềm tin và suy nghĩ tiêu cực với các vấn đề tâm lý, đặc biệt là trầm cảm. Nghiên cứu này nhằm mục đích đánh giá độ hiệu lực của Bảng câu hỏi Suy nghĩ Tự động 8 mục (ATQ-8) phiên bản tiếng Việt trong việc đánh giá suy nghĩ tự động tiêu cực và tác động của chúng đối với các triệu chứng trầm cảm. Thông qua phương pháp lấy mẫu thuận tiện theo thiết kế mô tả cắt ngang, tổng cộng có 1.066 sinh viên đại học từ miền Bắc, miền Trung và miền Nam Việt Nam tham gia nghiên cứu đã hoàn thành Bảng hỏi ATQ-8 và tiểu thang đo Trầm cảm (DASS-21-D) trích từ Thang đo Trầm cảm, Lo âu và Căng thẳng (DASS-21). Kết quả phân tích độ tin cậy, phân tích nhân tố khám phá (EFA) và phân tích nhân tố xác nhận (CFA) đã chứng minh Bảng hỏi ATQ-8 có cấu trúc một nhân tố ổn định ($\chi^2/df = 4,376$; GFI = 0,987; CFI = 0,993; TLI = 0,985; RMSEA = 0,056; PCLOSE = 0,224) và độ tin cậy nội bộ rất cao (Cronbach's alpha = 0,936). Có sự khác biệt ý nghĩa thống kê về điểm trung bình của ATQ-8 xét theo giới tính, khu vực sinh sống và kết quả học tập. Ngoài ra, suy nghĩ tiêu cực tự động được phát hiện là có ảnh hưởng đáng kể đến các triệu chứng trầm cảm ($R^2 = 0,598$; $p < 0,001$), phù hợp với mô hình nhận thức về trầm cảm của Beck. Những phát hiện này cho thấy ATQ-8 tiếng Việt là một công cụ hợp lệ để đánh giá suy nghĩ tự động tiêu cực ở sinh viên đại học, cho thấy tiềm năng ứng dụng trong cả môi trường nghiên cứu và lâm sàng tại Việt Nam.

Từ khóa: Bảng câu hỏi Suy nghĩ Tự động 8 mục (ATQ-8), độ hiệu lực, trầm cảm, suy nghĩ tự động tiêu cực, sinh viên đại học, Việt Nam

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