Child and Adolescent Trauma Measures: A Review

Children F.I.R.S.T.
Children and Families Institute for Research, Support and Training
Fordham University Graduate School of Social Service

A Member Of
The Children’s Trauma Consortium of Westchester

A Community Service Center Of

NCTSN The National Child Traumatic Stress Network
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# Table of Contents

## Introduction

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## Both Exposure and Symptoms Measures

- Adolescent Self-Report Trauma Questionnaire .......................................................... 7
- Childhood PTSD Interview (CPTSDI) (Child and Parent) .............................................. 8
- Children’s PTSD Inventory ........................................................................................... 9
- My Worst Experience Scale (MWES) .............................................................................. 10
- UCLA PTSD Index for DSM-IV (Child, Adolescent, and Parent) ............................. 11
- When Bad Things Happen (WBTH) .......................................................... 12

## History of Exposure to Trauma Measures

- Abusive Sexual Exposure Scale (ASES) ........................................................................ 13
- Anatomical Doll Questionnaire (ADQ) ........................................................................ 14
- Attributions for Maltreatment Interview (AFMI) ......................................................... 15
- Checklist of Sexual Abuse and Related Stressors (C-SARS) ....................................... 16
- Checklist for Child Abuse Evaluation (CCAE) ........................................................... 17
- Child Abuse and Neglect Interview Schedule-Revised (CANIS-R) ......................... 18
- Child Sexual Behavior Inventory (CSBI-I) ................................................................ 19
- Childhood Trauma Questionnaire (CTQ) ................................................................. 20
- History of Victimization Form (HVF) ......................................................................... 22
- Lifetime Incidence of Traumatic Events (LITE) - Students & Parents .................... 23
- Survey of Children’s Exposure to Community Violence ............................................ 26
- Traumatic Events Screening Inventory (TESI) .......................................................... 86

## Impact of Trauma – Symptoms and/or Distress Indices

### PTSD and Dissociative Measures

- Adolescent Dissociative Experience Scale (A-DES) .................................................. 104
- Child and Adolescent Psychiatric Assessment (CAPA-C, CAPA -P) ....................... 110
- Child Dissociative Checklist (CDC) ........................................................................... 111
- Child PTSD Symptom Scale (CPSS) .......................................................................... 113
- Child Reaction to Traumatic Events Scale (CRTES) ................................................. 118
- Clinician Administered PTSD Scale for Children and Adolescents (CAPS-CA) ..... 127
- Los Angeles Symptom Checklist (LASC) .................................................................. 145

### Multiple Trauma Symptom Measures

- Angie-Andy Cartoon Trauma Scale (ACTS) ................................................................. 148
- Children’s Impact of Traumatic Events Scale –Revised (CITES-R) ....................... 149
- Feelings and Emotions Experienced During Sexual Abuse (FEEDSA) .................... 150
- Negative Appraisals of Sexual Abuse Scale (NASAS) ............................................. 151
- Pediatric Emotional Distress Scale (PEDS) ............................................................... 152
- Sexual Abuse Fear Evaluation (SAFE) ...................................................................... 154
- Trauma Symptom Checklist for Children (TSCC) ..................................................... 155
- Trauma Symptom Checklist for Young Children (TSCYC) ...................................... 156
- Weekly Behavior Report (WBI) .................................................................................. 157

## Chart ........................................................................................................................... 158

## References ................................................................................................................. 162
Introduction

This manual has been developed as a guide for clinicians and researchers in their work with traumatized children and adolescents. It is based on a review of published and unpublished information regarding measures specifically designed for the screening and assessment of trauma in children and adolescents. Direct communication was undertaken wherever possible with the authors to obtain the most updated versions of the instruments, their availability and contact information. We want to accord special acknowledgement to Feindler, Rathus and Silver (2003) upon whose work we relied for supporting documentation in many instances. The reader is directed to that reference for a more complete discussion of family violence measures in general.

The manual attempts a comprehensive review as of the fall, 2003 of those instruments which address a range of traumatic experiences and the impact on children and adolescents. Copies of the instruments are included for those measures which are available at no or minimum cost and for which we were able to obtain a copy. In some instances, the author granted permission for the inclusion of an instrument or sample questions. In the remaining cases contact information is provided. All thirty-five instruments are summarized in a quick reference chart at the end of the manual and a list of references is also provided.

The measures are divided into four categories: 1) those exploring for both a history of exposure to trauma and for symptoms of traumatic experiences, 2) those capturing a history of exposure alone, 3) those designed to capture symptoms of PTSD and dissociative disorder and 4) those which inquire about multiple trauma symptoms.

Some generalizations can be made based on the universe of 35 instruments reviewed here. Those instruments probing for both a history of exposure and an assessment of impact rely heavily on a measure of PTSD as the defining “impact” symptom. The measures exploring for a history of exposure to trauma cluster in specific areas: three explore generally for any type of trauma, four explore for a history of child maltreatment, four for a history of sexual abuse and one for exposure to community violence. Of those in the PTSD and Dissociative Symptom category only two are specific to dissociative symptoms. In the Multiple Trauma Symptom category, five of the measures explore for trauma symptoms beyond PTSD, while four are concerned specifically with symptoms associated with the trauma of sexual abuse.

Fourteen measures are designed for children only. Of these, three are self-report measures; two are clinician administered and the remainder rely on parent reports. Six instruments are designed for adolescents only; five of these are self reports and one is a clinician-administered measure. The remaining measures target both children and adolescents.

It is more common for children to report internalizing symptoms and to tap behavioral symptoms from a parent report (Greenwald & Rubin, 1999). Five of the instruments in this review draw on information from both children and parents, two in the category of measures capturing both and symptoms (CPTSDI and UCLA PTSD Index), two in the category of History of Exposure, (LITE, TESI) and one in the category of PTSD and Dissociative Symptoms (CROPS/PROPS). No instrument in the Multiple Trauma Symptom category has developed complementary self and parent reports.
Almost half of the 35 instruments are client-self reports and about one-third are parent self reports, fairly evenly distributed across category of measure (History of Exposure, Symptoms or Both). Where psychometric information was available, most authors reported good to very good reliability and validity. All categories have at least one clinician-administered instrument, but as a group these tended to have less well-developed and/or studied psychometric properties than the self report measures.

Further psychometric development is warranted for most measures. Some of those with a history of robust psychometric properties in earlier versions are in the midst of major revisions (i.e. UCLA PTSD Index, TESI, CAPS-CA, ACTS); others are new and also actively under development (e.g. TSCYC). Some report published psychometric strengths but do not appear to be widely available or currently actively researched (e.g. CPTSDI, NASAS, SAFE).

Two gaps are immediately noticeable: there are few measures designed for the very young child or solely for the adolescent. None of the adolescent-only measures, for example, fall into the Multiple Trauma Symptom category. Most of the child measures, including those for both children and adolescents, begin at age 7 or 8. Only six address the child aged 6 or younger, and some of these are instruments designed for children age 6 and older.

The majority of instruments are available at no cost. Only nine of the 35 instruments have a cost associated with them as far as we could determine. However, as can be seen from the fact that we were able to obtain only 12 instruments for inclusion in the manual, easy access for “no cost” instruments appears to be an issue.

Worth commenting on are those measures that meet the three criteria of 1) rigorous or promising psychometric development, 2) free (or minimal cost), and 3) readily accessible. In the category of both History and Symptoms, the UCLA PTSD Index meets these criteria. In the History of Exposure category, the TESI stands out when these three criteria are applied. In the PTSD and Dissociative Symptom category, the CDC (a parent report), the CROPS/PROPS (parent and child self report) and the CAPS-CA (a clinician-administered instrument) emerge. The PEDS (a parent self report instrument) meet these criteria in the Multiple Trauma Symptoms category. Together, they total six instruments representing each of the four domains which have strong psychometric properties or promise thereof, are available at no or minimal cost and are readily accessible.

Copies of this manual may be obtained by contacting:

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A member of the Children’s Trauma Consortium of Westchester
Adolescent Self-Report Trauma Questionnaire

Author(s): Horowitz, Weine & Jekel  Year: 1995

Population/Age Group: Adolescents.

Purpose: The Adolescent Self-Report Measure was developed to gather information on demographics, exposure to community and domestic violence and to capture PTSD symptoms.

Description: The first section of the measure gathers demographic information and information in five different areas of the adolescent’s life: family, peers, drug and alcohol and alcohol use and sexuality. A second section explores for exposure to community and domestic violence with 14 items. Types of events queried include shootings, stabbings, beatings, forced unwanted sexual contacts, serious accidents, intimate partner violence, muggings and homicide. The final section of the scale incorporates the PTSD Symptoms Scale (Foa, et. al, 1993) and determines if the adolescent meets the criteria for a DSM diagnosis.

The questionnaire is read to the adolescent by the interviewer and reviewed immediately after to ensure accuracy. Exposure to violent events (Section 2) is classified in four categories: 1) Heard about, 2) Seen, 3) Done, and 4) Had done to you.

Psychometrics Properties: Used in one study of 79 girls living in an urban environment (81% African American, 15% Hispanic and 3% White), there has been limited psychometric work undertaken to establish reliability and/or validity of the measure.

Contact Information: Stevan Weine, University of Illinois at Chicago, 1601 West Taylor St., 589PI Chicago, IL 60612, 312-355-1662, smweine@uic.edu
Childhood PTSD Interview-Child (CPTSDI-C)/Childhood PTSD Interview-Parent (CPTSDI-P)

**Author(s):** Kenneth Fletcher  
**Year:** 1996

**Population/Age Group:** 7 and 18 years of age.

**Purpose:** The CPTSDI-C (Fletcher, 1996), along with a parallel parent version, the Childhood PTSD Interview-Parent (CPTSDI-P), is designed to measure PTSD symptoms adhering to DSM-IV criteria for a single or multiple identified traumatic events.

**Description:** The CPTSDI are structured interviews that asks the child and parent to identify specific traumatic event or events, and when the event(s) began and ended. The traumatic event is identified first. Ninety-three items in a dichotomous (yes/no) response format follow. The parent version has several response formats including a dichotomous (Yes/No) and a five to six point Likert scale.

The measures assess PTSD symptom domains of DSM-IV, as well as anxiety, depression, and dissociation, omens, survivor guilt, self-blame, fantasy denial, self-destructive behavior/thoughts, antisocial behavior, risk-taking, and changed eating behaviors (Carlson, 1997). The parent version includes additional questions about behavior symptoms that children are not asked.

Administration of the measure by a professional or paraprofessional is recommended. Thirty to 40 minutes are needed to complete the interview (Carlson, 1997). Scoring is built into the interview format (Carlson, 1997). Spanish and French translated versions are in the process of development.

**Psychometric Properties:** The measure was validated with a small clinical sample of ten participants with a history of stress-exposure and 20 youth from a community setting with no history of significant-stress exposure. Based on the results, Fletcher reported a high Kuder-Richardson-20 coefficients (Fletcher 1996). High internal consistency was reported; however there was variability in the alpha ranges for DSM-IV criteria B-D. Convergent validity with other measures developed by the author ranged from moderate to high. The measure was moderately correlated with the Child Behavior Checklist (CBCL) (Carlson, 1997).

**Contact Information:** Kenneth E. Fletcher, Department of Psychiatry, University of Massachusetts Medical Center, 55 Lake Ave. North, Worcester, MA 01655, kenneth.fletcher@umassmed.edu
Children’s PTSD Inventory

Author(s): Phillip A. Saigh   Year: 1996

Population/Age Group: 7 to 18 years of age.

Purpose: The Children’s PTSD Inventory is designed to establish duration of distress for DSM-IV PTSD symptoms. Five diagnoses can be made via the measure: PTSD Negative, Acute PTSD, Chronic PTSD, Delayed Onset PTSD, and No Diagnosis (Saigh, et al., 2000).

Description: The measure was initially field tested and developed with a 50 adolescent female rape victims in South Africa, resulting in the creation of five subscales. The first subtest assesses for potential exposure to traumatic events and reactivity during stress-exposure. If the youth does not meet the criteria for significant stress-exposure, the interview is terminated. The second, third and fourth subtests explore for symptoms of re-experiencing, avoidance and numbing, and increased arousal, respectively. The last subtest probes for areas of significant distress in life, such as in school. Scoring and instructions for each subtest are built into the measure. (Saigh, 2000; Yasik et.al. 2001).

For youth with no history of trauma, it takes only 5 minutes to complete the test. Ten to 15 minutes are needed to complete the measure for youth with a history of trauma. An individual with a bachelor’s degree or equivalent can administer the measure. Training of the administrator entails 2 hours of professional supervised analog training with feedback (Yasik, Saigh, Oberfield, Green, Halamandaris & McHugh, 2001).

Psychometrics Properties: Psychometrics were investigated with two samples consisting of exposed and unexposed youth (Saigh, et. al., 2001). Results indicated moderate internal consistency for the five subtests, and high internal consistency at the diagnostic level. Inter-rater reliability was 98.1%. Test-retest reliability ranged from good to excellent (Yasik, Saigh, Oberfield, Green, Halamandaris & McHugh, 2001).

Convergent validity was found with the Revised Children’s Manifest Anxiety Scale, Children’s Depression Inventory, Child Behavior Checklist (CBCL), and the Junior Eysenck Personality Inventory (JEPI) Neuroticism scale (Yasik, Saigh, Oberfield, Green, Halamandaris, & McHugh, 2001). Criterion validity was determined in relationship to the Diagnostic Interview for Children and adolescents-Revised (DICA-R) and Structured Clinical Interview for DSM-IV (SCID)

Contact Information: Philip A Saigh, Box 1, Thorndike Hall, Teachers College, Columbia University, 525 W 120th Street, NY, NY 10027, pasaigh@aol.com
My Worst Experience Scale (MWES)

**Author(s):** Hyman, Snook, Berna, DuCette, & Kohr  
**Year:** 2002

**Population/Age Group:** Ages 9 to 18.

**Purpose:** The MWES gathers information pertaining to a traumatic event from the youth’s point of view, as well as developmental issues. Symptoms associated with a traumatic event are assessed, and a PTSD diagnosis can be made.

**Description:** MWES was developed in the 1980s with a premise that childhood stressors, such as corporal punishment and divorce can result in traumatization. Initial work began with clinical evaluation of children who experienced corporal punishment (Hyman, 1996). A broad definition for traumatic events was incorporated into the design of the measure including bullying and divorce.

The MWES is comprised of two parts. Part I requires the youth to indicate which of the 21 was their worst experience. Six questions pertain to the nature of the experience. Part II asks the youth to respond to the frequency and duration of 105 thoughts, feelings, and behaviors experienced after the traumatic event. If the trauma is school related, a School Trauma and Alienation Survey can be completed.

Part II yields three scores: 1) a total score, 2) inconsistent responding index score, and 3) DSM IV Criteria Scores (Impact of Event, Re-experiencing the Trauma, and Symptom Subscales (Depression, Hopelessness, Somatic Symptoms, Oppositional Conduct, Hypervigilance, Dissociation/Dreams, and general maladjustment). Standard scores and percentile ranks can be attained. Scoring can be completed via computer or by hand. A child who reads at a 3rd grade level can complete the self-report measure in 20 to 30 minutes. The measure has been used with diverse ethnic, geographical, and traumatized populations.

**Psychometrics Properties:** Limited psychometric properties have been published. Test-Retest reliability ranged from good to excellent (alpha .88 to .95). There was great variability with internal consistency (alpha .68 to .91) (Violence Institute of New Jersey, 2002).

**Contact Information:** Western Psychological Services, 12031 Wilshire Blvd., Los Angeles, CA 90025-1251, 800-648-8857, www.wpspublish.com
**UCLA PTSD Index for DSM-IV (Child, Adolescent, and Parent)**

**Author(s):** Pynoos, Rodriguez, Steinberg, Stuber, and Frederick  
**Year:** 1998

**Population/Age Group:** Child (ages 7 through 12), adolescent (ages 13 or older), and parent.

**Purpose:** To screen for the presence of any type of traumatic event and the frequency of DSM-IV PTSD symptoms.

**Description:** Three versions of this brief screening instrument exist: child, adolescent, and parent. It is not intended to establish a definitive PTSD diagnosis (Rodriguez, Steinberg, & Pynoos, 1999). The UCLA PTSD Reaction Index (Pynoos, Rodriguez, Steinberg, Stuber, and Frederick, 1998) is a revised version of the widely used and researched Child Posttraumatic Stress Disorder (PTSD) Reaction Index (CPTSD-RI) (Nader, Pynoos, Fairbanks, and Fredrick, 1990).

The three versions of the UCLA PTSD Reaction Index can be administered via paper-and-pencil. The child and adolescent versions (20 and 22 items, respectively) have also been administered in an interview format or in school classroom settings. A 5-point Likert scale from 0 (none of the time) to 4 (most all the time) is used to rate PTSD symptoms (Slatzman, et al., 2001).


The measure was forward and back translated by experienced psychologists in for use in Armenia, Bosnia, and Hercegovina (Stuvland, Durakovic-Belko, & Kutlaca, 2001). In the United States, the measure was forward and back translated for use with Spanish speaking students in Los Angeles, California (Saltzman, Pynoos, Steinberg & Lane, 2001).

**Psychometric Properties:** Psychometric properties are under investigation for the UCLA PTSD Reaction Index (Rodriguez, Steinberg & Pynoos, 1999).

**Contact Information:** Robert S. Pynoos, National Center for Child Traumatic Stress, 11150 W. Olympic Blvd., Suite 770, Los Angeles, CA 90064, 310-235-2633  
rpynoos@mednet.ucla.edu
When Bad Things Happen Scale

Author(s): Kenneth Fletcher  
Year: 1996

Population/Age Group: Children ages seven to 14 who have obtained at least a 3rd grade reading level.

Purpose: The WBTH (Fletcher, 1996) is designed to measure DSM-IV PTSD symptoms in children who have a single or multiple identified traumatic events.

Description: The WBTH is self-report measure that assesses children and adolescents’ response to a traumatic event (“bad thing”). The first part of the measure directs the child to describe the traumatic event or events. The latest version, R4, has 90 items measuring PTSD, anxiety, depression, dissociation, omens, survivor guilt, self-blame, fantasy denial, self-destructive behavior/thoughts, antisocial behavior, risk taking, and change in eating habits (Carlson, 1997). For each item, children respond using a 3-point Likert scale of “Never, Some, Lots” format. All DSM-IV criteria are assessed by more than one item (Fletcher, 1996; Carlson, 1997). Though there are 90 items, only 10 to 20 minutes are needed to complete the instrument.

Psychometric Properties: The CPTSDI and WBTH were validated in the same study of 10 children from a clinical sample with a history of stress-exposure and 20 children from community setting with no history of significant-stress exposure. A high Cronbach’s alpha was found for the total scale, and for PTSD, DSM-IV, criteria A through D. Convergent Validity was assessed with other measures developed by Fletcher: High convergent validity with the CPTSDI-C is reported., however, a low convergent validity was found with the CPTSDI-P (parent form) (Fletcher, 1996). Low convergent validity with subscales of the Child Behavior Checklist was also reported.

Contact Information: Kenneth E. Fletcher, Department of Psychiatry, University of Massachusetts Medical Center, 55 Lake Ave. North, Worcester, MA 01655, kenneth.fletcher@umassmed.edu
Abusive Sexual Exposure Scale (ASES)

Author(s): Spaccarelli
Year: 1995

Population/Age Group: Sexually abused children and adolescents.

Purpose: The Abusive Sexual Exposure Scale (ASES) was developed to assess the occurrence of 14 types of sexual abuse and identify the relationship of each perpetrator to the different types of sexual abuse (Feindler, Rathurs & Silver, 2003).

Description: The ASES is a self-report measure composed of 28 items. Sexual abuse items include non-contact and contact sexual abuse. If the child responds “yes” to any item, the follow up question “What person or persons have done that to you?” is asked. Body parts are used to describe for each type of abuse. To ensure the child understands the definition of each body part, the child is asked to identify the body parts on an anatomically correct doll (Feindler, Rathurs & Silver, 2003; Spaccarelli & Fuchs, 1997). Responses are categorized into three variables: 1) severity of sexual exposure, 2) total number of types of abuse reported, and 3) closest perpetrator named. No training is needed is to administer the instrument. Computer scoring facilitates the use of the measure.

Psychometrics Properties: The measure has not been normed and reliability has not been published. High face validity was established because items address two conditions used to define sexual abuse: 1) at least a 5 year difference between victim and perpetrator and 2) unwanted nature of sexual contact (Spaccarelli & Fuchs, 1997).

Contact Information: Steven Spaccarelli, Institute for Juvenile Research, Department of Psychiatry, University of Illinois at Chicago, 907 South Wolcott Ave., Chicago, IL 60612
Anatomical Doll Questionnaire (ADQ)

Author(s): Levy, Markovic, Kalinowski, Ahart, & Torres Year: 1995

Population/Age Group: Child 2 to 7 who have or are suspect of being sexually abused.

Purpose: Assessment of child sexual abuse.

Description: The ADQ is a semi-structured child interview. The child is first guided through an inventory of the names for body parts, using the dolls. Interviewers record disclosure statements and spontaneous behaviors. Interviewers’ and observers’ observations and perceptions of the child’s responses are recorded and compared. Five areas are explored: 1) type of abuse, 2) demonstration with dolls, 3) observation of child’s affective-expressive behaviors, 4) perceptions of interview quality, and 5) general observations (Levy, Markovic, Kalinowski, Ahart & Torres, 1995). Spontaneous doll usage is also recorded. Scoring is based on a response indicating whether an act or verbalization occurred. Interviewers should have knowledge of child development and victimology.

Psychometrics Properties: Interrater reliability was measured using the Phi statistic, where 1.0 = full agreement and 0=level of agreement no better than chance alone. There was great variation between the interrater reliability of each of the five areas. Interrater reliability was high for reports of verbal abuse, but varied considerably for demonstration of sexual abuse. Very poor interrater reliability was found for child affective expressions, for example (Feindler, Rathus & Silver, 2003).

Differences in doll use were used to establish discriminant validity. In confirmed diagnosis of sexual abuse, 44 percent of the children demonstrated sexual abuse acts with the doll compared to 14 percent of children where there was no confirmation of sexual abuse. Gender differences were found in reporting sexual abuse. Boys rarely made verbal disclosures of sexual abuse, yet males who disclosed sexual abuse used dolls to demonstrate the abuse. (Levy, Markovic, Kalinowski, Ahart & Torres, 1995).

Contact Information: Howard Levy, Grant Hosp, Dept of Pediatrics, Chicago, IL.
Attribution for Maltreatment Interview (AFMI)

Author(s): McGee & Wolfe  
Year: 1990

Population/Age Group: Adolescent with a history of physical, emotional, or sexually abuse, neglect, or exposure to family violence.

Purpose: To assess an adolescent’s attribution for their maltreatment.

Description: The measure is comprised of four structured interviews. Only interviews that are relevant to the adolescent’s experience are administered. Utilizing a 4-point Likert scale ranging from 1 (do not agree) to 4 (strongly agree), adolescents’ rating of 26 statement read aloud by the interviewer are scored. This results in scores on five subscales for each type of maltreatment (self-blaming, cognition, self-blaming effect, self-excusing, perpetrator blaming, and perpetrator excusing).

Psychometrics Properties: In a small sample of 33 adolescents, moderate to high test-retest reliability was found, as well as with criterion-related validity. Sexual abuse had the highest reliability and criterion validity. (Feindler, Rathus & Silver, 2003). In another study with 160 adolescents from an open child protective caseload, moderate internal reliability was ascertained, and good test-retest reliability was again found. Factor analysis confirmed the conceptual structure of each of the five subscales, and was stable across the types of maltreatment. (McGee, Wolfe & Olson, 2001).

Contact Information: Vicky Wolfe, Children’s Hospital of Western Ontario Department of Psychiatry, 800 Commissioners Road East, London, Ontario, Canada N6A 5C2, 519-667-5755, vicky.wolfe@lhsc.on.ca
Checklist of Sexual Abuse and Related Stressors (C-SARS)

**Author(s):** Spaccarelli  
**Year:** 1995

**Population/Age Group:** Children and adolescents who experienced sexual abuse.

**Purpose:** Assesses both reports and degree of stressful events associated with a youth’s sexual abuse.

**Description:** This is a 70-item self-report measure that assesses three types of stressful events (Abuse-Specific Events; Abuse-Related Events; and Public Disclosure Events) associated with sexual abuse by a specified perpetrator. A total score is achieved by summing all “yes” responses (Spaccarelli, 1995; Spaccarelli & Fuchs, 1997).

**Psychometrics Properties:** With a sample of girls aged 11 to 18 internal consistency for the total measure was high (.93), however findings varied from low to high for each subscale. Construct validity was established by comparing total event scores on the C-SARS with 1) therapist’s ratings ($r=.36, p<.05$), 2) number of types of sexual abuse reported ($r=.40, p<.05$) and 3) total scores on the Child Behavior Checklist (CBCL)c (Feindler, Rathus, & Silver, 2003; Spaccarelli, 1995). Concurrent validity was not supported since the C-SARS was not associated to symptoms of depression or anxiety. A high correlation was found with the Negative Appraisals of Sexual Abuse Scale (NASAS) (Spaccarelli, 1995; Spaccarelli & Fuchs, 1997).

**Contact Information:** Steven Spaccarelli, Institute for Juvenile Research, Department of Psychiatry, University of Illinois at Chicago, 907 South Wolcott Ave., Chicago, IL 60612.
Checklist for Child Abuse Evaluation (CCAE)

**Author(s):** Petty

**Year:** 1990

**Population/Age Group:** Children and Adolescents.

**Purpose:** The Checklist for Child Abuse Evaluation (CCAE) was designed to as a comprehensive measure to investigate and evaluate children and adolescents who may have been abused or neglected.

**Description:** The interview consists of 264-items comprising 24 sections including: a) Child's Historical & Current Status, b) Emotional Abuse (child & witness reports), Sexual Abuse (child & witness reports), c) Physical Abuse (child & witness reports), d) Neglect (child & witness reports), e) Child's Psychological Status, f) Credibility/Competence of the Child, g) Conclusions in 6 Categories, and h) Case-specific Treatment Recommendations & Issues. The instrument collects information regarding the child, the alleged abuser, and the reporter of abuse. Information can also be collected from law enforcement, medical practitioners, attorneys and other professionals.

The CCAE does not provide interview questions. A respondent’s answers are checked off on the checklist, and space is provided, if an answer does not correspond with the checklist (Feindler, Rathurs & Silver, 2003). The measure should be administered by a trained professional who has experience in the field of child abuse and neglect. The entire interview does not have to be completed. An interviewer can elect which sections are applicable to the specific situation (PAR, 2003).

**Psychometrics Properties:** No psychometric properties have been published.

**Contact Information:** Psychological Assessment Resources, Inc. 16204 N. Florida Ave., Lutz, FL 33549, 800-727-9329, parinc.com
Child Abuse and Neglect Interview Schedule-Revised (CANIS-R)

Author(s): Ammerman, 1998; Ammerman, Van Hasselt, & Hersen (original)  
Year: 1988

Population/Age Group: Children and adolescents with current, historic, or at risk for abuse, neglect, or other family violence.

Purpose: To assess a child’s exposure to maltreatment and family violence as well as measure parenting practices.

Description: This semi-structured parent-interview consists of more than 100 items with four subsections: 1) Child Behavior Problems and Disciplinary Practices, 2) Parental Past and Current History of Family Violence, 3) Child’s Exposure to Violence, Psychological Abuse, and Neglect, and 4) Sexual Abuse. Demographic information is gathered at onset of the interview. Items do not have to read verbatim, and can be rephrased and reordered to maintain interviewer connection to the respondent.

Approximately 45 minutes are needed to complete the interview, which should be administered by a qualified interviewer who has experience with working with maltreating parents and the family. Given the semi-structure and flexibility of the measure there is no formal scoring protocol. A total score for severity and frequency for each type of maltreatment can be calculated.

Psychometrics Properties: The authors (Ammerman, Hersen, vanHasselt, Lubetsky & Sieck, 1994) report that high interrater reliability (unpublished study) and low internal consistency was found. No statistically significant correlation was found between the Disciplinary Practice subscale and Lie Scale of the Child Abuse Inventory (Milner, 1986), suggesting no systematic biases and withholding of information by the parent.

Contact Information: Robert T. Ammerman, Children’s Hospital Medical Center, Division of Psychology, 3333 Burnet Ave., Cincinnati, OH 45229, 513-636-8209, robert.ammerman@chmcc.org
Child Sexual Behavior Inventory (CSBI-I)

Author(s): Friedrich Year: 1991

Population/Age Group: Parents of children (2 to 12) who may have been sexually abused.

Purpose: To determine the presence and intensity of children’s sexual behaviors.

Description: The Child Sexual Behavior Inventory (CSBI-I) is a female caregiver self-report composed of 38 items assessing the child’s behavior over past 6 months. The measure was developed by adapting items from the Child Behavior Checklist and with the addition of items pertaining to sexual aggression, sexual inhibition, and gender behaviors. The response format for each behavior is a 4-point Likert scale. Ten to 13 minutes are needed to complete and score the measure. Scores can be assessed for each subscale: 1) CSBI-I total scale, 2) Developmental Related Sexual Behavior (DRSB), and 3) Sexual Abuse Specific Items (SASI) (Feindler, Rathus, & Silver, 2003). Norms controlling for age and gender are provided. Raw scores are converted into T-scores (Drach, Wientzen, & Ricci, 2001). French, Spanish, German, and Swedish translated versions are available. The CSBI-I is formatted as a test booklet and a comprehensive manual is available.

Psychometrics Properties: Normative data was established with a clinical and non-clinical sample of two to twelve year old children. High internal consistency was found with both samples. Among sexual abuse children, at a four week retest reliability was high, however reliability was low at 3 month retest. The changes in test-retest results were attributed to treatment; treatment should reduce sexual behaviors.

Sexually abused children scored higher frequencies of sexual behavior then non-sexually abused children, demonstrating discriminate validity (Feindler, Rathus & Silver, 2003). Convergent validity was found with the Child Behavior Checklist (CBCL) (Drach, Wientzen & Ricci, 2001). In a sample of 247 child in a rural community, no relationship was found between a sexual abuse diagnose and sexual behavior problems (Drach, Wientzen & Ricci, 2001).

Contact Information: Psychological Assessment Resources, Inc. 16204 N. Florida Ave., Lutz, FL 33549 800-727-9329, parinc.com
Childhood Trauma Questionnaire (CTQ)

Author(s): Bernstein & Fink  
Year: 1994

Population/Age Group: Adolescents 12 and over and adults.

Purpose: To screen rapidly for histories of child abuse and neglect.

Description: This is a 28-item self-report measure which takes 5 – 10 minutes to complete and inquires about five types of maltreatment: 1) emotional abuse, 2) physical abuse, 3) sexual abuse, 4) emotional neglect, and 5) physical neglect, and includes three items to screen for false-negative trauma reports. The CTQ does not discriminate between current and past experiences of abuse. It can be given to both clinical and non-clinical respondents, and administered either individually or in groups. Scoring results in classification of the level of maltreatment (None, Low, Moderate and Severe) for each of the five domains and/or can be converted to percentiles.

Psychometrics Properties: Studies of reliability and validity were undertaken with clinical and non-clinical samples in seven studies involving a total of 2,201 respondents. Internal consistency was satisfactory to high, with the total scale achieving a Cronbach’s alpha of .95. Construct validity was robust, with psychiatrically referred groups reporting higher levels of abuse and neglect than non-clinical samples (Fink & Bernstein, 1995; Bernstein & Fink, 1998). Discriminant validity was also supported.

Contact Information: The Psychological Corporation, Harcourt, Brace & Company, San Antonio, Texas, psychcorp.com
### Childhood Trauma Questionnaire

#### Sample Questions

<table>
<thead>
<tr>
<th>When I was growing up…</th>
<th>Never True</th>
<th>Rarely True</th>
<th>Sometimes True</th>
<th>Often True</th>
<th>Very Often True</th>
</tr>
</thead>
<tbody>
<tr>
<td>&quot;I didn't have enough to eat.&quot;</td>
<td>•</td>
<td>•</td>
<td>•</td>
<td>•</td>
<td>•</td>
</tr>
<tr>
<td>&quot;My parents were to drunk or high to take care of me.&quot;</td>
<td>•</td>
<td>•</td>
<td>•</td>
<td>•</td>
<td>•</td>
</tr>
<tr>
<td>&quot;I felt loved.&quot;</td>
<td>•</td>
<td>•</td>
<td>•</td>
<td>•</td>
<td>•</td>
</tr>
<tr>
<td>&quot;Someone tried to touch me in a sexual way, or tried to make me touch them.&quot;</td>
<td>•</td>
<td>•</td>
<td>•</td>
<td>•</td>
<td>•</td>
</tr>
<tr>
<td>&quot;I believe I was emotionally abused.&quot;</td>
<td>•</td>
<td>•</td>
<td>•</td>
<td>•</td>
<td>•</td>
</tr>
<tr>
<td>&quot;I got his to hard by someone in my family that I had to see a doctor or go to the hospital.&quot;</td>
<td>•</td>
<td>•</td>
<td>•</td>
<td>•</td>
<td>•</td>
</tr>
<tr>
<td>&quot;People in my family called me things like ‘stupid,’ ‘lazy,’ or ‘ugly.’&quot;</td>
<td>•</td>
<td>•</td>
<td>•</td>
<td>•</td>
<td>•</td>
</tr>
</tbody>
</table>
History of Victimization Form (HVF)

Author(s): Wolfe, Wolfe, Gentile & Bourdeon  
Year: 1987

Population/Age Group: Children who were or are suspected of having been maltreated.

Purpose: To summarize information gathered by social workers or therapists regarding all forms of maltreatment.

Description: This is a 65-item instrument yielding information on five subscales: sexual abuse, physical abuse, neglect, witness to family violence and psychological abuse. Each scale is designed to capture information about the severity of the abuse, the relationship between the child and suspected offender, the emotional closeness between the child and perpetrator and the time frame, frequency and duration of the maltreatment. (based on a review in Feindler, Rathus & Silver, 2003).

Only the subscale relevant to the type of maltreatment is completed. The person completing the scale indicates whether the information is suspected (s) or confirmed (c). The responses are captured on a 5-point Likert scale.

Psychometric Properties: None reported.

Contact Information: Vicky Wolfe, Children’s Hospital of Western Ontario Department of Psychiatry, 800 Commissioners Road East, London, Ontario, Canada N6A 5C2, 519-667-5755, vicky.wolfe@lhsc.on.ca
Lifetime Incidence of Traumatic Events (LITE)-
Student and Parent Forms

Author(s): Greenwald                        Year: 1999

Population/Age Group: Children age 8 and higher, and their parents.

Purpose: The LITE is a screening tool designed for both children (LITE-S) and their parents (LITE-P) in a wide range of clinical and normative settings, including mental health settings, schools and medical settings. It was developed to be a brief and easy to use one-page measure to screen for stressful and/or traumatic events.

Description: This is a 16-item one-page check list which covers a broad range of potential trauma and loss events, and probes for descriptive information (how many times, how old) as well as emotional impact (how upset and how much bothers now). The measure can be administered individually, in groups or interview-administered face-to-face or by telephone. There is no scoring system. It costs 12.00 per packet, includes five copies of each of the LITE-S and LITE-P

Psychometrics Properties: The authors describe this as a screener and not an objectively scorable scale. No reliability or validity data are available, although the authors describe one study in which the child and parent reports together formed the basis of a clinician rating which effectively predicted post traumatic stress symptoms (Greenwald & Rubin, 1999).

Contact Information: Sidran Institute, 200 East Joppa Rd., Suite 207, Baltimore, MD 21286, 888- 825-8249, sidran.org
Life Incidence of Traumatic Events - Student Form

Your Name __________________________  Child's Name __________________________  Date ________

Please circle **No** or **Yes** to show which things have happened to you. If **Yes**, also fill in the rest of the line.

<table>
<thead>
<tr>
<th>Did this ever happen to him/her?</th>
<th>How many times</th>
<th>How old s/he was first time</th>
<th>How much it upset him/her then</th>
<th>How much it upset him/her now</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Yes been in a car accident</td>
<td>______________</td>
<td>______________</td>
<td>none some lots</td>
<td>none some lots</td>
</tr>
<tr>
<td>No Yes been hurt in another kind of accident or sick in the hospital</td>
<td>______________</td>
<td>______________</td>
<td>none some lots</td>
<td>none some lots</td>
</tr>
<tr>
<td>No Yes been hurt in another kind of accident or sick in the hospital</td>
<td>______________</td>
<td>______________</td>
<td>none some lots</td>
<td>none some lots</td>
</tr>
<tr>
<td>No Yes been hurt in another kind of accident or sick in the hospital</td>
<td>______________</td>
<td>______________</td>
<td>none some lots</td>
<td>none some lots</td>
</tr>
<tr>
<td>No Yes someone in the family died</td>
<td>______________</td>
<td>______________</td>
<td>none some lots</td>
<td>none some lots</td>
</tr>
<tr>
<td>No Yes friend very sick, hurt or died</td>
<td>______________</td>
<td>______________</td>
<td>none some lots</td>
<td>none some lots</td>
</tr>
<tr>
<td>No Yes been in a fire</td>
<td>______________</td>
<td>______________</td>
<td>none some lots</td>
<td>none some lots</td>
</tr>
<tr>
<td>No Yes been in a hurricane, tornado, flood, or mudslide (circle which)</td>
<td>______________</td>
<td>______________</td>
<td>none some lots</td>
<td>none some lots</td>
</tr>
<tr>
<td>No Yes parents (or grown-ups) broke things or hurt each other</td>
<td>______________</td>
<td>______________</td>
<td>none some lots</td>
<td>none some lots</td>
</tr>
<tr>
<td>No Yes parents separated or divorced</td>
<td>______________</td>
<td>______________</td>
<td>none some lots</td>
<td>none some lots</td>
</tr>
<tr>
<td>No Yes been hit, whipped, beaten, or hurt by someone</td>
<td>______________</td>
<td>______________</td>
<td>none some lots</td>
<td>none some lots</td>
</tr>
<tr>
<td>No Yes been tied up, or locked in a small space</td>
<td>______________</td>
<td>______________</td>
<td>none some lots</td>
<td>none some lots</td>
</tr>
<tr>
<td>No Yes been made to do sex things</td>
<td>______________</td>
<td>______________</td>
<td>none some lots</td>
<td>none some lots</td>
</tr>
<tr>
<td>No Yes been threatened (someone said they would do something bad)</td>
<td>______________</td>
<td>______________</td>
<td>none some lots</td>
<td>none some lots</td>
</tr>
<tr>
<td>No Yes been robbed (or house robbed)</td>
<td>______________</td>
<td>______________</td>
<td>none some lots</td>
<td>none some lots</td>
</tr>
<tr>
<td>No Yes other scary or upsetting event (what was it?_________________)</td>
<td>______________</td>
<td>______________</td>
<td>none some lots</td>
<td>none some lots</td>
</tr>
</tbody>
</table>

LITE-P 2.1. © Ricky Greenwald 1999
Life Incidence of Traumatic Events - Parent Form

Your Name ___________________________ Child’s Name ___________________________ Date ________

Please circle No or Yes to show which things have happened to your child. If Yes, also fill in the rest of the line.

<table>
<thead>
<tr>
<th>Did this ever happen to him/her?</th>
<th>How many times</th>
<th>How old s/he was (first time)</th>
<th>How much it upset him/her then</th>
<th>How much it upset him/her now</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>Yes</td>
<td>been in a car accident</td>
<td>__________</td>
<td>none some lots</td>
</tr>
<tr>
<td>No</td>
<td>Yes</td>
<td>been hurt in another kind of accident or sick in the hospital</td>
<td>__________</td>
<td>none some lots</td>
</tr>
<tr>
<td>No</td>
<td>Yes</td>
<td>seen someone else get hurt</td>
<td>__________</td>
<td>none some lots</td>
</tr>
<tr>
<td>No</td>
<td>Yes</td>
<td>someone in the family in the hospital (hurt or sick)</td>
<td>__________</td>
<td>none some lots</td>
</tr>
<tr>
<td>No</td>
<td>Yes</td>
<td>someone in the family died</td>
<td>__________</td>
<td>none some lots</td>
</tr>
<tr>
<td>No</td>
<td>Yes</td>
<td>friend very sick, hurt or died</td>
<td>__________</td>
<td>none some lots</td>
</tr>
<tr>
<td>No</td>
<td>Yes</td>
<td>been in a fire</td>
<td>__________</td>
<td>none some lots</td>
</tr>
<tr>
<td>No</td>
<td>Yes</td>
<td>been in a hurricane, tornado, flood, or mudslide (circle which)</td>
<td>__________</td>
<td>none some lots</td>
</tr>
<tr>
<td>No</td>
<td>Yes</td>
<td>parents (or grown-ups) broke things or hurt each other</td>
<td>__________</td>
<td>none some lots</td>
</tr>
<tr>
<td>No</td>
<td>Yes</td>
<td>parents separated or divorced</td>
<td>__________</td>
<td>none some lots</td>
</tr>
<tr>
<td>No</td>
<td>Yes</td>
<td>been hit, whipped, beaten, or hurt by someone</td>
<td>__________</td>
<td>none some lots</td>
</tr>
<tr>
<td>No</td>
<td>Yes</td>
<td>been tied up, or locked in a small space</td>
<td>__________</td>
<td>none some lots</td>
</tr>
<tr>
<td>No</td>
<td>Yes</td>
<td>been made to do sex things</td>
<td>__________</td>
<td>none some lots</td>
</tr>
<tr>
<td>No</td>
<td>Yes</td>
<td>been threatened (someone said they would do something bad)</td>
<td>__________</td>
<td>none some lots</td>
</tr>
<tr>
<td>No</td>
<td>Yes</td>
<td>been robbed (or house robbed)</td>
<td>__________</td>
<td>none some lots</td>
</tr>
<tr>
<td>No</td>
<td>Yes</td>
<td>other scary or upsetting event (what was it? __________)</td>
<td>__________</td>
<td>none some lots</td>
</tr>
</tbody>
</table>

LITE-P 2.1 © Ricky Greenwald, 1999
Survey of Children’s Exposure to Community Violence

Author(s): Richters & Saltzman  
Year: 1990

Population/Age Group: 6 – 10 years old.

Purpose: The purpose of this measure is to assess the frequency by which a child has been victimized by, witnessed or heard about 20 forms of violence and violence related activities in the community.

Description: This instrument is a parent self-report; two forms exist - a Full Version and a Screening Survey. Information is available only on the Full Version, which is 54-item scale yielding information on two subscales: Direct Victimization by Violence and Witnessing Violence in Others. It can be administered to parents individually or in groups.

Psychometrics Properties: One study has been undertaken with 165 low-income children from a moderately violence neighborhood in Washington, D.C. Psychometric information is modest, with no assessment of test-retest reliability, internal consistency, inter-rater reliability or criterion validity available.

Contact Information: John E. Richters, University of Maryland, Department of Human Development and Institute for Child Study, Benjamin Building, Rm. 4104, College Park, MD 20742, 301-405-7354, jrichter@nih.gov
Survey of Exposure to Community Violence
Self Report Version

John E. Richters, Ph.D.
Child And Adolescent Disorders Research Branch
National Institute of Mental Health

William Saltzman
University of Maryland

June, 1990

1 5600 Fishers Lane, Room 18C-17
Rockville, Maryland 20857

Telephone: (301)443-5944
FAX: (301)443-6000
Survey of Exposure to Community Violence

Listed below are various kinds of violence and things related to violence that you may have experienced, seen, or heard about. For each question circle the letter that best describes your experience. **DO NOT INCLUDE IN YOUR ANSWERS THINGS YOU MAY HAVE SEEN OR HEARD ABOUT ONLY ON TV, RADIO, THE NEWS, OR IN THE MOVIES.** Do not write your name anywhere on this form. This is a confidential survey. No one will know that these are your answers.

### Question 1
How many times have you yourself been chased by gangs or individuals? (circle only one)

<table>
<thead>
<tr>
<th>Option</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) never</td>
<td>(d) 3 or 4 times</td>
</tr>
<tr>
<td>(b) 1 time</td>
<td>(e) 5 or 6 times</td>
</tr>
<tr>
<td>(c) 2 times</td>
<td>(f) 7 or 8 times</td>
</tr>
<tr>
<td>(g) at least once a month</td>
<td>(i) almost every day</td>
</tr>
</tbody>
</table>

**If you circled never, skip to question 2**

Where were you chased? (circle one or more)

<table>
<thead>
<tr>
<th>Option</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) near home</td>
<td>(c) near school</td>
</tr>
<tr>
<td>(b) in the home</td>
<td>(d) in school</td>
</tr>
<tr>
<td>(e) other</td>
<td></td>
</tr>
</tbody>
</table>

When was the last time you were chased? (circle only one)

<table>
<thead>
<tr>
<th>Option</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) about a week ago</td>
<td>(d) about 6 months ago</td>
</tr>
<tr>
<td>(b) about a month ago</td>
<td>(e) about 9 months ago</td>
</tr>
<tr>
<td>(c) about 3 months ago</td>
<td>(f) about a year ago</td>
</tr>
<tr>
<td>(g) between 1 and 2 years ago</td>
<td>(i) more than 5 years ago</td>
</tr>
</tbody>
</table>

### Question 2
How many times have you seen someone else get chased by gangs or older kids? (circle only one)

<table>
<thead>
<tr>
<th>Option</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) never</td>
<td>(d) 3 or 4 times</td>
</tr>
<tr>
<td>(b) 1 time</td>
<td>(e) 5 or 6 times</td>
</tr>
<tr>
<td>(c) 2 times</td>
<td>(f) 7 or 8 times</td>
</tr>
<tr>
<td>(g) at least once a month</td>
<td>(i) almost every day</td>
</tr>
</tbody>
</table>

**If you circled never, skip to question 3**

Who did this happen to? (What was the person's relationship to you?) (circle one or more)

<table>
<thead>
<tr>
<th>Option</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) adult stranger</td>
<td>(d) young stranger</td>
</tr>
<tr>
<td>(b) adult acquaintance</td>
<td>(e) young acquaintance</td>
</tr>
<tr>
<td>(c) adult friend</td>
<td>(f) young friend</td>
</tr>
<tr>
<td>(g) parent(s)</td>
<td>(j) don't know</td>
</tr>
<tr>
<td>(h) brother/sister</td>
<td></td>
</tr>
<tr>
<td>(i) other relative</td>
<td></td>
</tr>
</tbody>
</table>

Where did you see this happen? (circle one or more)

<table>
<thead>
<tr>
<th>Option</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) near home</td>
<td>(c) near school</td>
</tr>
<tr>
<td>(b) in the home</td>
<td>(d) in school</td>
</tr>
<tr>
<td>(e) other</td>
<td></td>
</tr>
</tbody>
</table>

When was the last time you saw someone being chased? (circle only one)

<table>
<thead>
<tr>
<th>Option</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) about a week ago</td>
<td>(d) about 6 months ago</td>
</tr>
<tr>
<td>(b) about a month ago</td>
<td>(e) about 9 months ago</td>
</tr>
<tr>
<td>(c) about 3 months ago</td>
<td>(f) about a year ago</td>
</tr>
<tr>
<td>(g) between 1 and 2 years ago</td>
<td>(i) more than 5 years ago</td>
</tr>
</tbody>
</table>
3. How many times have you only heard about someone being chased by gangs or older kids? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 4

Who was being chased? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Who did the chasing? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where were they being chased? (circle one or more)

(a) near home  (c) near school  (e) other __________
(b) in the home  (d) in school

When was the last time you heard of this happening? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

4. How many times have you seen other people using or selling illegal drugs? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 5

Who was using or selling drugs? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where did you see this happen? (circle one or more)

(a) near home  (c) near school  (e) other __________
(b) in the home  (d) in school
When was the last time you saw this? (circle only one)

(a) about a week ago  
(b) about a month ago  
(c) about 3 months ago

(d) about 6 months ago  
(e) about 9 months ago  
(f) about a year ago

(g) between 1 and 2 years ago  
(h) between 3 and 5 years ago  
(i) more than 5 years ago

5. How many times have you yourself actually been asked to get involved in any aspect of selling or distributing illegal drugs? (circle only one)

(a) never  
(b) 1 time  
(c) 2 times

(d) 3 or 4 times  
(e) 5 or 6 times  
(f) 7 or 8 times

(g) at least once a month  
(h) at least once a week  
(i) almost every day

If you circled never, skip to question 6

Who asked? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  
(b) adult acquaintance  
(c) adult friend

(d) young stranger  
(e) young acquaintance  
(f) young friend

(g) parent(s)  
(h) brother/sister  
(i) other relative

(j) don’t know

Where did it happen? (circle one or more)

(a) near home  
(b) in the home

(c) near school  
(d) in school

(e) other ________________

When was the last time this happened? (circle only one)

(a) about a week ago  
(b) about a month ago  
(c) about 3 months ago

(d) about 6 months ago  
(e) about 9 months ago  
(f) about a year ago

(g) between 1 and 2 years ago  
(h) between 3 and 5 years ago  
(i) more than 5 years ago

6. How many times have you yourself actually been asked to use illegal drugs? (circle only one)

(a) never  
(b) 1 time  
(c) 2 times

(d) 3 or 4 times  
(e) 5 or 6 times  
(f) 7 or 8 times

(g) at least once a month  
(h) at least once a week  
(i) almost every day

If you circled never, skip to question 7

Who asked? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  
(b) adult acquaintance  
(c) adult friend

(d) young stranger  
(e) young acquaintance  
(f) young friend

(g) parent(s)  
(h) brother/sister  
(i) other relative

(j) don’t know

Where did it happen? (circle one or more)

(a) near home  
(b) in the home

(c) near school  
(d) in school

(e) other ________________

When was the last time this happened? (circle only one)

(a) about a week ago  
(b) about a month ago  
(c) about 3 months ago

(d) about 6 months ago  
(e) about 9 months ago  
(f) about a year ago

(g) between 1 and 2 years ago  
(h) between 3 and 5 years ago  
(i) more than 5 years ago
7. How many times have you seen someone else being asked to get involved in any aspect of selling or distributing illegal drugs? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 8

Who was asked? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Who did the asking? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where were they when they were asked? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

8. How many times have you only heard about someone else being asked to get involved in any aspect of selling or distributing illegal drugs? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 9

Who was being asked? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Who did the asking? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where were they when they were asked? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school
9. How many times have you yourself actually been in a serious accident where you thought that you or someone else would get hurt very badly or die? (circle only one)

(a) never (d) 3 or 4 times (g) at least once a month
(b) 1 time (e) 5 or 6 times (h) at least once a week
(c) 2 times (f) 7 or 8 times (i) almost every day

If you circled never, skip to question 10.

Where did this happen? (circle one or more)

(a) near home (c) near school (e) other
(b) in the home (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago (d) about 6 months ago (g) between 1 and 2 years ago
(b) about a month ago (e) about 9 months ago (h) between 3 and 5 years ago
(c) about 3 months ago (f) about a year ago (i) more than 5 years ago

10. How many times have you seen someone else have a serious accident where you thought that the person would get hurt very badly or die? (circle only one)

(a) never (d) 3 or 4 times (g) at least once a month
(b) 1 time (e) 5 or 6 times (h) at least once a week
(c) 2 times (f) 7 or 8 times (i) almost every day

If you circled never, skip to question 11.

Who was in the accident? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger (d) young stranger (g) parent(s)
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend (f) young friend (i) other relative

Where did you see this happen? (circle one or more)

(a) near home (c) near school (e) other
(b) in the home (d) in school

When was the last time you saw this happen? (circle only one)

(a) about a week ago (d) about 6 months ago (g) between 1 and 2 years ago
(b) about a month ago (e) about 9 months ago (h) between 3 and 5 years ago
(c) about 3 months ago (f) about a year ago (i) more than 5 years ago
11. How many times have you only heard about someone else having a serious accident where you thought the person could have been hurt very badly or died? (circle only one)

(a) never  
(b) 1 time  
(c) 2 times  
(d) 3 or 4 times  
(e) 5 or 6 times  
(f) 7 or 8 times  
(g) at least once a month  
(h) at least once a week  
(i) almost every day

If you circled never, skip to question 12

Who was in the accident? (What was the person's relationship to you?) (circle one or more)

(a) parent(s)  
(b) brother/sister  
(c) other relative  
(d) young friend  
(e) young acquaintance  
(f) young stranger  
(g) adult friend  
(h) adult acquaintance  
(i) adult stranger  
(j) don't know

Where did the accident happen? (circle one or more)

(a) near home  
(b) in the home  
(c) near school  
(d) in school  
(e) other

When was the last time you heard of such an accident? (circle only one)

(a) about a week ago  
(b) about a month ago  
(c) about 3 months ago  
(d) about 6 months ago  
(e) about 9 months ago  
(f) about a year ago  
(g) between 1 and 2 years ago  
(h) between 3 and 5 years ago  
(i) more than 5 years ago

12. How many times have you yourself actually been at home when someone has broken into or tried to force their way into your home? (circle only one)

(a) never  
(b) 1 time  
(c) 2 times  
(d) 3 or 4 times  
(e) 5 or 6 times  
(f) 7 or 8 times  
(g) at least once a month  
(h) at least once a week  
(i) almost every day

If you circled never, skip to question 13

Who broke into the house? (What was the person's relationship to you?) (circle one or more)

(a) adult stranger  
(b) adult acquaintance  
(c) adult friend  
(d) young stranger  
(e) young acquaintance  
(f) young friend  
(g) parent(s)  
(h) brother/sister  
(i) other relative  
(j) don't know

When was the last time this happened? (circle only one)

(a) about a week ago  
(b) about a month ago  
(c) about 3 months ago  
(d) about 6 months ago  
(e) about 9 months ago  
(f) about a year ago  
(g) between 1 and 2 years ago  
(h) between 3 and 5 years ago  
(i) more than 5 years ago

13. How many times has your house been broken into when you weren't home? (circle only one)

(a) never  
(b) 1 time  
(c) 2 times  
(d) 3 or 4 times  
(e) 5 or 6 times  
(f) 7 or 8 times  
(g) at least once a month  
(h) at least once a week  
(i) almost every day

If you circled never, skip to question 14
Who broke into the house? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (c) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

14. How many times have you seen someone trying to force their way into somebody else’s house or apartment? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 15

Who did this happen to? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Who tried to break into the house? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where did it happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (c) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

15. How many times have you only heard about someone trying to force their way into somebody else’s house or apartment? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 16
16. How many times have you yourself actually been picked-up, arrested, or taken away by the police? (circle only one)

<table>
<thead>
<tr>
<th>Option</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a)</td>
<td>never</td>
</tr>
<tr>
<td>(b)</td>
<td>1 time</td>
</tr>
<tr>
<td>(c)</td>
<td>2 times</td>
</tr>
<tr>
<td>(d)</td>
<td>3 or 4 times</td>
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<tr>
<td>(e)</td>
<td>5 or 6 times</td>
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<tr>
<td>(f)</td>
<td>7 or 8 times</td>
</tr>
<tr>
<td>(g)</td>
<td>at least once a month</td>
</tr>
<tr>
<td>(h)</td>
<td>at least once a week</td>
</tr>
<tr>
<td>(i)</td>
<td>almost every day</td>
</tr>
</tbody>
</table>

If you circled never, skip to question 17.

17. How many times have you seen someone else being picked-up, arrested, or taken away by the police? (circle only one)

<table>
<thead>
<tr>
<th>Option</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a)</td>
<td>never</td>
</tr>
<tr>
<td>(b)</td>
<td>1 time</td>
</tr>
<tr>
<td>(c)</td>
<td>2 times</td>
</tr>
<tr>
<td>(d)</td>
<td>3 or 4 times</td>
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<tr>
<td>(e)</td>
<td>5 or 6 times</td>
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<tr>
<td>(f)</td>
<td>7 or 8 times</td>
</tr>
<tr>
<td>(g)</td>
<td>at least once a month</td>
</tr>
<tr>
<td>(h)</td>
<td>at least once a week</td>
</tr>
<tr>
<td>(i)</td>
<td>almost every day</td>
</tr>
</tbody>
</table>

If you circled never, skip to question 18.

18. Who did this happen to? (What was the person’s relationship to you?) (circle one or more)

<table>
<thead>
<tr>
<th>Option</th>
<th>Description</th>
</tr>
</thead>
<tbody>
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<td>(a)</td>
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<tr>
<td>(b)</td>
<td>adult acquaintance</td>
</tr>
<tr>
<td>(c)</td>
<td>adult friend</td>
</tr>
<tr>
<td>(d)</td>
<td>young stranger</td>
</tr>
<tr>
<td>(e)</td>
<td>young acquaintance</td>
</tr>
<tr>
<td>(f)</td>
<td>young friend</td>
</tr>
<tr>
<td>(g)</td>
<td>parent(s)</td>
</tr>
<tr>
<td>(h)</td>
<td>brother/sister</td>
</tr>
<tr>
<td>(i)</td>
<td>other relative</td>
</tr>
<tr>
<td>(j)</td>
<td>don’t know</td>
</tr>
</tbody>
</table>
Where did it happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time you saw this happen? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

18. How many times have you only heard about someone else being picked-up, arrested, or taken away by the police? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 19

Who did this happen to? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where did it happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time you heard about this happening? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

19. How many times have you yourself actually been threatened with serious physical harm by someone? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 20

Who did the threatening? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative
Where did it happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

20. How many times have you seen someone else being threatened with serious physical harm? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 21.

Who was threatened? (What was the person's relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (i) don't know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Who did the threatening? (What was the person's relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don't know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where were they when they were threatened? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

21. How many times have you only heard about someone else being threatened with serious physical harm? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 22.

Who was threatened? (What was the person's relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (i) don't know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative
Who did the threatening? (What was the person's relationship to you?) (one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend    (f) young friend    (i) other relative
(j) don't know

Where did the threat take place? (circle one or more)

(a) near home     (c) near school    (e) other
(b) in the home   (d) in school

When was the last time you heard of this happening? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago (f) about a year ago    (i) more than 5 years ago

22. How many times have you yourself actually been slapped, punched, or hit by someone? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 23

Who did this? (What was the person's relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend    (f) young friend    (i) other relative
(j) don't know

Where did it happen? (circle one or more)

(a) near home     (c) near school    (e) other
(b) in the home   (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago (f) about a year ago    (i) more than 5 years ago

23. How many times have you seen someone else being slapped, punched or hit by a member of their family? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 24
Who did this happen to? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Which one of this person’s family members did this? (circle one or more)

(a) parent(s)  (d) don’t know
(b) brother/sister
(c) other relative

Where did it happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time you saw this happen? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

24. How many times have you only heard about someone else being slapped, punched or hit by a member of their family? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 25.

Who did it happen to? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Which one of this person’s family members did this? (circle one or more)

(a) parent(s)  (d) don’t know
(b) brother/sister
(c) other relative

Where did it happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time you heard about this happening? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago
25. How many times have you seen another person getting slapped, punched or hit by someone who was not a member of their family? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 26.

Who did this happen to? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister  
(c) adult friend  (f) young friend  (i) other relative  
(j) don’t know

Who did it? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister  
(c) adult friend  (f) young friend  (i) other relative  
(j) don’t know

Where did this happen? (circle one or more)

(a) near home  (c) near school  (e) other 
(b) in the home  (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago 
(b) about a month ago  (e) about 9 months ago 
(c) about 3 months ago  (f) about a year ago 
(g) between 1 and 2 years ago 
(h) between 3 and 5 years ago 
(i) more than 5 years ago

26. How many times have you only heard about someone else getting slapped, punched or hit by a person who was not a member of their own family? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 27.

Who did this happen to? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister  
(c) adult friend  (f) young friend  (i) other relative  
(j) don’t know

Who did it? (What was the person’s relationship to you?) (circle one more)

(a) adult stranger  (d) young stranger  (g) parent(s)  
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister  
(c) adult friend  (f) young friend  (i) other relative  
(j) don’t know

Where did this happen? (circle one or more)

(a) near home  (c) near school  (e) other 
(b) in the home  (d) in school
When was the last time you heard of this happening? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

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27. How many times have you yourself actually been beaten up or mugged? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 28

Who did the beating up or mugging? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

(j) don’t know

Where did the beating or mugging happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

28. How many times have you seen someone else getting beaten up or mugged? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 29

Who was beaten up or mugged? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

(j) don’t know

Who did the beating up or mugging? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

(j) don’t know
Where did you see the beating or mugging? (circle one or more)
(a) near home (c) near school (e) other
(b) in the home (d) in school

When was the last time this happened? (circle only one)
(a) about a week ago (d) about 6 months ago (g) between 1 and 2 years ago
(b) about a month ago (e) about 9 months ago (h) between 3 and 5 years ago
(c) about 3 months ago (f) about a year ago (i) more than 5 years ago

29. How many times have you only heard about someone else being beaten up or mugged? (circle only one)
(a) never (d) 3 or 4 times (g) at least once a month
(b) 1 time (e) 5 or 6 times (h) at least once a week
(c) 2 times (f) 7 or 8 times (i) almost every day

If you circled never, skip to question 30.

Who was beaten up or mugged? (What was the person's relationship to you?)
(circle one or more)
(a) adult stranger (d) young stranger (g) parent(s) (j) don't know
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend (f) young friend (i) other relative

Who did the beating up or mugging? (What was the person's relationship to you?)
(circle one or more)
(a) adult stranger (d) young stranger (g) parent(s) (j) don't know
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend (f) young friend (i) other relative

Where did the beating or mugging happen? (circle one or more)
(a) near home (c) near school (e) other
(b) in the home (d) in school

When was the last time you heard of this happening? (circle only one)
(a) about a week ago (d) about 6 months ago (g) between 1 and 2 years ago
(b) about a month ago (e) about 9 months ago (h) between 3 and 5 years ago
(c) about 3 months ago (f) about a year ago (i) more than 5 years ago

30. How many times have you yourself actually been sexually assaulted, molested, or raped? (circle only one)
(a) never (d) 3 or 4 times (g) at least once a month
(b) 1 time (e) 5 or 6 times (h) at least once a week
(c) 2 times (f) 7 or 8 times (i) almost every day

If you circled never, skip to question 31.
Who did this to you? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

31. How many times have you seen someone else being sexually assaulted, molested, or raped? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 32

Who was being assaulted, molested, or raped? (What was the person’s relationship to you?)
(circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Who did this? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where did you see this happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time you saw this happen? (circle only one)

(e) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

32. How many times have you only heard about someone being sexually assaulted, molested, or raped? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 33
Who was assaulted, molested, or raped? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance (e) young acquaintance (h) brother/sister (i) other relative
(c) adult friend (f) young friend

Who did it? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance (e) young acquaintance (h) brother/sister (i) other relative
(c) adult friend (f) young friend

Where did this happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time you heard about this? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

33. How many times have you actually seen someone carrying or holding a gun or knife? (do not include police, military, or security officers) (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 34

Who had the weapon? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance (e) young acquaintance (h) brother/sister (i) other relative
(c) adult friend (f) young friend

Where did you see this? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time you saw someone carrying or holding the weapon? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago
34. How many times have you only heard about someone carrying or a gun or knife? (do not include police, military, or security officers) (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time    (e) 5 or 6 times  (h) at least once a week
(c) 2 times    (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 35

Who had the weapon? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance (e) young acquaintance  (h) brother/sister
(c) adult friend     (f) young friend     (i) other relative

Where was the person carrying or holding the weapon? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time you heard of this happening? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago (f) about a year ago  (i) more than 5 years ago

35. How many times have you yourself heard the sound of gunfire outside when you were in the following settings?

When in or near the home? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time    (e) 5 or 6 times  (h) at least once a week
(c) 2 times    (f) 7 or 8 times  (i) almost every day

When in or near the school building? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time    (e) 5 or 6 times  (h) at least once a week
(c) 2 times    (f) 7 or 8 times  (i) almost every day

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago (f) about a year ago  (i) more than 5 years ago

36. How many times have you seen or heard a gun fired in your home?

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time    (e) 5 or 6 times  (h) at least once a week
(c) 2 times    (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 37
Who shot the gun? (What was the person’s relationship to you?) (circle one or more)

- (a) adult stranger
- (b) adult acquaintance
- (c) adult friend
- (d) young stranger
- (e) young acquaintance
- (f) young friend
- (g) parent(s)
- (h) brother/sister
- (i) other relative
- (j) don’t know

Why was the gun fired? (circle one or more)

- (a) argument
- (b) accidental discharge
- (c) other

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37. How many times have you actually seen a seriously wounded person after an incident of violence? (circle only one)

- (a) never
- (b) 1 time
- (c) 2 times
- (d) 3 or 4 times
- (e) 5 or 6 times
- (f) 7 or 8 times
- (g) at least once a month
- (h) at least once a week
- (i) almost every day

If you circled never, skip to question 38

Who was wounded? (What was the person’s relationship to you?) (circle one or more)

- (a) adult stranger
- (b) adult acquaintance
- (c) adult friend
- (d) young stranger
- (e) young acquaintance
- (f) young friend
- (g) parent(s)
- (h) brother/sister
- (i) other relative
- (j) don’t know

Where did you see this? (circle one or more)

- (a) near home
- (b) in the home
- (c) near school
- (d) in school
- (e) other

When was the last time you saw this? (circle only one)

- (a) about a week ago
- (b) about a month ago
- (c) about 3 months ago
- (d) about 6 months ago
- (e) about 9 months ago
- (f) about a year ago
- (g) between 1 and 2 years ago
- (h) between 3 and 5 years ago
- (i) more than 5 years ago

38. How many times have you only heard about a person seriously wounded after an incident of violence? (circle only one)

- (a) never
- (b) 1 time
- (c) 2 times
- (d) 3 or 4 times
- (e) 5 or 6 times
- (f) 7 or 8 times
- (g) at least once a month
- (h) at least once a week
- (i) almost every day

If you circled never, skip to question 39

Who was wounded? (What was the person’s relationship to you?) (circle one or more)

- (a) adult stranger
- (b) adult acquaintance
- (c) adult friend
- (d) young stranger
- (e) young acquaintance
- (f) young friend
- (g) parent(s)
- (h) brother/sister
- (i) other relative
- (j) don’t know
Where did this happen? (circle one or more)

(a) near home          (c) near school          (e) other  
(b) in the home        (d) in school

When was the last time you heard about this? (circle only one)

(a) about a week ago   (d) about 6 months ago   (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago (f) about a year ago    (i) more than 5 years ago

39. How many times have you yourself actually been attacked or stabbed with a knife? (circle only one)

(a) never          (d) 3 or 4 times
(b) 1 time         (e) 5 or more times
(c) 2 times

If you circled never, skip to question 40

Who was the attacker? (What was the person's relationship to you?) (circle one or more)

(a) adult stranger    (d) young stranger    (g) parent(s)  (i) don’t know
(b) adult acquaintance(e) young acquaintance(h) brother/sister
(c) adult friend      (f) young friend     (j) other relative

Where did it happen? (circle one or more)

(a) near home        (c) near school        (e) other  
(b) in the home      (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago (d) about 6 months ago   (g) between 1 and 2 years ago
(b) about a month ago(e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago(f) about a year ago   (i) more than 5 years ago

40. How often have you seen someone else being attacked or stabbed with a knife? (circle only one)

(a) never          (d) 3 or 4 times          (g) at least once a month
(b) 1 time         (e) 5 or 6 times          (h) at least once a week
(c) 2 times        (f) 7 or 8 times          (i) almost every day

If you circled never, skip to question 41

Who was attacked? (What was the person's relationship to you?) (circle one or more)

(a) adult stranger    (d) young stranger    (g) parent(s)  (j) don’t know
(b) adult acquaintance(e) young acquaintance(h) brother/sister
(c) adult friend      (f) young friend     (l) other relative
Who did the attacking? (What was the person’s relationship to you?) (circle one or more)
(a) adult stranger (d) young stranger (g) parent(s) (j) don’t know
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend (f) young friend (i) other relative

Where did it happen? (circle one or more)
(a) near home (c) near school (e) other blank
(b) in the home (d) in school

When was the last time this happened? (circle only one)
(a) about a week ago (d) about 6 months ago (g) between 1 and 2 years ago
(b) about a month ago (e) about 9 months ago (h) between 3 and 5 years ago
(c) about 3 months ago (f) about a year ago (i) more than 5 years ago

41. How many times have you only heard about someone else being attacked or stabbed with a knife? (circle only one)
(a) never (d) 3 or 4 times (g) at least once a month
(b) 1 time (e) 5 or 6 times (h) at least once a week
(c) 2 times (f) 7 or 8 times (i) almost every day

If you circled never, skip to question 42.

Who was attacked? (What was the person’s relationship to you?) (circle one or more)
(a) adult stranger (d) young stranger (g) parent(s) (j) don’t know
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend (f) young friend (i) other relative

Who did the attacking? (What was the person’s relationship to you?) (circle one or more)
(a) adult stranger (d) young stranger (g) parent(s) (j) don’t know
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend (f) young friend (i) other relative

Where did it happen? (circle one or more)
(a) near home (c) near school (e) other blank
(b) in the home (d) in school

When was the last time you heard of this happening? (circle only one)
(a) about a week ago (d) about 6 months ago (g) between 1 and 2 years ago
(b) about a month ago (e) about 9 months ago (h) between 3 and 5 years ago
(c) about 3 months ago (f) about a year ago (i) more than 5 years ago

42. How many times have you yourself actually been shot with a gun? (circle only one)
(a) never (d) 3 or 4 times
(b) 1 time (e) 5 or more times
(c) 2 times
If you circled never, skip to question 43

Where did it happen? (circle one or more)

(a) near home  
(b) in the home  
(c) near school  
(d) in school  

Who did the shooting? (What was the person's relationship to you?) (circle one or more)

(a) adult stranger  
(b) adult acquaintance  
(c) adult friend  
(d) young stranger  
(e) young acquaintance  
(f) young friend  
(g) parent(s)  
(h) brother/sister  
(i) other relative  
(j) don’t know

When was the last time this happened? (circle only one)

(a) about a week ago  
(b) about a month ago  
(c) about 3 months ago  
(d) about 6 months ago  
(e) about 9 months ago  
(f) about a year ago  
(g) between 1 and 2 years ago  
(h) between 3 and 5 years ago  
(i) more than 5 years ago

43. How often have you seen someone else get shot with a gun? (circle only one)

(a) never  
(b) 1 time  
(c) 2 times  
(d) 3 or 4 times  
(e) 5 to 8 times  
(f) at least once a month  
(g) at least once a week  
(h) almost every day

If you circled never, skip to question 44

Who got shot? (What was the person's relationship to you?) (circle one or more)

(a) adult stranger  
(b) adult acquaintance  
(c) adult friend  
(d) young stranger  
(e) young acquaintance  
(f) young friend  
(g) parent(s)  
(h) brother/sister  
(i) other relative  
(j) don’t know

Who did the shooting? (What was the person's relationship to you?) (circle one or more)

(a) adult stranger  
(b) adult acquaintance  
(c) adult friend  
(d) young stranger  
(e) young acquaintance  
(f) young friend  
(g) parent(s)  
(h) brother/sister  
(i) other relative  
(j) don’t know

Where did it happen? (circle one or more)

(a) near home  
(b) in the home  
(c) near school  
(d) in school  

When was the last time this happened? (circle only one)

(a) about a week ago  
(b) about a month ago  
(c) about 3 months ago  
(d) about 6 months ago  
(e) about 9 months ago  
(f) about a year ago  
(g) between 1 and 2 years ago  
(h) between 3 and 5 years ago  
(i) more than 5 years ago

44. How many times have you only heard about someone else getting shot with a gun? (circle only one)

(a) never  
(b) 1 time  
(c) 2 times  
(d) 3 or 4 times  
(e) 5 or 6 times  
(f) 7 or 8 times  
(g) at least once a month  
(h) at least once a week  
(i) almost every day
If you circled never, skip to question 46

Who got shot? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger   (d) young stranger   (g) parent(s)   (j) don’t know
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend     (f) young friend       (i) other relative

Who did the shooting? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger   (d) young stranger   (g) parent(s)   (j) don’t know
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend     (f) young friend       (i) other relative

Where did it happen? (circle one or more)

(a) near home   (c) near school   (e) other ____________
(b) in the home   (d) in school

When was the last time you heard of this happening? (circle only one)

(a) about a week ago   (d) about 6 months ago   (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago   (h) between 3 and 5 years ago
(c) about 3 months ago (f) about a year ago    (i) more than 5 years ago

Dead Bodies

45. How many times have you actually seen a dead person somewhere in the community? (do not include wakes and funerals) (circle only one)

(a) never   (d) 3 or 4 times   (g) at least once a month
(b) 1 time   (e) 5 or 6 times   (h) at least once a week
(c) 2 times   (f) 7 or 8 times   (i) almost every day

If you circled never, skip to question 46

Who was the dead person? (What was the person’s relationship to you?) (one or more)

(a) adult stranger   (d) young stranger   (g) parent(s)   (j) don’t know
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend     (f) young friend       (i) other relative

Where did you see this? (circle one or more)

(a) near home   (c) near school   (e) other ____________
(b) in the home   (d) in school

When was the last time you saw this? (circle only one)

(a) about a week ago   (d) about 6 months ago   (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago   (h) between 3 and 5 years ago
(c) about 3 months ago (f) about a year ago    (i) more than 5 years ago
46. How many times have you *only heard about* a dead body somewhere in the community? (do not include wakes and funerals) (circle only one)

(a) never  (d) 3 or 4 times  
(b) 1 time   (e) 5 or 6 times  
(c) 2 times  (f) 7 or 8 times  
(g) at least once a month  
(h) at least once a week  
(i) almost every day

If you circled never, skip to question 47.

Where was the dead person seen? (circle one or more)

(a) near home  (c) near school  
(b) in the home  (d) in school

Who was the dead person? (What was the person’s relationship to you?) (one or more)

(a) adult stranger  (d) young stranger  
(b) adult acquaintance  (e) young acquaintance  
(c) adult friend  (f) young friend  
(g) parent(s)  (h) brother/sister  
(j) don’t know  
(i) other relative

Who saw the dead person? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  
(b) adult acquaintance  (e) young acquaintance  
(c) adult friend  (f) young friend  
(g) parent(s)  (h) brother/sister  
(j) don’t know  
(i) other relative

When was the last time you heard about someone seeing a dead body? (circle only one)

(a) about a week ago  (d) about 6 months ago  
(b) about a month ago  (e) about 9 months ago  
(c) about 3 months ago  (f) about a year ago  
(g) between 1 and 2 years ago  
(h) between 3 and 5 years ago  
(i) more than 5 years ago

47. How many times have you *actually seen* someone committing suicide? (circle only one)

(a) never  (d) 3 or 4 times  
(b) 1 time   (e) 5 or 6 times  
(c) 2 times  (f) 7 or 8 times  
(g) at least once a month  
(h) at least once a week  
(i) almost every day

If you circled never, skip to question 48.

Who committed suicide? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  
(b) adult acquaintance  (e) young acquaintance  
(c) adult friend  (f) young friend  
(g) parent(s)  (h) brother/sister  
(j) don’t know  
(i) other relative

Where did you see this happen? (circle one or more)

(a) near home  (c) near school  
(b) in the home  (d) in school  
(e) other

Suicides
When was the last time you saw this happen? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

48. How many times have you only heard about someone committing suicide? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 49.

Who committed suicide? (What was the person’s relationship to you?) (circle one or more)

(a) parent(s)  (d) young friend  (g) adult friend  (j) don’t know
(b) brother/sister  (e) young acquaintance  (h) adult acquaintance
(c) other relative  (f) young stranger  (i) adult stranger

Where did the suicide take place? (circle one or more)

(a) near home  (c) near school  (e) other _____________
(b) in the home  (d) in school

When was the last time you heard about someone committing suicide? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

49. How many times have you actually seen someone being killed by another person? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 50.

Who got killed? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Who did the killing? (What was the person’s relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where did you see the killing? (circle one or more)

(a) near home  (c) near school  (e) other _____________
(b) in the home  (d) in school
When was the last time you saw someone being killed? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

50. How many times have you only heard about someone being killed by another person? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 51

Who got killed? (What was the person's relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don't know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Who did the killing? (What was the person's relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don't know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where did the killing take place? (circle one or more)

(a) near home  (c) near school  (e) other ____________
(b) in the home  (d) in school

When was the last time you heard about someone being killed? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

Other Types of Violence

51. How many times have you been in any kind of situation not already described where you were extremely frightened or thought that you would get hurt very badly or die? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 52

Please describe that situation in your own words:

_____________________________________________________
_____________________________________________________
_____________________________________________________
_____________________________________________________
_____________________________________________________
_____________________________________________________
52. How many times have you yourself actually been the victim of any type of violence such as those described in this questionnaire? (circle only one)

| (a) never | (d) 3 or 4 times | (g) at least once a month |
| (b) 1 time | (e) 5 or 6 times | (h) at least once a week |
| (c) 2 times | (f) 7 or 8 times | (i) almost every day |

If you circled never, skip to question 53

53. Who committed the violent act? (What was the person’s relationship to you?) (circle one or more)

| (a) adult stranger | (d) young stranger | (g) parent(s) |
| (b) adult acquaintance | (e) young acquaintance | (h) brother/sister |
| (c) adult friend | (f) young friend | (i) other relative |

Where did this happen? (circle one or more)

| (a) near home | (c) near school | (e) other |
| (b) in the home | (d) in school |

When was the last time something like this happened to you? (circle only one)

| (a) about a week ago | (d) about 6 months ago | (g) between 1 and 2 years ago |
| (b) about a month ago | (e) about 9 months ago | (h) between 3 and 5 years ago |
| (c) about 3 months ago | (f) about a year ago | (i) more than 5 years ago |

53. How many times have you seen someone else being victimized by some form of violence such as those described in this questionnaire? (circle only one)

| (a) never | (d) 3 or 4 times | (g) at least once a month |
| (b) 1 time | (e) 5 or 6 times | (h) at least once a week |
| (c) 2 times | (f) 7 or 8 times | (i) almost every day |

If you circled never, skip to question 54

54. Who did this happen to? (What was the person’s relationship to you?) (circle one or more)

| (a) adult stranger | (d) young stranger | (g) parent(s) |
| (b) adult acquaintance | (e) young acquaintance | (h) brother/sister |
| (c) adult friend | (f) young friend | (i) other relative |
National Institute of Mental Health

Who committed the violent act? (What was the person's relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don't know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where did it happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time you saw this happen? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

54. How many times have you only heard about someone else being victimized by some form of violence such as those described in this questionnaire? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to end

Who did it happen to? (What was the person's relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don't know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Who committed the violent act? (What was the person's relationship to you?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don't know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where did it happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time you heard of this happening? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago
Survey of Exposure to Community Violence
Parent Report Version

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June, 1990

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Survey of Children’s Exposure to Community Violence

Listed below are various kinds of violence and things related to violence that your child may have experienced, seen, or heard about. For each question circle the letter that best describes your child’s experience to the best of your knowledge. Do NOT INCLUDE IN YOUR ANSWERS THINGS YOUR CHILD MAY HAVE SEEN OR HEARD ABOUT ONLY ON TV, RADIO, THE NEWS, OR IN THE MOVIES. Do not write your name anywhere on this form. This is a confidential survey. No one will know that these are your answers.

1. How many times has your child himself or herself actually been chased by gangs or older kids? (circle only one)
   (a) never               (d) 3 or 4 times               (g) at least once a month
   (b) 1 time               (e) 5 or 6 times               (h) at least once a week
   (c) 2 times               (f) 7 or 8 times               (i) almost every day

   If you circled never, skip to question 2

   Where was your child chased? (circle one or more)
   (a) near home               (c) near school               (e) other ________________
   (b) in the home               (d) in school

   When was the last time your child was chased? (circle only one)
   (a) about a week ago (d) about 6 months ago (g) between 1 and 2 years ago
   (b) about a month ago (e) about 9 months ago (h) between 3 and 5 years ago
   (c) about 3 months ago (f) about a year ago (i) more than 5 years ago

2. How many times has your child seen someone else get chased by gangs or older kids? (circle only one)
   (a) never               (d) 3 or 4 times               (g) at least once a month
   (b) 1 time               (e) 5 or 6 times               (h) at least once a week
   (c) 2 times               (f) 7 or 8 times               (i) almost every day

   If you circled never, skip to question 3

   Who was chased? (What was the person’s relationship to your child?) (circle one or more)
   (a) adult stranger               (d) young stranger               (g) parent(s)
   (b) adult acquaintance               (e) young acquaintance               (h) brother/sister
   (c) adult friend               (f) young friend               (i) other relative

   Where did your child see this happen? (circle one or more)
   (a) near home               (c) near school               (e) other ________________
   (b) in the home               (d) in school

   When was the last time your child saw someone being chased? (circle only one)
   (a) about a week ago (d) about 6 months ago (g) between 1 and 2 years ago
   (b) about a month ago (e) about 9 months ago (h) between 3 and 5 years ago
   (c) about 3 months ago (f) about a year ago (i) more than 5 years ago
3. How many times has your child only heard about someone being chased by gangs or older kids? (circle only one)

- (a) never
- (b) 1 time
- (c) 2 times
- (d) 3 or 4 times
- (e) 5 or 6 times
- (f) 7 or 8 times
- (g) at least once a month
- (h) at least once a week
- (i) almost every day

If you circled never, skip to question 4

Who was chased? (What was the person's relationship to your child?) (circle one or more)

- (a) adult stranger
- (b) adult acquaintance
- (c) adult friend
- (d) young stranger
- (e) young acquaintance
- (f) young friend
- (g) parent(s)
- (h) brother/sister
- (i) other relative
- (j) don't know

Who did the chasing? (What was the person's relationship to your child?) (circle one or more)

- (a) adult stranger
- (b) adult acquaintance
- (c) adult friend
- (d) young stranger
- (e) young acquaintance
- (f) young friend
- (g) parent(s)
- (h) brother/sister
- (i) other relative
- (j) don't know

Where were they being chased? (circle one or more)

- (a) near home
- (b) in the home
- (c) near school
- (d) in school
- (e) other ______________

When was the last time your child heard of this happening? (circle only one)

- (a) about a week ago
- (b) about a month ago
- (c) about 3 months ago
- (d) about 6 months ago
- (e) about 9 months ago
- (f) about a year ago
- (g) between 1 and 2 years ago
- (h) between 3 and 5 years ago
- (i) more than 5 years ago

4. How many times has your child seen other people using or selling illegal drugs? (circle only one)

- (a) never
- (b) 1 time
- (c) 2 times
- (d) 3 or 4 times
- (e) 5 or 6 times
- (f) 7 or 8 times
- (g) at least once a month
- (h) at least once a week
- (i) almost every day

If you circled never, skip to question 5

Who was using or selling drugs? (What was the person's relationship to your child?) (circle one or more)

- (a) adult stranger
- (b) adult acquaintance
- (c) adult friend
- (d) young stranger
- (e) young acquaintance
- (f) young friend
- (g) parent(s)
- (h) brother/sister
- (i) other relative
- (j) don't know

Where did your child see this happen? (circle one or more)

- (a) near home
- (b) in the home
- (c) near school
- (d) in school
- (e) other ______________
When was the last time your child saw this? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

5. How many times has your child himself or herself actually been asked to get involved in any aspect of selling or distributing illegal drugs? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 6

Who did the asking? (What was the person's relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don't know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where did it happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

6. How many times has your child himself or herself actually been asked to use illegal drugs? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 7

Who did the asking? (What was the person's relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don't know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where did it happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago
7. How many times has your child seen someone else being asked to get involved in any aspect of selling or distributing illegal drugs? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 8

Who was asked? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Who did the asking? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where were they when they were asked? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

8. How many times has your child only heard about someone else being asked to get involved in any aspect of selling or distributing illegal drugs? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 9

Who was asked? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Who did the asking? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where were they when they were asked? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school
When was the last time your child heard about this? (circle only one)

(a) about a week ago       (d) about 6 months ago       (g) between 1 and 2 years ago
(b) about a month ago      (e) about 9 months ago       (h) between 3 and 5 years ago
(c) about 3 months ago     (f) about a year ago         (i) more than 5 years ago

Serious Accidents

9. How many times has your child himself or herself actually been in a serious accident where he or she thought that someone would get hurt very badly or die? (circle only one)

(a) never       (d) 3 or 4 times       (g) at least once a month
(b) 1 time      (e) 5 or 6 times       (h) at least once a week
(c) 2 times     (f) 7 or 8 times       (i) almost every day

If you circled never, skip to question 10

Where did this happen? (circle one or more)

(a) near home       (c) near school       (e) other __________
(b) in the home     (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago       (d) about 6 months ago       (g) between 1 and 2 years ago
(b) about a month ago      (e) about 9 months ago       (h) between 3 and 5 years ago
(c) about 3 months ago     (f) about a year ago         (i) more than 5 years ago

10. How many times has your child seen someone else have a serious accident where he or she thought that the person would get hurt very badly or die? (circle only one)

(a) never       (d) 3 or 4 times       (g) at least once a month
(b) 1 time      (e) 5 or 6 times       (h) at least once a week
(c) 2 times     (f) 7 or 8 times       (i) almost every day

If you circled never, skip to question 11

Who was in the accident? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger       (d) young stranger       (g) parent(s)       (j) don’t know
(b) adult acquaintance   (e) young acquaintance   (h) brother/sister
(c) adult friend         (f) young friend       (i) other relative

Where did your child see this happen? (circle one or more)

(a) near home       (c) near school       (e) other __________
(b) in the home     (d) in school

When was the last time your child saw this happen? (circle only one)

(a) about a week ago       (d) about 6 months ago       (g) between 1 and 2 years ago
(b) about a month ago      (e) about 9 months ago       (h) between 3 and 5 years ago
(c) about 3 months ago     (f) about a year ago         (i) more than 5 years ago
11. How many times has your child only heard about someone else having a serious accident where your child thought the person could have been hurt very badly or died? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 12

Who was in the accident? (What was the person's relationship to your child?) (circle one or more)

(a) parent(s)  (d) young friend  (g) adult friend  (j) don't know
(b) brother/sister  (e) young acquaintance  (h) adult acquaintance
(c) other relative  (f) young stranger  (i) adult stranger

Where did the accident happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time your child heard of such an accident? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

12. How many times has your child himself or herself actually been at home when someone has broken into or tried to force their way into your home? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 13

Who broke into the house? (What was the person's relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don't know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

13. How many times has your house been broken into when your child wasn't home? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day
If you circled never, skip to question 14

Who broke into the house? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend (f) young friend (i) other relative

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

14. How many times has your child seen someone trying to force their way into somebody else’s house or apartment? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 15

Who did this happen to? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend (f) young friend (i) other relative

Who tried to break into the house? (What was the person’s relationship to your child?)
(circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend (f) young friend (i) other relative

Where did it happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

15. How many times has your child only heard about someone trying to force their way into somebody else’s house or apartment? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day
If you circled never, skip to question 16

Who tried to break into the house? (What was the person's relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don't know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Whose house was broken into? (What was the person's relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don't know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

When was the last time your child heard about this? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

16. How many times has your child himself or herself actually been picked-up, arrested, or taken away by the police? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 17

Where was your child when this happened? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

17. How many times has your child seen someone else being picked-up, arrested, or taken away by the police? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day
Who did this happen to? (What was the person's relationship to your child?) (circle one or more)

(a) adult stranger   (d) young stranger   (g) parent(s)   (j) don't know
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend     (f) young friend     (i) other relative

Where did it happen? (circle one or more)

(a) near home     (c) near school    (e) other _______________
(b) in the home   (d) in school

When was the last time your child saw this happen? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago (f) about a year ago   (i) more than 5 years ago

18. How many times has your child only heard about someone else being picked-up, arrested, or taken away by the police? (circle only one)

(a) never     (d) 3 or 4 times     (g) at least once a month
(b) 1 time    (e) 5 or 6 times     (h) at least once a week
(c) 2 times   (f) 7 or 8 times     (i) almost every day

If you circled never, skip to question 19

Who did this happen to? (What was the person's relationship to your child?) (circle one or more)

(a) adult stranger   (d) young stranger   (g) parent(s)   (j) don't know
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend     (f) young friend     (i) other relative

Where did it happen? (circle one or more)

(a) near home     (c) near school    (e) other _______________
(b) in the home   (d) in school

When was the last time your child heard about this happening? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago (f) about a year ago   (i) more than 5 years ago

19. How many times has your child himself or herself actually been threatened with serious physical harm by someone? (circle only one)

(a) never     (d) 3 or 4 times     (g) at least once a month
(b) 1 time    (e) 5 or 6 times     (h) at least once a week
(c) 2 times   (f) 7 or 8 times     (i) almost every day

Threats
If you circled never, skip to question 20

Who did the threatening? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where did it happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

20. How many times has your child seen someone else being threatened with serious physical harm? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 21

Who was threatened? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Who did the threatening? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where were they when they were threatened? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

21. How many times has your child only heard about someone else being threatened with serious physical harm? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day
If you circled never, skip to question 23

Who was threatened? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Who did the threatening? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where did the threat take place? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time your child heard about this happening? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

22. How many times has your child himself or herself actually been slapped, punched, or hit by someone? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 23

Who did this? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where did it happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago
23. How many times has your child *seen* someone else being slapped, punched or hit by a member of their family? (circle only one)

(a) never  
(b) 1 time  
(c) 2 times  
(d) 3 or 4 times  
(e) 5 or 6 times  
(f) 7 or 8 times  
(g) at least once a month  
(h) at least once a week  
(i) almost every day

*If you circled never, skip to question 24*

Who did this happen to? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  
(b) adult acquaintance  
(c) adult friend  
(d) young stranger  
(e) young acquaintance  
(f) young friend  
(g) parent(s)  
(h) brother/sister  
(i) other relative  
(j) don’t know

Which one of this person’s family members did this? (circle one or more)

(a) parent(s)  
(b) brother/sister  
(c) other relative  
(d) don’t know

Where did it happen? (circle one or more)

(a) near home  
(b) in the home  
(c) near school  
(d) in school  
(e) other ____________

When was the last time your child saw this happen? (circle only one)

(a) about a week ago  
(b) about a month ago  
(c) about 3 months ago  
(d) about 6 months ago  
(e) about 9 months ago  
(f) about a year ago  
(g) between 1 and 2 years ago  
(h) between 3 and 5 years ago  
(i) more than 5 years ago

24. How many times has your child *only heard about* someone else being slapped, punched or hit by a member of their family? (circle only one)

(a) never  
(b) 1 time  
(c) 2 times  
(d) 3 or 4 times  
(e) 5 or 6 times  
(f) 7 or 8 times  
(g) at least once a month  
(h) at least once a week  
(i) almost every day

*If you circled never, skip to question 23*

Who did it happen to? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  
(b) adult acquaintance  
(c) adult friend  
(d) young stranger  
(e) young acquaintance  
(f) young friend  
(g) parent(s)  
(h) brother/sister  
(i) other relative  
(j) don’t know

Which one of this person’s family members did this? (circle one or more)

(a) parent(s)  
(b) brother/sister  
(c) other relative  
(d) don’t know

Where did it happen? (circle one or more)

(a) near home  
(b) in the home  
(c) near school  
(d) in school  
(e) other ____________
When was the last time your child heard about this happening? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago  
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago  
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

25. How many times has your child seen another person getting slapped, punched or hit by someone who was not a member of their family? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month  
(b) 1 time  (e) 5 or 6 times  (h) at least once a week  
(c) 2 times  (f) 7 or 8 times  (i) almost every day

\[If\ you\ circled\ never,\ skip\ to\ question\ 26.\]

Who did this happen to? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know  
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister  
(c) adult friend  (f) young friend  (i) other relative

Who did it? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know  
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister  
(c) adult friend  (f) young friend  (i) other relative

Where did this happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago  
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago  
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

26. How many times has your child only heard about someone else getting slapped, punched or hit by a person who was not a member of their own family? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month  
(b) 1 time  (e) 5 or 6 times  (h) at least once a week  
(c) 2 times  (f) 7 or 8 times  (i) almost every day

\[If\ you\ circled\ never,\ skip\ to\ question\ 27.\]

Who did this happen to? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know  
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister  
(c) adult friend  (f) young friend  (i) other relative
Who did it? (What was the person's relationship to your child?) (circle one more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative
(j) don't know

Where did this happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time your child heard about this happening? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

27. How many times has your child himself or herself actually been beaten up or mugged? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 28

Who did the beating up or mugging? (What was the person's relationship to your child?)
(circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative
(j) don't know

Where did the beating up or mugging happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

28. How many times has your child seen someone else getting beaten up or mugged? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day
If you circled never, skip to question 29

Who was beaten up or mugged? (What was the person's relationship to your child?)
(circle one or more)
(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend (f) young friend (i) other relative
(j) don't know

Who did the beating up or mugging? (What was the person's relationship to your child?)
(circle one or more)
(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend (f) young friend (i) other relative
(j) don't know

Where did he or she see the beating up or mugging? (circle one or more)
(a) near home  (c) near school  (e) other
(b) in the home (d) in school

When was the last time this happened? (circle only one)
(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago (e) about 9 months ago (h) between 3 and 5 years ago
(c) about 3 months ago (f) about a year ago (i) more than 5 years ago

29. How many times has your child only heard about someone else being beaten up or mugged?
(circle only one)
(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 30

Who was beaten up or mugged? (What was the person's relationship to your child?)
(circle one or more)
(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend (f) young friend (i) other relative
(j) don't know

Who did the beating up or mugging? (What was the person's relationship to your child?)
(circle one or more)
(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend (f) young friend (i) other relative
(j) don't know

Where did the beating up or mugging happen? (circle one or more)
(a) near home  (c) near school  (e) other
(b) in the home (d) in school
When was the last time your child heard about this happening? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

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30. How many times has your child *himself or herself* actually been sexually assaulted, molested, or raped? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

*If you circled never, skip to question 31.*

Who did this to your child? (What was the person's relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

31. How many times has your child *seen someone else* being sexually assaulted, molested, or raped? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

*If you circled never, skip to question 32.*

Who was being assaulted, molested, or raped? (What was the person's relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Who did it? (What was the person's relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative
Where did your child see this happen? (circle one or more)

(a) near home  
(b) in the home  
(c) near school  
(d) in school  
(e) other

When was the last time your child saw this happen? (circle only one)

(a) about a week ago  
(b) about a month ago  
(c) about 3 months ago  
(d) about 6 months ago  
(e) about 9 months ago  
(f) about a year ago  
(g) between 1 and 2 years ago  
(h) between 3 and 5 years ago  
(i) more than 5 years ago

32. How many times has your child only heard about someone being sexually assaulted, molested, or raped? (circle only one)

(a) never  
(b) 1 time  
(c) 2 times  
(d) 3 or 4 times  
(e) 5 or 6 times  
(f) 7 or 8 times  
(g) at least once a month  
(h) at least once a week  
(i) almost every day

If you circled never, skip to question 33

Who was assaulted, molested, or raped? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  
(b) adult acquaintance  
(c) adult friend  
(d) young stranger  
(e) young acquaintance  
(f) young friend  
(g) parent(s)  
(h) brother/sister  
(i) other relative  
(j) don’t know

Who did it? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  
(b) adult acquaintance  
(c) adult friend  
(d) young stranger  
(e) young acquaintance  
(f) young friend  
(g) parent(s)  
(h) brother/sister  
(i) other relative  
(j) don’t know

Where did this happen? (circle one or more)

(a) near home  
(b) in the home  
(c) near school  
(d) in school  
(e) other

When was the last time your child heard about this? (circle only one)

(a) about a week ago  
(b) about a month ago  
(c) about 3 months ago  
(d) about 6 months ago  
(e) about 9 months ago  
(f) about a year ago  
(g) between 1 and 2 years ago  
(h) between 3 and 5 years ago  
(i) more than 5 years ago

33. How many times has your child actually seen someone carrying or holding a gun or knife? (do not include police, military, or security officers) (circle only one)

(a) never  
(b) 1 time  
(c) 2 times  
(d) 3 or 4 times  
(e) 5 or 6 times  
(f) 7 or 8 times  
(g) at least once a month  
(h) at least once a week  
(i) almost every day
If you circled never, skip to question 34

Who had the weapon? (What was the person’s relationship to your child?) (circle one or more)

- (a) adult stranger
- (b) adult acquaintance
- (c) adult friend
- (d) young stranger
- (e) young acquaintance
- (f) young friend
- (g) parent(s)
- (h) brother/sister
- (i) other relative
- (j) don’t know

Where did your child see this? (circle one or more)

- (a) near home
- (b) in the home
- (c) near school
- (d) in school
- (e) other

When was the last time your child saw someone carrying or holding the weapon? (circle only one)

- (a) about a week ago
- (b) about a month ago
- (c) about 3 months ago
- (d) about 6 months ago
- (e) about 9 months ago
- (f) about a year ago
- (g) between 1 and 2 years ago
- (h) between 3 and 5 years ago
- (i) more than 5 years ago

34. How many times has your child only heard about someone carrying or a gun or knife? (do not include police, military, or security officers) (circle only one)

- (a) never
- (b) 1 time
- (c) 2 times
- (d) 3 or 4 times
- (e) 5 or 6 times
- (f) 7 or 8 times
- (g) at least once a month
- (h) at least once a week
- (i) almost every day

If you circled never, skip to question 35

Who had the weapon? (What was the person’s relationship to your child?) (circle one or more)

- (a) adult stranger
- (b) adult acquaintance
- (c) adult friend
- (d) young stranger
- (e) young acquaintance
- (f) young friend
- (g) parent(s)
- (h) brother/sister
- (i) other relative

Where was the person carrying or holding the weapon? (circle one or more)

- (a) near home
- (b) in the home
- (c) near school
- (d) in school
- (e) other

When was the last time your child heard of this happening? (circle only one)

- (a) about a week ago
- (b) about a month ago
- (c) about 3 months ago
- (d) about 6 months ago
- (e) about 9 months ago
- (f) about a year ago
- (g) between 1 and 2 years ago
- (h) between 3 and 5 years ago
- (i) more than 5 years ago

35. How many times has your child himself or herself heard the sound of gunfire outside when he/she was in the following settings?

When in or near the home? (circle only one)

- (a) never
- (b) 1 time
- (c) 2 times
- (d) 3 or 4 times
- (e) 5 or 6 times
- (f) 7 or 8 times
- (g) at least once a month
- (h) at least once a week
- (i) almost every day

When in or near the school building? (circle only one)

- (a) never
- (b) 1 time
- (c) 2 times
- (d) 3 or 4 times
- (e) 5 or 6 times
- (f) 7 or 8 times
- (g) at least once a month
- (h) at least once a week
- (i) almost every day
When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

36. How many times has your child seen or heard a gun fired in your home?

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 37

Who shot the gun? (What was the person's relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Why was the gun fired? (circle one or more)

(a) argument
(b) accidental discharge
(c) other ______________

37. How many times has your child actually seen a seriously wounded person after an incident of violence? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 38

Who was wounded? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where did your child see this? (circle one or more)

(a) near home  (c) near school  (e) other ______________
(b) in the home  (d) in school

When was the last time your child saw this? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago
38. How many times has your child only heard about a person seriously wounded after an incident of violence? (circle only one)

- (a) never
- (b) 1 time
- (c) 2 times
- (d) 3 or 4 times
- (e) 5 or 6 times
- (f) 7 or 8 times
- (g) at least once a month
- (h) at least once a week
- (i) almost every day

If you circled never, skip to question 39.

Who was wounded? (What was the person's relationship to your child?) (circle one or more)

- (a) adult stranger
- (b) adult acquaintance
- (c) adult friend
- (d) young stranger
- (e) young acquaintance
- (f) young friend
- (g) parent(s)
- (h) brother/sister
- (i) other relative
- (j) don't know

Where did this happen? (circle one or more)

- (a) near home
- (b) in the home
- (c) near school
- (d) in school
- (e) other

When was the last time your child heard about this? (circle only one)

- (a) about a week ago
- (b) about a month ago
- (c) about 3 months ago
- (d) about 6 months ago
- (e) about 9 months ago
- (f) about a year ago
- (g) between 1 and 2 years ago
- (h) between 3 and 5 years ago
- (i) more than 5 years ago

39. How many times has your child himself or herself actually been attacked or stabbed with a knife? (circle only one)

- (a) never
- (b) 1 time
- (c) 2 times
- (d) 3 or 4 times
- (e) 5 or more times

If you circled never, skip to question 40.

Who was the attacker? (What was the person's relationship to your child?) (circle one or more)

- (a) adult stranger
- (b) adult acquaintance
- (c) adult friend
- (d) young stranger
- (e) young acquaintance
- (f) young friend
- (g) parent(s)
- (h) brother/sister
- (i) other relative
- (j) don't know

Where did it happen? (circle one or more)

- (a) near home
- (b) in the home
- (c) near school
- (d) in school
- (e) other

When was the last time this happened? (circle only one)

- (a) about a week ago
- (b) about a month ago
- (c) about 3 months ago
- (d) about 6 months ago
- (e) about 9 months ago
- (f) about a year ago
- (g) between 1 and 2 years ago
- (h) between 3 and 5 years ago
- (i) more than 5 years ago
40. How often has your child seen someone else being attacked or stabbed with a knife? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

**If you circled never, skip to question 41.**

Who was attacked? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Who did the attacking? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where did it happen? (circle one or more)

(a) near home  (c) near school  (e) other ______________________
(b) in the home  (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

41. How many times has your child only heard about someone else being attacked or stabbed with a knife? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

**If you circled never, skip to question 42.**

Who was attacked? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Who did the attacking? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where did it happen? (circle one or more)

(a) near home  (c) near school  (e) other ______________________
(b) in the home  (d) in school
When was the last time your child heard about this happening? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

42. How many times has your child himself or herself actually been shot with a gun? (circle only one)

(a) never  (d) 3 or 4 times
(b) 1 time  (e) 5 or more times
(c) 2 times

If you circled never, skip to question 45

Where did it happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

Who did the shooting? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

43. How often has your child seen someone else get shot with a gun? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a week
(b) 1 time  (e) 5 to 8 times  (h) almost every day
(c) 2 times  (f) at least once a month

If you circled never, skip to question 44

Who got shot? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Who did the shooting? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative
Where did it happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

44. How many times has your child only heard about someone else getting shot with a gun? (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 45

Who got shot? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Who did the shooting? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  (d) young stranger  (g) parent(s)  (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend  (f) young friend  (i) other relative

Where did it happen? (circle one or more)

(a) near home  (c) near school  (e) other
(b) in the home  (d) in school

When was the last time your child heard about this happening? (circle only one)

(a) about a week ago  (d) about 6 months ago  (g) between 1 and 2 years ago
(b) about a month ago  (e) about 9 months ago  (h) between 3 and 5 years ago
(c) about 3 months ago  (f) about a year ago  (i) more than 5 years ago

45. How many times has your child actually seen a dead person somewhere in the community? (do not include wakes and funerals) (circle only one)

(a) never  (d) 3 or 4 times  (g) at least once a month
(b) 1 time  (e) 5 or 6 times  (h) at least once a week
(c) 2 times  (f) 7 or 8 times  (i) almost every day

If you circled never, skip to question 45
Who was the dead person? (What was the person's relationship to your child?) (circle one or more)
(a) adult stranger (d) young stranger (g) parent(s) (j) don't know
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend (f) young friend (i) other relative

Where did your child see this? (circle one or more)
(a) near home (c) near school (e) other
(b) in the home (d) in school

When was the last time your child saw this? (circle only one)
(a) about a week ago (d) about 6 months ago (g) between 1 and 2 years ago
(b) about a month ago (e) about 9 months ago (h) between 3 and 5 years ago
(c) about 3 months ago (f) about a year ago (i) more than 5 years ago

How many times has your child only heard about a dead body somewhere in the community? (do not include wakes and funerals) (circle only one)
(a) never (d) 3 or 4 times (g) at least once a month
(b) 1 time (e) 5 or 6 times (h) at least once a week
(c) 2 times (f) 7 or 8 times (i) almost every day

If you circled never, skip to question 47

Where was the dead person seen? (circle one or more)
(a) near home (c) near school (e) other
(b) in the home (d) in school

Who was the dead person? (What was the person's relationship to your child?) (circle one or more)
(a) adult stranger (d) young stranger (g) parent(s) (j) don't know
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend (f) young friend (i) other relative

Who saw the dead person? (What was the person's relationship to your child?) (circle one or more)
(a) adult stranger (d) young stranger (g) parent(s) (j) don't know
(b) adult acquaintance (e) young acquaintance (h) brother/sister
(c) adult friend (f) young friend (i) other relative

When was the last time your child heard about someone seeing a dead body? (circle only one)
(a) about a week ago (d) about 6 months ago (g) between 1 and 2 years ago
(b) about a month ago (e) about 9 months ago (h) between 3 and 5 years ago
(c) about 3 months ago (f) about a year ago (i) more than 5 years ago
47. How many times has your child actually seen someone committing suicide? (circle only one)

| (a) never | (d) 3 or 4 times | (g) at least once a month |
| (b) 1 time | (e) 5 or 6 times | (h) at least once a week |
| (c) 2 times | (f) 7 or 8 times | (i) almost every day |

If you circled never, skip to question 48

Who committed suicide? (What was the person’s relationship to your child?) (circle one or more)

| (a) adult stranger | (d) young stranger | (g) parent(s) |
| (b) adult acquaintance | (e) young acquaintance | (h) brother/sister |
| (c) adult friend | (f) young friend | (i) other relative |

Where did your child see this happen? (circle one or more)

| (a) near home | (c) near school | (e) other ________ |
| (b) in the home | (d) in school | |

When was the last time your child saw this happen? (circle only one)

| (a) about a week ago | (d) about 6 months ago | (g) between 1 and 2 years ago |
| (b) about a month ago | (e) about 9 months ago | (h) between 3 and 5 years ago |
| (c) about 3 months ago | (f) about a year ago | (i) more than 5 years ago |

48. How many times has your child only heard about someone committing suicide? (circle only one)

| (a) never | (d) 3 or 4 times | (g) at least once a month |
| (b) 1 time | (e) 5 or 6 times | (h) at least once a week |
| (c) 2 times | (f) 7 or 8 times | (i) almost every day |

If you circled never, skip to question 49

Who committed suicide? (What was the person’s relationship to your child?) (circle one or more)

| (a) parent(s) | (d) young friend | (g) adult friend |
| (b) brother/sister | (e) young acquaintance | (i) don’t know |
| (c) other relative | (f) young stranger | (d) adult acquaintance |

Where did the suicide take place? (circle one or more)

| (a) near home | (c) near school | (e) other ________ |
| (b) in the home | (d) in school | |

When was the last time your child heard about someone committing suicide? (circle only one)

| (a) about a week ago | (d) about 6 months ago | (g) between 1 and 2 years ago |
| (b) about a month ago | (e) about 9 months ago | (h) between 3 and 5 years ago |
| (c) about 3 months ago | (f) about a year ago | (i) more than 5 years ago |
49. How many times has your child actually seen someone being killed by another person? (circle only one)

(a) never  (b) 1 time  (c) 2 times
(d) 3 or 4 times  (e) 5 or 6 times  (f) 7 or 8 times
(g) at least once a month  (h) at least once a week  (i) almost every day

If you circled never, skip to question 51

Who got killed? (What was the person's relationship to your child?) (circle one or more)

(a) adult stranger  (b) adult acquaintance  (c) adult friend
(d) young stranger  (e) young acquaintance  (f) young friend
(g) parent(s)  (h) brother/sister  (i) other relative

Who did the killing? (What was the person's relationship to your child?) (circle one or more)

(a) adult stranger  (b) adult acquaintance  (c) adult friend
(d) young stranger  (e) young acquaintance  (f) young friend
(g) parent(s)  (h) brother/sister  (i) other relative

Where did your child see the killing? (circle one or more)

(a) near home  (b) in the home  (c) near school  (d) in school
(e) other

When was the last time your child saw someone being killed? (circle only one)

(a) about a week ago  (b) about a month ago  (c) about 3 months ago
(d) about 6 months ago  (e) about 9 months ago  (f) about a year ago
(g) between 1 and 2 years ago  (h) between 3 and 5 years ago  (i) more than 5 years ago

50. How many times has your child only heard about someone being killed by another person? (circle only one)

(a) never  (b) 1 time  (c) 2 times
(d) 3 or 4 times  (e) 5 or 6 times  (f) 7 or 8 times
(g) at least once a month  (h) at least once a week  (i) almost every day

If you circled never, skip to question 51

Who got killed? (What was the person's relationship to your child?) (circle one or more)

(a) adult stranger  (b) adult acquaintance  (c) adult friend
(d) young stranger  (e) young acquaintance  (f) young friend
(g) parent(s)  (h) brother/sister  (i) other relative

Who did the killing? (What was the person's relationship to your child?) (circle one or more)

(a) adult stranger  (b) adult acquaintance  (c) adult friend
(d) young stranger  (e) young acquaintance  (f) young friend
(g) parent(s)  (h) brother/sister  (i) other relative
Where did the killing take place? (circle one or more)

(a) near home    (c) near school    (e) other
(b) in the home    (d) in school

When was the last time your child heard about someone being killed? (circle only one)

(a) about a week ago    (d) about 6 months ago    (g) between 1 and 2 years ago
(b) about a month ago    (e) about 9 months ago    (h) between 3 and 5 years ago
(c) about 3 months ago    (f) about a year ago    (i) more than 5 years ago

Other Types of Violence

51. How many times has your child been in any kind of situation not already described where your child was extremely frightened or thought that he or she would get hurt very badly or die? (circle only one)

(a) never    (d) 3 or 4 times    (g) at least once a month
(b) 1 time    (e) 5 or 6 times    (h) at least once a week
(c) 2 times    (f) 7 or 8 times    (i) almost every day

If you circled never, skip to question 52

Please describe that situation in your own words:

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

Where did this happen? (circle one or more)

(a) near home    (c) near school    (e) other
(b) in the home    (d) in school

When was the last time something like this happened to your child? (circle only one)

(a) about a week ago    (d) about 6 months ago    (g) between 1 and 2 years ago
(b) about a month ago    (e) about 9 months ago    (h) between 3 and 5 years ago
(c) about 3 months ago    (f) about a year ago    (i) more than 5 years ago

All Types of Violence Combined

52. How many times has your child himself or herself actually been the victim of any type of violence such as those described in this questionnaire? (circle only one)

(a) never    (d) 3 or 4 times    (g) at least once a month
(b) 1 time    (e) 5 or 6 times    (h) at least once a week
(c) 2 times    (f) 7 or 8 times    (i) almost every day
If you circled never, skip to question 53

Who committed the violent act? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger   (d) young stranger   (g) parent(s)   (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend   (f) young friend   (i) other relative

Where did it happen? (circle one or more)

(a) near home   (c) near school   (e) other
(b) in the home   (d) in school

When was the last time this happened? (circle only one)

(a) about a week ago   (d) about 6 months ago   (g) between 1 and 2 years ago
(b) about a month ago   (e) about 9 months ago   (h) between 3 and 5 years ago
(c) about 3 months ago   (f) about a year ago   (i) more than 5 years ago

53. How many times has your child seen someone else being victimized by some form of violence such as those described in this questionnaire? (circle only one)

(a) never   (d) 3 or 4 times   (g) at least once a month
(b) 1 time   (e) 5 or 6 times   (h) at least once a week
(c) 2 times   (f) 7 or 8 times   (i) almost every day

If you circled never, skip to question 54

Who did this happen to? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger   (d) young stranger   (g) parent(s)   (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend   (f) young friend   (i) other relative

Who committed the violent act? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger   (d) young stranger   (g) parent(s)   (j) don’t know
(b) adult acquaintance  (e) young acquaintance  (h) brother/sister
(c) adult friend   (f) young friend   (i) other relative

Where did it happen? (circle one or more)

(a) near home   (c) near school   (e) other
(b) in the home   (d) in school

When was the last time your child saw this happen? (circle only one)

(a) about a week ago   (d) about 6 months ago   (g) between 1 and 2 years ago
(b) about a month ago   (e) about 9 months ago   (h) between 3 and 5 years ago
(c) about 3 months ago   (f) about a year ago   (i) more than 5 years ago

54. How many times has your child only heard about someone else being victimized by some form of violence such as those described in this questionnaire? (circle only one)

(a) never   (d) 3 or 4 times   (g) at least once a month
(b) 1 time   (e) 5 or 6 times   (h) at least once a week
(c) 2 times   (f) 7 or 8 times   (i) almost every day
Who did it happen to? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  
(b) adult acquaintance  
(c) adult friend  
(d) young stranger  
(e) young acquaintance  
(f) young friend  
(g) parent(s)  
(h) brother/sister  
(i) other relative  
(j) don’t know

Who committed the violent act? (What was the person’s relationship to your child?) (circle one or more)

(a) adult stranger  
(b) adult acquaintance  
(c) adult friend  
(d) young stranger  
(e) young acquaintance  
(f) young friend  
(g) parent(s)  
(h) brother/sister  
(i) other relative  
(j) don’t know

Where did it happen? (circle one or more)

(a) near home  
(b) in the home  
(c) near school  
(d) in school  
(e) other

When was the last time your child heard of this happening? (circle only one)

(a) about a week ago  
(b) about a month ago  
(c) about 3 months ago  
(d) about 6 months ago  
(e) about 9 months ago  
(f) about a year ago  
(g) between 1 and 2 years ago  
(h) between 3 and 5 years ago  
(i) more than 5 years ago
Traumatic Events Screening Inventory (TESI-PRR / TESI-SRR)

**Author(s):** Ippen, Ford, Racusin, Acker, Bosquet, Rogers, Ellis, Schiffman, Ribbe, Cone, Lukovitz, & Edwards  

**Year:** 2002

**Population/Age Group:** Children and adolescents aged 6 - 18; a parent report is also available for children under seven.

**Purpose:** The purpose of the TESI is to probe for a history of exposure to traumatic events and to distinguish these events from other negative life experiences.

**Description:** This 24-item scale is available as a structured clinical interview measure for children 8 and older (TESI-SRR); a parent version is available for children under 7 and can also be used with any age child (TESI-PRR). The TESI inquires about a variety of traumatic events, including current and previous injuries, hospitalizations, domestic violence, community violence, disasters, accidents, physical, and sexual abuse. Subsequent questions examine whether the event involved threat to the child’s or other’s physical integrity and whether the child’s reactions rises to the level of Criterion B of PTSD (i.e. whether the child’s emotional reaction includes extreme fear, helplessness, horror, confusion or agitation).

Each form takes 20 - 30 minutes to complete. For any event, a child’s or parent’s endorsement of the event meets Criterion A of PTSD. Both the TESI and the TESI-SPR probe for subsequent response to distinguish the traumatic events from other life events. Any event subsequently endorsed as involving an extreme emotional reaction is rated as meeting Criterion A-2 of PTSD. The overall score sums the items for responses which meet both criteria.

**Psychometrics Properties:** Research is underway to examine the psychometric properties of the TESI-PRR and TESI-SRR.

**Contact Information:** The National Center for PTSD (116-D), VA Medical & Regional Office Center, White River Junction, VT 05009, ncptsd@ncptsd.org
TRAUMATIC EVENTS SCREENING INVENTORY - PARENT REPORT REVISED

Children may experience stressful events, which may affect their health and well-being. Please indicate if your child has experienced any of these potentially stressful events by answering the shaded questions. If the answer is yes, please answer the follow-up questions. If it's no, please go to the next shaded question.

If you have any questions or comments about any of the questions, we would be happy to talk to you about them.

**SAMPLE ITEM** (instructions are in italics)

<table>
<thead>
<tr>
<th>A. Has your child ever had a doctor's visit? Mark your answer in the next column. If yes, answer the questions below.</th>
</tr>
</thead>
<tbody>
<tr>
<td>If YES</td>
</tr>
<tr>
<td>The first time:</td>
</tr>
<tr>
<td>Your child's age the first time s/he saw a doctor (even if s/he would not have remembered it).</td>
</tr>
<tr>
<td>The last time:</td>
</tr>
<tr>
<td>Your child's age during his/her most recent doctor's visit.</td>
</tr>
<tr>
<td>The most stressful:</td>
</tr>
<tr>
<td>Your child's age during the most stressful visit for your child (in your opinion).</td>
</tr>
<tr>
<td>Was your child strongly affected by one or more of these experiences? θ yes θ no θ unsure</td>
</tr>
<tr>
<td>(By strongly affected we mean: did your child seem: a) to be extremely frightened; b) to be very confused or helpless; c) to be very shocked or horrified, d) to have difficulty getting back to her or his normal way of behaving or feeling when it was over; OR e) to behave differently in important ways after it was over.)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1.1 Has your child ever been in a serious accident where someone could have been (or actually was) severely injured or died? (like a serious car or bicycle accident, a fall, a fire, an incident where s/he was burned, an actual or near-drowning, or a severe sports injury)</th>
</tr>
</thead>
<tbody>
<tr>
<td>If YES</td>
</tr>
<tr>
<td>Victim's relationship to your child:</td>
</tr>
<tr>
<td>Did anyone die? θ yes θ no θ unsure</td>
</tr>
<tr>
<td>How old was your child? The first time:</td>
</tr>
<tr>
<td>Was your child strongly affected by one or more of these experiences? θ yes θ no θ unsure</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1.2 Has your child ever seen a serious accident where someone could have been (or actually was) severely injured or died? (like a serious car or bicycle accident, a fall, a fire, an incident where s/he was burned, an actual or near-drowning, or a severe sports injury)</th>
</tr>
</thead>
<tbody>
<tr>
<td>If YES</td>
</tr>
<tr>
<td>Victim's relationship to your child:</td>
</tr>
<tr>
<td>Did anyone die? θ yes θ no θ unsure</td>
</tr>
<tr>
<td>How old was your child? The first time:</td>
</tr>
<tr>
<td>Was your child strongly affected by one or more of these experiences? θ yes θ no θ unsure</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1.3 Has your child ever been in a natural disaster where someone could have been (or actually was) severely injured or died, or where your family or people in your community lost or had to permanently leave their home (like a tornado, fire, hurricane, or earthquake)?</th>
</tr>
</thead>
<tbody>
<tr>
<td>If YES</td>
</tr>
<tr>
<td>How old was your child? The first time:</td>
</tr>
<tr>
<td>Was your child strongly affected by one or more of these experiences? θ yes θ no θ unsure</td>
</tr>
</tbody>
</table>
1.4a. Has your child ever experienced the severe illness or injury of someone close to him/her?

**IF YES:**
- What was this person's relationship to your child? ________________
- How old was your child? The first time: __________ The last time: __________ The most stressful: __________
- Was your child strongly affected by one or more of these experiences?  Yes  No  Unsure

**IF NO:**
- Yes  No  Unsure

1.4b. Has your child ever experienced the death of someone close to him/her?

**IF YES:**
- What was this person's relationship to your child? ________________
- How old was your child? The first time: __________ The last time: __________ The most stressful: __________
- Was the death(s) due to: (check all that apply)  Natural causes  Illness  Accident  Violence  Unknown
- Was your child strongly affected by one or more of these experiences?  Yes  No  Unsure

**IF NO:**
- Yes  No  Unsure

1.5. Has your child ever undergone any serious medical procedures or had a life threatening illness? Or been treated by a paramedic, seen in an emergency room, or hospitalized overnight for a medical procedure?

**IF YES:**
- Describe ________________
- How old was your child? The first time: __________ The last time: __________ The most stressful: __________
- Was your child strongly affected by one or more of these experiences?  Yes  No  Unsure

**IF NO:**
- Yes  No  Unsure

1.6. Has your child ever been separated from you or another person who your child depends on for love or security for more than a few days OR under very stressful circumstances? For example: due to foster care, immigration, war, major illness, or hospitalization.

**IF YES:**
- Who was your child separated from: ________________
- How old was your child? The first time: __________ The last time: __________ The most stressful: __________
- Was your child strongly affected by one or more of these experiences?  Yes  No  Unsure

**IF NO:**
- Yes  No  Unsure

1.7. Has someone close to your child ever attempted suicide or harmed him or herself?

**IF YES:**
- What was this person's relationship to your child? ________________
- How old was your child? The first time: __________ The last time: __________ The most stressful: __________
- Was your child strongly affected by one or more of these experiences?  Yes  No  Unsure

**IF NO:**
- Yes  No  Unsure

2.1. Has someone ever physically assaulted your child, like hitting, pushing, choking, shaking, biting, or burning? Or punished your child and caused physical injury or bruises. Or attacked your child with a gun, knife, or other weapon? (This could be done by someone in the family or by someone not in your child's family).

**IF YES:**
- What was this person's relationship to your child? ________________
- Was a weapon used?  Yes  No  Unsure
- How old was your child? The first time: __________ The last time: __________ The most stressful: __________
- Was your child strongly affected by one or more of these experiences?  Yes  No  Unsure

**IF NO:**
- Yes  No  Unsure
2.2 Has someone ever directly threatened your child with serious physical harm?

**IF YES**
- What was this person's relationship to your child?
- Did they threaten to use a weapon? **unsure**  **no**  **yes** (type)
- How old was your child? The first time: ______  The last time: ______  The most stressful: ______
- Was your child strongly affected by one or more of these experiences? **yes**  **no**  **unsure**

2.3 Has someone ever mugged or tried to steal from your child? Or has your child been present when a family member, other caregiver, or friend was mugged?

**IF YES**
- Who was mugged? (If not your child indicate the person's relationship to your child.)
- Was a weapon used? **unsure**  **no**  **yes** (type)
- How old was your child? The first time: ______  The last time: ______  The most stressful: ______
- Was your child strongly affected by one or more of these experiences? **yes**  **no**  **unsure**

2.4 Has anyone ever kidnapped your child? (Including a parent or relative) Or has anyone ever kidnapped someone close to your child?

**IF YES**
- Who was kidnapped? (If not your child indicate the person's relationship to your child.)
- What was the kidnapper's relationship to your child?
- How old was your child? The first time: ______  The last time: ______  The most stressful: ______
- Was your child strongly affected by one or more of these experiences? **yes**  **no**  **unsure**

2.5 Has your child ever been attacked by a dog or other animal?

**IF YES**
- How old was your child? The first time: ______  The last time: ______  The most stressful: ______
- Was your child seriously physically hurt as a result of the attack? **yes**  **no**  **unsure**
- Was your child strongly affected by one or more of these experiences? **yes**  **no**  **unsure**

3.1 Has your child ever seen, heard, or heard about people in your family physically fighting, hitting, slapping, kicking, or pushing each other. Or shooting with a gun or stabbing, or using any other kind of dangerous weapon?

**IF YES**
- What were these people's relationships to your child?
- Was a weapon used? **unsure**  **no**  **yes** (type)
- How old was your child? The first time: ______  The last time: ______  The most stressful: ______
- Did your child see what happened? **yes**  **no**  **unsure**
- Was your child strongly affected by one or more of these experiences? **yes**  **no**  **unsure**
### 3.2 Has your child ever seen or heard people in your family threaten to seriously harm each other?

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<tr>
<th>IF YES</th>
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<tbody>
<tr>
<td></td>
<td>What were these people's relationships to your child?</td>
<td>θ Yes  θ No  θ Unsure</td>
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<td></td>
<td>Did they threatened to use a weapon? θ unsure θ no θ yes (type)</td>
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<td>How old was your child? The first time: The last time: The most stressful:</td>
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<td>Was your child present when the threat was made? θ yes θ no θ unsure</td>
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### 3.3 Has your child ever known or seen that a family member was arrested, jailed, imprisoned, or taken away (like by police, soldiers, or other authorities)?

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<td>Was your child strongly affected by one or more of these experiences? θ yes θ no θ unsure</td>
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### 4.1 Has your child ever seen or heard people outside your family fighting, hitting, pushing, or attacking each other? Or seen or heard about violence such as beatings, shootings, or muggings that occurred in settings that are important to your child such as school, your neighborhood, or the neighborhood of someone important to your child?

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<td>What were these people's relationship to your child?</td>
<td>θ Yes  θ No  θ Unsure</td>
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<td></td>
<td>Was a weapon used? θ unsure θ no θ yes (type). Where did this happen?</td>
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<tr>
<td></td>
<td>How old was your child? The first time: The last time: The most stressful:</td>
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<td>Did your child see what happened? θ yes θ no θ unsure</td>
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<td>Was your child strongly affected by one or more of these experiences? θ yes θ no θ unsure</td>
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### 4.2 Has your child ever been directly exposed to war, armed conflict, or terrorism?

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<th>Options</th>
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</thead>
<tbody>
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</table>

### 4.3 Has your child ever seen or heard acts of war or terrorism on the television or radio?

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<th>Options</th>
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</tbody>
</table>
### TRAUMATIC EVENTS SCREENING INVENTORY-PARENT REPORT REVISED (TESI-PRR)

**5.1 Has someone ever made your child see or do something sexual (like touching in a sexual way, exposing self or masturbating in front of the child, engaging in sexual intercourse)?**

<table>
<thead>
<tr>
<th>IF YES</th>
<th>What was this person's relationship to your child?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Was physical violence used? Ø unsure Ø no Ø yes Ø unsure Ø no Ø yes (type)</td>
</tr>
<tr>
<td></td>
<td>How old was your child? The first time:____ The last time:____ The most stressful:____</td>
</tr>
<tr>
<td></td>
<td>Was your child strongly affected by one or more of these experiences? Ø yes Ø no Ø unsure</td>
</tr>
</tbody>
</table>

**5.2 Has your child ever been present when someone was being forced to engage in any sort of sexual activity?**

<table>
<thead>
<tr>
<th>IF YES</th>
<th>What were these people's relationship to your child? Victim:____________ Aggressor:____________</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Was physical violence used? Ø unsure Ø no Ø yes Ø unsure Ø no Ø yes (type)</td>
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</tr>
<tr>
<td></td>
<td>Was your child strongly affected by one or more of these experiences? Ø yes Ø no Ø unsure</td>
</tr>
</tbody>
</table>

**5.3 Has your child ever repeatedly been told s/he was no good, yelled at in a scary way, or had someone threaten to abandon, leave or send him/her away?**

<table>
<thead>
<tr>
<th>IF YES</th>
<th>What was this person's relationship to your child?</th>
</tr>
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<tbody>
<tr>
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<td></td>
<td>Was your child strongly affected by one or more of these experiences? Ø yes Ø no Ø unsure</td>
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</table>

**5.4 Has your child ever gone through a period when s/he lacked appropriate care (like not having enough to eat or drink, lacking shelter, being left alone when s/he was too young to care for herself/himself, or being left with a caregiver who was abusing drugs)?**

<table>
<thead>
<tr>
<th>IF YES</th>
<th>How old was your child? The first time:____ The last time:____ The most stressful:____</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Was your child strongly affected by one or more of these experiences? Ø yes Ø no Ø unsure</td>
</tr>
</tbody>
</table>

**7.1 Have there been other stressful things that have happened to your child?**

<table>
<thead>
<tr>
<th>IF YES</th>
<th>Briefly describe these things:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>How old was your child? The first time:____ The last time:____ The most stressful:____</td>
</tr>
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<td>Was your child strongly affected by one or more of these experiences? Ø yes Ø no Ø unsure</td>
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</tbody>
</table>
**TRAUMATIC EVENTS SCREENING INVENTORY - SELF REPORT REVISED**

People may experience stressful events, which may affect their health and well-being. Please indicate if you have experienced any of these potentially stressful events by answering the shaded questions. If the answer is yes, please answer the follow-up questions. If it's no, please go to the next shaded question.

If you have any questions or comments about any of the questions, we would be happy to talk to you about them.

<table>
<thead>
<tr>
<th>SAMPLE ITEM (instructions are in italics)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A.</strong> Have you ever had a doctor's visit? (Mark your answer in the next column. If yes answer the questions below.)</td>
</tr>
<tr>
<td>If YES ★ How old were you? The first time: ________ The last time: ________ The most stressful: ________</td>
</tr>
<tr>
<td>(For the first time, write your age at the first time you saw a doctor. For the last time, write your age at your most recent doctor's visit. For the most stressful put your age during your most stressful visit [in your opinion]).</td>
</tr>
<tr>
<td>Were you strongly affected by one or more of these experiences? □ yes □ no □ unsure</td>
</tr>
<tr>
<td>(By strongly affected we mean: did you: a) feel extremely frightened; b) feel very confused or helpless; c) feel very shocked or horrified, d) have difficulty getting back to your normal way of behaving or feel it was over, OR e) behave differently in important ways after it was over.)</td>
</tr>
</tbody>
</table>

| 1.1 Have you ever **been in** a serious accident where someone could have been (or actually was) severely injured or died? (like a serious car or bicycle accident, a fall, a fire, an incident where you were burned, an actual or near drowning or a severe sports injury) |
| If YES ★ Identify the type of accident(s): |
| How old were you? The first time: ________ The last time: ________ The most stressful: ________ |
| Were you strongly affected by one or more of these experiences? □ yes □ no □ unsure |

| 1.2 Have you ever **seen** a serious accident where someone could have been (or actually was) severely injured or died? (like a serious car or bicycle accident, a fall, a fire, an incident where someone was burned, an actual or near drowning, or a severe sports injury) |
| If YES ★ Identify the type of accident(s) & the victim's relationship to you: |
| How old were you? The first time: ________ The last time: ________ The most stressful: ________ |
| Were you strongly affected by one or more of these experiences? □ yes □ no □ unsure |

| 1.3 Have you ever been in a serious natural disaster where someone could have been (or actually was) severely injured or died? (like a tornado, hurricane, fire, or earthquake) |
| If YES ★ How old were you? The first time: ________ The last time: ________ The most stressful: ________ |
| Were you strongly affected by one or more of these experiences? □ yes □ no □ unsure |

<p>| 1.4 Have you ever experienced the severe illness or injury of someone close to you? |
| IF YES ★ What was this person's relationship to you? |
| How old were you? The first time: ________ The last time: ________ The most stressful: ________ |
| Were you strongly affected by one or more of these experiences? □ yes □ no □ unsure |</p>
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>Unsure</th>
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<tbody>
<tr>
<td>1.4c Have you ever experienced the death of someone close?</td>
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<tr>
<td>IF YES □ What was this person's relationship to you?</td>
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<tr>
<td>How old were you? The first time: _______ The last time: _______ The most stressful: _______</td>
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<tr>
<td>Was the death(s) due to: (check all that apply) □ natural causes □ illness □ accident □ violence □ unknown</td>
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<td>IF YES □ Describe ________________________________________________________</td>
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<td>IF YES □ Who were you separated from: ____________________________________</td>
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<tr>
<td>IF YES □ What was this person's relationship to you?</td>
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<td>2.1 Has someone ever physically assaulted you, like hitting, pushing, choking, shaking, biting, or burning? Or punished you and caused physical injury or bruises? Or attacked you with a gun, knife, or other weapon? (This could be done by someone in the family or by someone not in your family.)</td>
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<td>IF YES □ Who was mugged? (If not you indicate the person's relationship to you.)</td>
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<tr>
<td></td>
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3.1 Have you ever seen, heard, or heard about people in your family physically fighting, hitting, slapping, kicking, or pushing each other. Or shooting with a gun or stabbing, or using any other kind of dangerous weapon?

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<td>Were you strongly affected by one or more of these experiences?</td>
<td>yes</td>
<td>no</td>
<td>unsure</td>
</tr>
</tbody>
</table>

4.3 Have you ever seen or heard acts of war or terrorism on the television or radio?

<table>
<thead>
<tr>
<th>IF YES</th>
<th>How old were you? The first time: _______ The last time: _______ The most stressful: _______</th>
<th>Yes</th>
<th>No</th>
<th>Unsure</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Were you strongly affected by one or more of these experiences?</td>
<td>yes</td>
<td>no</td>
<td>unsure</td>
</tr>
</tbody>
</table>

5.1 Has someone ever made you see or do something sexual (like touching in a sexual way, exposing self or masturbating in front of you, engaging in sexual intercourse)?

<table>
<thead>
<tr>
<th>IF YES</th>
<th>What was this person's relationship to you?</th>
<th>Yes</th>
<th>No</th>
<th>Unsure</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>How old were you? The first time: _______ The last time: _______ The most stressful: _______</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Were you strongly affected by one or more of these experiences?</td>
<td>yes</td>
<td>no</td>
<td>unsure</td>
</tr>
</tbody>
</table>

5.2 Have you ever been present when someone was being forced to engage in any sort of sexual activity?

<table>
<thead>
<tr>
<th>IF YES</th>
<th>What were these people's relationship to you? Victim: _______ Aggressor: _______</th>
<th>Yes</th>
<th>No</th>
<th>Unsure</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>How old were you? The first time: _______ The last time: _______ The most stressful: _______</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Were you strongly affected by one or more of these experiences?</td>
<td>yes</td>
<td>no</td>
<td>unsure</td>
</tr>
</tbody>
</table>

5.1 Have you ever repeatedly been told you were no good, yelled at in a scary way, or had someone threaten to leave or send you away?

<table>
<thead>
<tr>
<th>IF YES</th>
<th>What was this person's relationship to you?</th>
<th>Yes</th>
<th>No</th>
<th>Unsure</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>How old were you? The first time: _______ The last time: _______ The most stressful: _______</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Were you strongly affected by one or more of these experiences?</td>
<td>yes</td>
<td>no</td>
<td>unsure</td>
</tr>
</tbody>
</table>

6.1 Have you ever gone through a period when you lacked appropriate care (like not having enough to eat or crnck, lacking shelter, being left alone when you were too young to care for yourself, or being left with a caregiver who was abusing drugs)?

<table>
<thead>
<tr>
<th>IF YES</th>
<th>How old were you? The first time: _______ The last time: _______ The most stressful: _______</th>
<th>Yes</th>
<th>No</th>
<th>Unsure</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Were you strongly affected by one or more of these experiences?</td>
<td>yes</td>
<td>no</td>
<td>unsure</td>
</tr>
</tbody>
</table>

7.1 Have there been other stressful things that have happened to you?

<table>
<thead>
<tr>
<th>IF YES</th>
<th>Briefly describe these things:</th>
<th>Yes</th>
<th>No</th>
<th>Unsure</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>How old were you? The first time: _______ The last time: _______ The most stressful: _______</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Were you strongly affected by one or more of these experiences?</td>
<td>yes</td>
<td>no</td>
<td>unsure</td>
</tr>
</tbody>
</table>
CUESTIONARIO DE EVENTOS TRAUMÁTICOS: INFORME DE LOS PADRES
(Traumatic Events Screening Inventory – Parent Report Revised)

Los niños pueden experimentar eventos estresantes que pueden afectar su salud y bienestar. Por favor indique si su hijo(a) ha experimentado alguna de estas situaciones que pueden ser potencialmente estresantes contestando las preguntas sombreadas. Si su respuesta es "sí", por favor conteste las preguntas que siguen. Si su respuesta es "no", por favor pase a la siguiente pregunta sombreada.

Si tiene alguna duda, inquietud o comentario acerca de alguna pregunta, será un placer hablar/platicar sobre esto con usted.

**EJEMPLO** (las instrucciones están en letras itálicas)

¿Alguna vez su hijo(a) ha tenido una consulta médica? (Si dijo "sí," marque su respuesta en la columna a la derecha y conteste las preguntas que siguen a continuación. Si su respuesta es "no" o "no estoy seguro(a)") marque su respuesta en la columna a la derecha y después pase a la siguiente pregunta sombreada).

<table>
<thead>
<tr>
<th>&quot;Sí&quot; /</th>
<th>¿Cuántos años tenía su hijo(a)?</th>
<th>La primera vez:</th>
<th>La última vez:</th>
<th>La vez más estresante:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>La edad de su hijo(a) en la primera consulta con el doctor (aun cuando su hijo(a) no lo recuerde).</td>
<td>La edad de su hijo(a) en la consulta más reciente con el doctor.</td>
<td>La edad que tenía su hijo(a) durante la consulta que fue más estresante para él/ella en su opinión).</td>
</tr>
</tbody>
</table>

¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias?  θ Sí  θ No  θ No estoy seguro(a)

(Cuando decimos "muy afectado" queremos saber si su hijo(a) parecía estar extremadamente asustado, se veía muy confundido, se sentía indefenso/vulnerable, aterrado/pasmado u horrorizado, o le costó trabajo comportarse como antes del evento, sentirse normal cuando el evento se terminó, o se comportó de forma notablemente diferente después de que el evento terminó.)

1.1 ¿ Alguna vez su hijo(a) estuvo en un accidente grave en el cual alguien pudo quedar o quedó gravemente herido o murió? (por ejemplo en un accidente de carro o bicicleta, una caída, un incendio, un suceso en el cual sufrió quemaduras, o en el que alguien se ahogó o estuvo a punto de ahogarse, o sufrió una herida grave debido a un deporte)?

<table>
<thead>
<tr>
<th>&quot;Sí&quot;</th>
<th>Describa el tipo de accidente(s):</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Relación de la víctima con su hijo(a):</td>
</tr>
<tr>
<td></td>
<td>¿Alguien murió? θ Sí θ No θ No estoy seguro(a)</td>
</tr>
<tr>
<td></td>
<td>¿Cuántos años tenía su hijo(a)? La primera vez:</td>
</tr>
<tr>
<td></td>
<td>¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias? θ Sí θ No θ No estoy seguro(a)</td>
</tr>
</tbody>
</table>

1.2 ¿ Alguna vez su hijo(a) vio un accidente grave en donde alguien pudo quedar o quedó gravemente herido o murió? (por ejemplo en un accidente de carro o bicicleta, una caída, un incendio, un suceso en el cual sufrió quemaduras, o en el que alguien se ahogó o estuvo a punto de ahogarse, o sufrió una herida grave debido a un deporte)?

<table>
<thead>
<tr>
<th>&quot;Sí&quot;</th>
<th>θ Sí θ No θ No estoy seguro(a)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pregunta</td>
<td>Respuesta OPCIÓN</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>------------------</td>
</tr>
<tr>
<td>Describa el tipo de accidente(s):</td>
<td></td>
</tr>
<tr>
<td>Relación de la víctima con su hijo(a):</td>
<td></td>
</tr>
<tr>
<td>¿Alguien murió?  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>¿Cuántos años tenía su hijo(a)? La primera vez:  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>La última vez:  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>La vez más estresante:  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias?  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>1.3 ¿Alguna vez su hijo(a) ha estado en un desastre natural serio en donde alguien pudo quedar o quedó gravemente herido o murió? (Por ejemplo en un tornado, huracán, incendio o terremoto)</td>
<td></td>
</tr>
<tr>
<td>Tipo de desastre:</td>
<td></td>
</tr>
<tr>
<td>¿Alguien murió?  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>¿Su hijo(a) conoce a personas (familia, amigos, vecinos) que se quedaron sin lugar para vivir o que se mudaron porque sus casas no eran habitables?  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>¿Cuántos años tenía su hijo(a)? La primera vez:  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>La última vez:  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>La vez más estresante:  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias?  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>1.4a. ¿Alguna vez una persona cercana a su hijo(a) ha tenido una enfermedad o lesión grave?</td>
<td></td>
</tr>
<tr>
<td>Indique la relación de esta persona con su hijo(a) (Ej. tío, maestro)</td>
<td></td>
</tr>
<tr>
<td>¿Cuántos años tenía su hijo(a)? La primera vez:  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>La última vez:  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>La vez más estresante:  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias?  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>1.4b. ¿Alguna vez su hijo(a) ha sufrido la muerte de alguien cercano a él/ella?</td>
<td></td>
</tr>
<tr>
<td>Indique la relación de esta persona con su hijo(a) (Ej. tío, maestro)</td>
<td></td>
</tr>
<tr>
<td>¿Cuántos años tenía su hijo(a)? La primera vez:  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>La última vez:  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>La vez más estresante:  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>La muerte fue debida a:  (marque todas las que apliquen) θ causas naturales θ enfermedad θ accidente θ violencia θ desconocida</td>
<td></td>
</tr>
<tr>
<td>¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias?  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>1.5 Alguna vez su hijo(a) recibió algún tratamiento médico de gravedad o ha tenido alguna enfermedad que puso su vida en peligro? o ¿Ha sido atendido en la sala de urgencias, por algún paramédico u hospitalizado por una noche o más tiempo por un problema médico?</td>
<td></td>
</tr>
<tr>
<td>Describa:</td>
<td></td>
</tr>
<tr>
<td>¿Cuántos años tenía su hijo(a)? La primera vez:  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>La última vez:  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>La vez más estresante:  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias?  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>1.6 ¿Alguna vez a su hijo(a) se le separó de usted o de otra persona de la que depende de amor o seguridad por más de unos cuantos días o bajo circunstancias muy estresantes? Por ejemplo a causa de &quot;foster care&quot;, inmigración, guerra, enfermedad grave u hospitalización.</td>
<td></td>
</tr>
<tr>
<td>De quién fue separado su hijo(a):</td>
<td></td>
</tr>
<tr>
<td>¿Cuántos años tenía su hijo(a)? La primera vez:  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>La última vez:  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>La vez más estresante:  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias?  θ sí  θ no  θ no estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>1.7 ¿Alguna vez alguien cercano a su hijo(a) ha intentado suicidarse o hacerse daño así mismo(a)?</td>
<td></td>
</tr>
</tbody>
</table>
Indique la relación de esta persona con su hijo(a) (Ej. tío, maestro) ________________________

¿Cuántos años tenía su hijo(a)? La primera vez: _____ La última vez: _____ La vez más estresante: _____

¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias? θ sí θ no θ no estoy seguro(a)
2.1 ¿Alguna vez alguien agredió físicamente a su hijo(a) tal como golpearlo, empujarlo, estrangularlo, sacudirlo, morderlo, o quemarlo? o ¿lo castigó causándole heridas o moretones? o ¿lo ha atacado con una pistola, cuchillo u otra arma? (Esto lo pudo haber hecho un familiar u otra persona.)

| **Sí** | Indique la relación de esta persona con su hijo(a) (Ej. tío, maestro) |
| **No** | **No estoy seguro(a)** |

- ¿Usaron una arma? **No estoy seguro(a)**
- **No**
- **Sí** (tipo de arma)

- ¿Cuántos años tenía su hijo(a)?
  - La primera vez: ______
  - La última vez: ______
  - La vez más estresante: ______

- ¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias? **Sí**
  - **No**
  - **No estoy seguro(a)**

2.2 ¿Alguna vez alguien amenazó directamente a su hijo(a) con herirlo gravemente?

| **Sí** | Indique la relación de esta persona con su hijo(a) (Ej. tío, maestro) |
| **No** | **No estoy seguro(a)** |

- ¿La amenaza involucraba un arma? **No estoy seguro(a)**
- **No**
- **Sí** (tipo de arma)

- ¿Cuántos años tenía su hijo(a)?
  - La primera vez: ______
  - La última vez: ______
  - La vez más estresante: ______

- ¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias? **Sí**
  - **No**
  - **No estoy seguro(a)**

2.3 ¿Alguna vez su hijo(a) ha sido asaltado? o ¿Estuvo presente cuando un miembro de la familia, otra persona encargada de su cuidado, o un amigo fue asaltado?

| **Sí** | ¿Quién fue asaltado? (Si no fue su hijo(a), indique la relación de la persona con su hijo(a) [Ej., tío, madre]) |
| **No** | **No estoy seguro(a)** |

- ¿Usaron una arma? **No estoy seguro(a)**
- **No**
- **Sí** (tipo de arma)

- ¿Cuántos años tenía su hijo(a)?
  - La primera vez: ______
  - La última vez: ______
  - La vez más estresante: ______

- ¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias? **Sí**
  - **No**
  - **No estoy seguro(a)**

2.4 ¿Alguna vez alguien ha raptado/secuestrado a su hijo(a)? (Incluyendo sus padres o parientes) o ¿A alguna persona cercana a él/ella?

| **Sí** | ¿Quién fue raptado/secuestrado? (Si no fue su hijo(a), indique la relación de esta persona con su hijo(a) [Ej., mi hijo, amigo]) |
| **No** | **No estoy seguro(a)** |

- Indique la relación del secuestrador con su hijo(a) (Ej. persona desconocida)

- ¿Cuántos años tenía su hijo(a)?
  - La primera vez: ______
  - La última vez: ______
  - La vez más estresante: ______

- ¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias? **Sí**
  - **No**
  - **No estoy seguro(a)**

2.5 ¿Alguna vez su hijo(a) ha sido atacado por un perro o algún otro animal?

| **Sí** | ¿Cuántos años tenía su hijo(a)?
  - La primera vez: ______
  - La última vez: ______
  - La vez más estresante: ______

- ¿Su hijo fue herido gravemente como resultado del ataque? **Sí**
  - **No**
  - **No estoy seguro(a)**

- ¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias? **Sí**
  - **No**
  - **No estoy seguro(a)**

3.1 ¿Alguna vez su hijo(a) vio o escuchó a familiares pelearse físicamente, golpearse, bofetarse, patearse o empujarse? o ¿dispararse con una pistola, apuñalarse con un cuchillo, o usando cualquier otro tipo de arma peligrosa?
3.2 ¿Alguna vez su hijo(a) vió o escuchó a familiares amenazándose con hacerse daño seriamente?

*Sí* | Indique la relación de esta persona con su hijo(a) (Ej. tío, padre) 
| ¿La amenaza involucraba un arma? | θ no estoy seguro(a) | θ no | θ sí (tipo de arma) 
| ¿Cuántos años tenía su hijo(a)? La primera vez: | La última vez: | La vez más estresante: 
| ¿Su hijo(a) estaba presente cuando se amenazaron? | θ sí | θ no | θ no estoy seguro(a) 
| ¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias? | θ sí | θ no | θ no estoy seguro(a) 

3.3 ¿Alguna vez su hijo(a) ha sabido de o visto que algún miembro de la familia ha sido arrestado, encarcelado, apresado, o llevado (por ejemplo por la policía, soldados u otras autoridades)?

*Sí* | Indique la relación de esta persona con su hijo(a) (Ej. tío, primo) 
| ¿Cuántos años tenía su hijo(a)? La primera vez: | La última vez: | La vez más estresante: 
| ¿Su hijo(a) estaba presente cuando la policía llegó? | θ sí | θ no | θ no estoy seguro(a) 
| ¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias? | θ sí | θ no | θ no estoy seguro(a) 

4.1 ¿Alguna vez su hijo(a) ha visto u oído a personas fuera de la familia pelearse, golpearse, empujarse o atacarse el uno al otro? o ¿Ha visto u oído de violencia tal como palizas, disparos, o asaltos que hayan ocurrido en lugares importantes para su hijo(a), como en su escuela, su vecindario/barrio o el vecindario de una persona importante en la vida de su hijo(a)?

*Sí* | Indique la relación de estas personas con su hijo(a) 
| ¿Usaron un arma? | θ no estoy seguro(a) | θ no | θ sí (tipo de arma) 
| ¿Cuántos años tenía su hijo(a)? La primera vez: | La última vez: | La vez más estresante: 
| ¿Su hijo(a) vio lo que pasó? | θ sí | θ no | θ no estoy seguro(a) 
| ¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias? | θ sí | θ no | θ no estoy seguro(a) 

4.2 ¿Alguna vez su hijo(a) ha estado directamente expuesto a una guerra, conflicto armado o terrorismo?

*Sí* | ¿Cuántos años tenía su hijo(a)? La primera vez: | La última vez: | La vez más estresante: 
| ¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias? | θ sí | θ no | θ no estoy seguro(a) 

4.3 ¿Alguna vez su hijo(a) ha visto o escuchado sobre guerras o terrorismo en la televisión o el radio?

*Sí* | ¿Cuántos años tenía su hijo(a)? La primera vez: | La última vez: | La vez más estresante: 
| ¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias? | θ sí | θ no | θ no estoy seguro(a) 

5.1 ¿Alguna vez alguien ha hecho que su hijo(a) vea o haga alguna actividad sexual (por ejemplo tocarlo de manera sexual, exhibirse sexualmente, masturbarse enfrente de él/ella o tener relaciones sexuales)
<table>
<thead>
<tr>
<th>&quot;Sí&quot;</th>
<th>Indique la relación de estas persona con su hijo(a) (Ej. tío, padre)</th>
<th>(\theta) No</th>
<th>(\theta) No estoy seguro(a)</th>
</tr>
</thead>
<tbody>
<tr>
<td>¿Usaron un arma?: (\theta) no estoy seguro(a) (\theta) no (\theta) sí (tipo de arma)</td>
<td>(\theta) No</td>
<td>(\theta) No estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>¿Cuántos años tenía su hijo(a)? La primera vez: (_) La última vez: (_) La vez más estresante: (_)</td>
<td>(\theta) No</td>
<td>(\theta) No estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>¿Su hijo(a) vio lo que pasó? (\theta) sí (\theta) no (\theta) no estoy seguro(a)</td>
<td>(\theta) No</td>
<td>(\theta) No estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias? (\theta) sí (\theta) no (\theta) no estoy seguro(a)</td>
<td>(\theta) No</td>
<td>(\theta) No estoy seguro(a)</td>
<td></td>
</tr>
<tr>
<td>&quot;Sí&quot;</td>
<td>Indique la relación de esta persona con su hijo(a) (Ej. tío, maestro).</td>
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<td>¿Usaron violencia física? θ no estoy seguro(a) θ no θ sí</td>
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<td>¿Usaron un arma? θ no estoy seguro(a) θ no θ sí (tipo de arma)</td>
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<td>¿Cuántos años tenía su hijo(a)? La primera vez: θ θ θ θ La última vez: θ θ θ θ La vez más estresante: θ θ θ θ</td>
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<td>¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias? θ sí θ no θ no estoy seguro(a)</td>
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</table>
5.2 ¿Algún vez su hijo(a) estuvo presente cuando alguien fue forzado(a) a tener cualquier tipo de actividad sexual?

**SI**
- ¿Indique la relación de estas personas con su hijo(a)? Víctima:_________ Agresor:_________
- ¿Usaron violencia física? θ no estoy seguro(a) θ no θ sí
- ¿Usaron un arma? θ no estoy seguro(a) θ no θ sí (tipo de arma)_________
- ¿Cuántos años tenía su hijo(a)? La primera vez:________ La última vez:________ La vez más estresante:_______
- ¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias? θ sí θ no θ no estoy seguro(a)

6.1 ¿Algún vez le han dicho a su hijo(a) repetidamente que no es un niño bueno, o ha recibido gritos que lo han asustado o amenazas de que van a abandonarlo, dejarlo o mandarlo lejos?

**SI**
- Indique la relación de esta persona con su hijo(a) (Ej. tío, maestro)_________
- ¿Cuántos años tenía su hijo(a)? La primera vez:________ La última vez:________ La vez más estresante:_______
- ¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias? θ sí θ no θ no estoy seguro(a)

6.2 ¿Algún vez su hijo ha vivido algún periodo en el que no tuvo un cuidado apropiado, es decir fue descuidado (por ejemplo no tuvo lo suficiente para comer o beber, le faltó un lugar donde vivir, tuvo que quedarse solo cuando él/ella era demasiado pequeño(a) para cuidar de sí mismo o estuvo al cuidado de alguna persona que usaba drogas? 

**SI**
- ¿Cuántos años tenía su hijo(a)? La primera vez :________ La última vez:________ La vez más estresante:_______
- ¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias? θ sí θ no θ no estoy seguro(a)

7.1 ¿A su hijo(a) le han pasado otras cosas estresantes?

**SI**
- Describa brevemente estas situaciones:

  - ¿Cuántos años tenía su hijo(a)? La primera vez:________ La última vez:________ La vez más estresante:_______
  - ¿Su hijo(a) fue muy afectado(a) por una o más de estas experiencias? θ sí θ no θ no estoy seguro(a)
Adolescent Dissociative Experience Scale (A-DES)

Author(s): Armonstrong, Putnam & Carlson  
Year: 1990

Population/Age Group: Adolescents 12 – 18.

Purpose: To screen for normal and pathological dissociative experiences in adolescents.

Description: This is a 30 item self-report measure. Designed particularly to aid in diagnosis of pathological dissociation in clinical samples, test items are at a reading grade level of 5.7 years. Statements are worked to reflect experiences and coping skills and the respondent uses an 11-point rating system (0 = never to 10 = always) to respond. A total score as well as scores on four subscales can be used. The four subscales are: 1) dissociative amnesia, 2) absorption and imaginative involvement, 3) passive influence, and 4) depersonalization and derealization.

Psychometrics Properties: Reliability and validity have been studies with both a normal sample of adolescents and a clinical sample. Scale and sub-scale reliability were very good (Cronbach’s alpha reported at .93 for full scale and subscales ranged from .72 to .85), increased scores were associated with a history of trauma, and the instrument was able to distinguish normal adolescents from those with a variety of diagnoses.

Contact Information: Judith Armstrong, 501 Santa Monica Blvd., Suite 402, Santa Monica, CA 90401, jarmstrong@mizar.usc.edu
Adolescent Dissociative Experiences Scale-II (A-DES)

Judith Armstrong, PhD
Eve Bernstein Carlson, PhD
Frank Putnam, MD

DIRECTIONS

These questions ask about different kinds of experiences that happen to people. For each question, circle the number that tells how much that experience happens to you. Circle a "0" if it never happens to you, circle a "10" if it is always happening to you. If it happens sometimes but not all of the time, circle a number between 1 and 9 that best describes how often it happens to you. When you answer, only tell how much these things happen when you HAVE NOT had any alcohol or drugs.

EXAMPLE:

0 1 2 3 4 5 6 7 8 9 10
(never) (always)
1. I get so wrapped up in watching TV, reading, or playing a video game that I don't have any idea what's going on around me.

   0 1 2 3 4 5 6 7 8 9 10
   (never) (always)

2. I get back tests or homework that I don't remember doing.

   0 1 2 3 4 5 6 7 8 9 10
   (never) (always)

3. I have strong feelings that don't seem like they are mine.

   0 1 2 3 4 5 6 7 8 9 10
   (never) (always)

4. I can do something really well one time and then I can't do it at all another time.

   0 1 2 3 4 5 6 7 8 9 10
   (never) (always)

5. People tell me I do or say things that I don't remember doing or saying.

   0 1 2 3 4 5 6 7 8 9 10
   (never) (always)

6. I feel like I am in a fog or spaced out and things around me seem unreal.

   0 1 2 3 4 5 6 7 8 9 10
   (never) (always)

7. I get confused about whether I have done something or only thought about doing it.

   0 1 2 3 4 5 6 7 8 9 10
   (never) (always)

8. I look at the clock and realize that time has gone by and I can't remember what has happened.

   0 1 2 3 4 5 6 7 8 9 10
   (never) (always)

9. I hear voices in my head that are not mine.

   0 1 2 3 4 5 6 7 8 9 10
10. When I am somewhere that I don't want to be, I can go away in my mind.

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(always)

11. I am so good at lying and acting that I believe it myself.

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(always)

12. I catch myself "waking up" in the middle of doing something.

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(always)

13. I don't recognize myself in the mirror.

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(always)

14. I find myself going somewhere or doing something and I don't know why.

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(always)

15. I find myself someplace and I don't remember how I got there.

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(always)

16. I have thoughts that don't really seem to belong to me.

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(always)

17. I find that I can make physical pain go away.

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(always)

18. I can't figure out if things really happened or if I only dreamed or thought about them.

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(always)

19. I find myself doing something that I know is wrong, even when I really don't want to do it.
20. People tell me that I sometimes act so differently that I seem like a different person.

21. It feels like there are walls inside of my mind.

22. I find writings, drawings or letters that I must have done but I can't remember doing.

23. Something inside of me seems to make me do things that I don't want to do.

24. I find that I can't tell whether I am just remembering something or if it is actually happening to me.

25. I find myself standing outside of my body, watching myself as if I were another person.

26. My relationships with my family and friends change suddenly and I don't know why.

27. I feel like my past is a puzzle and some of the pieces are missing.

28. I get so wrapped up in my toys or stuffed animals that they seem alive.
29. I feel like there are different people inside of me.

0   1   2   3   4   5   6   7   8   9   10
(never) (always)

30. My body feels as if it doesn't belong to me.

0   1   2   3   4   5   6   7   8   9   10
(never) (always)
**Adolescent Psychiatric Assessment (CAPA-C, CAPA -P)**

**Author(s):** Angold, Cox, Prendergast, Rutter, & Simonoff  
**Year:** 1995

**Population/Age Group:** 9 to 17 years of age.

**Purpose:** To obtain information on the onset dates, duration, frequency, intensity, and co-morbidity of symptoms for psychiatric diagnoses adhering to criteria of the DSM-IV, DSM-III-R, or ICD-10.

**Description:** The Child and Adolescent Psychiatric Assessment-Child Version (CAPA-C) is a comprehensive interviewer-based structured diagnostic interview focusing on the three months preceding the interview. A parent interview is available, Child and Adolescent Psychiatric Assessment-Parent Version (CAPA-P).

The measure is divided into modules. An hour and half is needed to complete the entire interview. Formal training is required to administer the CAPA, and a one-day training is needed for the Life Event/PTSD module. The Life Events/Posttraumatic Stress module collects data regarding risk that may result in psychopathology. Date of onset, severity, and frequency are assessed, and from symptom onset data distinctions between PTSD acute, chronic, and delayed are made (Costello, March & Fairbank, 1998). Approximately an hour is needed to complete the interview; add an additional 30 minutes for scoring.

The Preschool Age Psychiatric Assessment (PAPA) is a structured interview for children aged 2 through 5 which was derived from the CAPA. The parent reports the child’s symptoms and impairments. Several modules comprise the PAPA, including a Life Events and PTSD module. To date, no psychometric properties have been investigated for the PAPA. (Egger, Ascher & Angold, 1999).

**Psychometrics Properties:** For the Life Events/Posttraumatic Stress module fair to excellent reliability were found. Reliability of the PTSD symptoms was fair to excellent (kappa = 0.40-0.79). The measure was able to discriminate between a clinical sample and community sample. Compared with a general population sample (N = 1015) the clinically-referred subjects and their parents were twice as likely to report a traumatic event and up to 25 times as likely to report symptoms of PTSD. Intraclass correlations were 0.72 (child) and 0.83 (parent) for high magnitude events, and 0.62 (child) and 0.58 (parent) for low magnitude events. (Costello ; Angold ; March ; Fairbank, 1998; Saigh & Yasik, no date)

**Contact Information:** Jane Duncan, Developmental Epidemiology Program, Duke University Medical Center, DUMC Box 3454, Durham, NC 27710, 919-687-4686, jduncan@psych.mc.duke.edu
Child Dissociative Checklist (CDC)

**Author(s):** Putnam  
**Year:** 1990

**Population/Age Group:** Parent or caregiver of a 5 to 12 year old child.

**Purpose:** To screen children for dissociate symptoms.

**Description:** The Child Dissociative Checklist (CDC) (Putnam, Helmer, & Trickett, 1993) is a 20-item parent/adult-observer report of dissociative behaviors. The adult should be familiar with the child across a various contexts (Putnam & Peterson, 1994). The measure is not a diagnostic tool. A child self-report measure has been developed, but psychometric properties have not been evaluated (Ohan, Myers, &Collett, 2002).

Approximately five minutes are needed to complete the measure. A 3-point response format of 0 (not true) to 2 (very true) is summed to yield a total score. A score of 12 or higher is considered abnormal. Six domains of dissociation are assessed: Dissociative Amnesia, Rapid Shifts in Demeanor and Abilities, Spontaneous Trance States, Hallucinations, Identity Alterations, and Aggression or Sexualized Behaviors. No training is required to administer the measure (Feindler, Rathus, & Silver, 2003). A reworded version of the CDC has been with children as a self-report measure.

**Psychometrics Properties:** Several studies have established the psychometric properties with non-clinical and clinical samples. Moderate test-retest reliability at 2 to 4 weeks and 1 year, and moderate to good internal reliability were found (Putnam & Peterson, 1994). The measure has discriminated between children who were maltreated, children with dissociation from psychiatrically healthy children. Low to moderate validity was found with other child dissociation scales. Age, gender, and parental role difference were found. Younger children and girls had higher symptoms than boys and older children, and mother’s rate boys higher than girls. (Ohan, Myers &Collett, 2002).

**Contact Information:** Frank W. Putnam, Cincinnati Children’s Hospital Medical Center, 513-636-7001, frank.putnam@chmcc.org
Child Dissociative Checklist (CDC), Version 3
Frank W. Putnam, MD

Date: ___________ Age: _____ Sex: M F Identification: ___________

Below is a list of behaviors that describe children. For each item that describes your child NOW or WITHIN THE PAST 12 MONTHS, please circle 2 if the item is VERY TRUE of your child. Circle 1 if the item is SOMewhat OR SOMETIMES TRUE of your child. If the item is NOT TRUE of your child, circle 0.

0 1 2 1. Child does not remember or denies traumatic or painful experiences that are known to have occurred.

0 1 2 2. Child goes into a daze or trance-like state at times or often appears "spaced-out." Teachers may report that he or she "daydreams" frequently in school.

0 1 2 3. Child shows rapid changes in personality. He or she may go from being shy to being outgoing, from feminine to masculine, from timid to aggressive.

0 1 2 4. Child is unusually forgetful or confused about things that he or she should know, e.g. may forget the names of friends, teachers or other important people, loses possessions or gets easily lost.

0 1 2 5. Child has a very poor sense of time. He or she loses track of time, may think that it is morning when it is actually afternoon, gets confused about what day it is, or becomes confused about when something has happened.

0 1 2 6. Child shows marked day-to-day or even hour-to-hour variations in his or her skills, knowledge, food preferences, athletic abilities, e.g. changes in handwriting, memory for previously learned information such as multiplication tables, spelling, use of tools or artistic ability.

0 1 2 7. Child shows rapid regressions in age-level behavior, e.g. a twelve-year-old starts to use baby-talk sucks thumb or draws like a four-year old.

0 1 2 8. Child has a difficult time learning from experience, e.g. explanations, normal discipline or punishment do not change his or her behavior.

0 1 2 9. Child continues to lie or deny misbehavior even when the evidence is obvious.

0 1 2 10. Child refers to himself or herself in the third person (e.g. as she or her)
when talking about self, or at times insists on being called by a different name. He or she may also claim that things that he or she did actually happened to another person.

11. Child has rapidly changing physical complaints such as headache or upset stomach. For example, he or she may complain of a headache one minute and seem to forget about it the next.

12. Child is unusually sexually precocious and may attempt age-inappropriate sexual behaviour with other children or adults.

13. Child suffers from unexplained injuries or may even deliberately injure self at times.

14. Child reports hearing voices that talk to him or her. The voices may be friendly or angry and may come form "imaginary companions" or sound like the voices of parents, friends or teachers.

15. Child has a vivid imaginary companion or companions. Child may insist that the imaginary companion(s) is responsible for things that he or she has done.

16. Child has intense outbursts of anger, often without apparent cause and may display unusual physical strength during these episodes.

17. Child sleepwalks frequently.

18. Child has unusual nighttime experiences, e.g. may report seeing "ghosts" or that things happen at night that he or she can't account for (e.g. broken toys, unexplained injuries).

19. Child frequently talks to him or herself, may use a different voice or argue with self at times.

20. Child has two or more distinct and separate personalities that take control over the child's behavior.
Child PTSD Symptom Scale (CPSS)

**Author(s):** Foa, Johnson, Feeney, Treadwell  
**Year:** 2001

**Population/Age Group:** Children between the ages of 8 and 18.

**Purpose:** To probe for DSM-IV PTSD symptoms in children.

**Description:** The CPSS (Foa, Johnson, Feeney & Treadwell, 2001) is the child version of Posttraumatic Diagnostic Scale (PTSD) developed by Foa, et al. (1997) for adults. The self-report measure assesses the frequency of all PTSD symptoms within the past month for a child who has experienced a traumatic event. There is one question for each of the DMS-IV PTSD symptoms in the three criteria clusters (re-experiencing, avoidance, and arousal). The measure has been translated into several languages for research in the United States: Spanish, Korean, Russian, and Armenian.

The measure can be administered individually or in a group format, and approximately 15 minutes are needed to complete the measure. The response format is a 4-point Likert scale and results in a total PTSD symptom severity score; severity scores for each of three symptom clusters can be calculated. The items can be scored dichotomously to yield a diagnosis.

An additional seven items were included after the PTSD symptoms to gauge impaired functioning. The response format for these seven questions is dichotomous (present or not present), yielding a score range from 0 to 7.

**Psychometrics Properties:** Preliminary psychometric properties were established with seventy-five school-aged children in California who experienced an earthquake. Preliminary findings demonstrated high internal consistency. For the total scale, good internal and test-retest reliability were found, and for subscales moderate to good internal and test-retest reliability. Good convergent validity was found with other PTSD measures. (Foa, Johnson, Feeny & Treadwell, 2001). In a later study (Jaycox, 2002) the measure was used with Spanish, Korean, Russian, and Armenian Speaking immigrant children. A strong correlation between exposure to violence and PTSD symptoms were found.

**Contact Information:** Edna Foa, Center for the Treatment and Study of Anxiety, University of Pennsylvania School of Medicine, Department of Psychiatry, 3535 Market Street, Sixth Floor, Philadelphia, PA 10104, foa@mail.med.upenn.edu
The Child PTSD Symptom Scale (CPSS) – Part 1

Below is a list of problems that kids sometimes have after experiencing an upsetting event. Read each one carefully and circle the number (0-3) that best describes how often that problem has bothered you IN THE LAST 2 WEEKS.

Please write down your most distressing event:

Length of time since the event:

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<td>Not at all or only at one time</td>
<td>Once a week or less/ once in a while</td>
<td>2 to 4 times a week/ half the time</td>
<td>5 or more times a week/ almost always</td>
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<tr>
<td>1</td>
<td>0 1 2 3</td>
<td>Having upsetting thoughts images about the event that came into your head when you didn’t want them to</td>
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<td>2</td>
<td>0 1 2 3</td>
<td>Having bad dreams or nightmares</td>
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<td>3</td>
<td>0 1 2 3</td>
<td>Acting or feeling as if the event was happening again (hearing something or seeing a picture about it and feeling as if I am there again)</td>
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<td>4</td>
<td>0 1 2 3</td>
<td>Feeling upset when you think about it or hear about the event (for example, feeling scared, angry, sad, guilty, etc)</td>
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<td>5</td>
<td>0 1 2 3</td>
<td>Having feelings in your body when you think about or hear about the event (for example, breaking out into a sweat, heart beating fast)</td>
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<td>6</td>
<td>0 1 2 3</td>
<td>Trying not to think about, talk about, or have feelings about the event</td>
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<td>7</td>
<td>0 1 2 3</td>
<td>Trying to avoid activities, people, or places that remind you of the traumatic event</td>
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<td>8</td>
<td>0 1 2 3</td>
<td>Not being able to remember an important part of the upsetting event</td>
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<td>9</td>
<td>0 1 2 3</td>
<td>Having much less interest or doing things you used to do</td>
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<td>10</td>
<td>0 1 2 3</td>
<td>Not feeling close to people around you</td>
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<td>11</td>
<td>0 1 2 3</td>
<td>Not being able to have strong feelings (for example, being unable to cry or unable to feel happy)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>---</td>
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<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>12. Feeling as if your future plans or hopes will not come true (for example, you will not have a job or getting married or having kids)</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>13. Having trouble falling or staying asleep</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>14. Feeling irritable or having fits of anger</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>15. Having trouble concentrating (for example, losing track of a story on the television, forgetting what you read, not paying attention in class)</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>16. Being overly careful (for example, checking to see who is around you and what is around you)</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>17. Being jumpy or easily startled (for example, when someone walks up behind you)</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

**The Child PTSD Symptom Scale (CPSS) – Part 2**

Indicate below if the problems you rated in Part 1 have gotten in the way with any of the following areas of your life DURING THE PAST 2 WEEKS.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>18. Doing your prayers</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>19. Chores and duties at home</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>20. Relationships with friends</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>21. Fun and hobby activities</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>22. Schoolwork</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>23. Relationships with your family</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>24. General happiness with your life</td>
<td>Y</td>
<td>N</td>
</tr>
</tbody>
</table>

Author(s): Greenwald & Rubin  
Year: 1999

Population/Age Group: Children 6 through 18.

Purpose: The Child Report of Post-traumatic Symptoms (CROPS) and Parent Report of Posttraumatic Symptoms (PROPS) (Greenwald & Rubin, 1999) screen for posttraumatic symptoms in children who do or do not have an identified traumatic event (Greenwald & Rubin, 1999). CROPS and PROPS were developed jointly to specifically address the issue that children are good reporters of their internal feelings, and parents, conversely, are good reporters of a child’s behavior (Greenwald & Rubin, 1999).

Description: The CROPS is a 25-item child self-report measure of posttraumatic symptoms for the previous seven days. Younger children need the measure read to them. The PROPS is 30-item self-report instrument designed to measure the parent’s report of the child’s posttraumatic symptoms for the previous seven days. Both instruments can be administered either by paper-and-pencil or verbally (in an interview format or via telephone). Approximately 5 minutes are needed to complete each measure. If the PROPS is administered at multiple time periods, the respondent must be the same individual at each administration.

The response format for both measures is a 3-point Likert scale (0=None, 1=Some, 2=Lots). The scoring of measure takes approximately one minute. The total score is calculated by adding all the responses. Higher scores reflect more posttraumatic stress symptoms. Cutoff scores have been developed to indicate clinical concern (Soberman, Greenwald, & Rule, 2002).

Psychometrics Properties: The measures were validated for use with children in 3rd through 8th grade (ages 8 through 15). To date five studies (Greenwald, Rubin, Jurkovic, Wiedemann, Russell, O’Connor, Sarac, Morrell & Weishaar, 2002) have explored the psychometric properties of the test. Excellent internal consistency was found for both measures in the United States, Bosnia, Germany, and Scotland. Similar internal consistency was found for the CROPS with juveniles incarcerated at detention facilities in New York. (Greenwald, Rubin, Jurkovic, Wiedemann, Russell, O’Connor, Sarac, Morrell & Weishaar, 2002) Good concurrent validity between the both the CROPS and the PROPS and the Lifetime Incidence of Traumatic Events Scales were found (Greenwald & Rubin, 1999).

Contact Information: Sidran Institute, 200 East Joppa Rd., Suite 207, Baltimore, MD 21286, 888-825-8249, sidran.org
Child Reaction to Traumatic Events Scale (CRTES)

**Author(s):** Jones  
**Year:** 1994

**Population/Age Group:** Children 8 to 12 years of age.

**Purpose:** To measure the impact of traumatic events, limited to intrusive thoughts and affects and avoidance behaviors in young children.

**Description:** The Impact of Events Scale (IES-8), designed to capture symptoms of avoidance and intrusion in adults, was revised in 1994 and renamed the Child’s Reaction to Traumatic Events Scale (CRTES) (Nader, 1997). A total of 15 items comprise the parent self-report measure: six from the original IES and nine new items. Utilizing a 4-point scale, symptom intensity and duration are assessed for the past seven days. The measure can be completed in five to ten minutes; add five minutes for scoring.

**Psychometrics Properties:** A study of 71 African-American children in high crime, low-income area yielded an acceptable Cronbach’s alpha for the total scale. However, low Cronbach’s alphas were found for Intrusion and Avoidance (Cunningham, et al, 1994). In a second study with 213 elementary and middle-school children in Florida exposed to Hurricane Andrew, the avoidance scale revealed no significant difference between the clinical and non-clinical samples. The researchers attribute the finding to remainder were rampant and pervasiveness in the environment (Nader, 1997).

**Contact Information:** Russell Jones, Department of Clinical Psychology, Stress and Coping Lab, Virginia Polytechnic University, 4102 Derring Hall, Blacksburg, VA 24601-0436, rtjones@vt.edu
Child's Reaction to Traumatic Events Scales – Revised (CRTES-R)

Name: ___________________________ Date: ___________________________

Recently you experienced ___________________________

Below is a list of comments made by people after stressful life events. Please check each item, indicating how often these comments were true for you **DURING THE PAST SEVEN DAYS**. If they did not occur during that time, please mark the “Not at all” column.

<table>
<thead>
<tr>
<th></th>
<th>Not at all</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Often</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I thought about it when I didn't mean to.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. I stopped letting myself get upset when I thought about it or was reminded of it.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. I tried not to remember.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. I had trouble falling asleep or staying asleep because pictures or thoughts about it came into my mind.</td>
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<td></td>
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<tr>
<td>5. I had strong feelings about it.</td>
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<tr>
<td>6. I had dreams about it.</td>
<td></td>
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</tr>
<tr>
<td>7. I stayed away from things that reminded me of it.</td>
<td></td>
<td></td>
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<tr>
<td>8. I felt that it did not happen or that is was make-believe.</td>
<td></td>
<td></td>
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<tr>
<td>9. I tried not to talk about it.</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>10. I kept seeing it over and over in my mind.</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>11. Other things kept making me think about it.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. I had lots of feelings about it, but I didn't pay attention to them.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. I tried not to think about it.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Any reminder brought back feelings about it.</td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>15. I don't have feelings about it anymore.</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>16. It was easy to make me angry and upset.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17. Loud noises made me jump in surprise.</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>18. I would act like it was happening all over again.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. I had trouble keeping my mind on what I was doing.</td>
<td></td>
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<td></td>
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<tr>
<td>20. Thinking about it made my heart beat faster.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21. Thinking about it made it hard for me to breathe.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22. Thinking about it made me sweat.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23. I kept checking to make sure nothing else bad would happen.</td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>
CHILDS REACTION TO TRAUMATIC EVENTS SCALE- REVISED (CRTES-R)

ESCALA INFANTIL REVISADA DE REACCION ANTE EVENTOS STRAUMATICOS (CRETES-R)

Nombre ___________________________________________ Fecha __________

Recientemente usted vivió _________________________________________

Abajo hay una lista de comentarios que hacen las personas a situaciones tensas del vivir. Por favor marque cada ítem indicando cuan frecuentemente estos es verdad para usted DURANTE LOS ULTIMOS SIETE DIAS. Si no han ocurrido este ultimo tiempo. Por favor marque la columna NADA.

1. Pensé acerca de eso, aun cuando no tuve la intención.

<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>

2. Dejé de molestarte cuando pensé en ello o me recordé de ello.

<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>

3. Trató de no recordar.

<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>

4. Tuve dificultad en dormirme o en seguir dirimiendo porque me vinieron recordos o imágenes a la mente.
<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>

5. Tuve intensos sentimientos acerca de eso.

<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>

6. Tuve sueños acerca de eso.

<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>

7. Me mantuve alejado de cosas que me recordaban de eso.

<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>

8. Sentí que no eso ocurrió o que era simple imaginación.

<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>

9. Trató de no hablar de eso.

<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>

10. Aparecía en mi mente, una y otra vez

<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>
11. Otras cosas me hacían pensar en eso.

<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>

12. Tuve muchos sentimientos acerca de eso, pero no les presté atención.

<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>

13. Trate de no pensar en ello.

<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>

14. Cualquier recuerdo me traía sentimientos de eso.

<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>

15. Ya no siento nada acerca de eso.

<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>
16. Era fácil alterarme o sentirme enojado por eso

<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>

17. Los ruidos fuertes me hacían saltar.

<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>

18. Yo actuaría como si eso estuviera ocurriendo nuevamente.

<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>

19. Tuve dificultad en mantener mi mente atenta en lo que estaba haciendo.

<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>

20. Pensar en eso hacía que mi corazón latiera fuerte.

<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>

21. Pensar en ello me dificultaba respirar normalmente.
<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>

22. Pensar en ello me hacía transpirar.

<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>

23. Me mantenía vigilante y alerta para asegurar que nada malo iba a ocurrir.

<table>
<thead>
<tr>
<th>Nada</th>
<th>Rara vez</th>
<th>A veces</th>
<th>Muy seguido</th>
</tr>
</thead>
</table>

Revision of distress levels for the Child’s Reactions to Traumatic Events Scale (CRTES-R)

JONES, R.T., FLETCHER, K., & RIBBE, D.R. (2002)

In their thoughtful paper entitled: “Limitations of Diagnostic Criteria and Assessment Instruments for Mental Disorders”, Regier et al. (1998), highlight several concerns regarding issues related to the prevalence rates of some disorders. In light of the high prevalence estimates of specific syndromes in the 2-wave ECA data (Regier, et. al, 1993), the following quote was rendered: “Although diagnostic criteria are the framework for any clinical or epidemiological assessment, no assessment of clinical status is independent of the reliability and validity of the methods used to determine the presence of a diagnosis...” (p.114). These authors went on further to state that “If we are to have a cumulative scientific base in this field, we need to address the problem by standardizing our assessment methods beyond what has been accomplished to date (p.114).

Consistent with this thinking, we have attempted to enhance the quality of our scale entitled: the Child’s Reactions to Traumatic Events Scale. To facilitate the comparability of findings across studies, we have objectively determined the sensitivity and specificity of this scale in determining PTSD diagnosis. Also, we are in the process of revising the criteria for determining distress levels.

Our previous criteria were adopted from the criteria employed by Steinglass and Gerrity (1990). This criteria spelled out by Horowitz (1982) employed the following scale:
Not at all (0); rarely (1); sometimes (3); and often (5).

Established cutoff scores used the summated scale scores of intrusion and avoidance. A low distress total score was determined to be less than 9; a moderate distress total score ranged from 9 to 18; and a high distress total score was 19 and over. These scores now appear to be an overestimation of distress based on more recent measures of clinical distress.

Our new criteria using DSM-4 as the Gold standard are:

**Low distress for all 15 items = 0-14.**

Scores in this range obviously do not provide good information about diagnosis as indicated by the Diagnostic Interview for Children and Adolescents-Revised Version (Reich, & Welner, 1990). Thus, if anyone who scored at 10 or higher were to be considered to have PTSD, the sensitivity of this diagnosis would be .833, and the specificity would be .268.

**Mild distress = 15 – 27 for all 15 items.**

If anyone who scored 15 or higher were to be considered to have PTSD, the sensitivity of this diagnosis would again be .833, and the specificity would be .393.

**High distress = 28 + for all 15 items.**

The cutoff that provides the best sensitivity/specificity tradeoff is 28 or higher. If anyone who scores 28 or higher were to be considered to have PTSD, the sensitivity of this diagnosis would be .833, and the specificity would be .696.

For these reasons, we recommend that if you equate distress levels with actual diagnosis of PTSD that the score should be 28 and above.

These distress levels are based on 118 children and adolescents, (ages 8-16), all of who experienced a residential fire.

These criteria should be used in all future work employing this scale. If there are questions or comments, please contact:

Russell T. Jones, Ph.D.
Professor of Psychology
4088 Derring Hall
Virginia Tech
Blacksburg, Virginia Tech 24061
rtjones@vt.edu.

Special thanks is extended to: Kenneth E. Fletcher, Ph.D.
Associate Professor of Psychiatry and the Graduate School of Nursing
Director, UMMS Behavioral Sciences Research Core
University of Massachusetts Medical School for determination of these criteria.
References:


Clinician Administered PTSD Scale for Children and Adolescents (CAPS-CA)

Author(s): Nader, Kriegler, Blake, Pynoos, Newman & Weathers  Year: 1996

Population/Age Group: ages of 8 to 15.

Purpose: The Clinician Administered PTSD Scale for Children and Adolescents (CAPS-CA) assesses and diagnoses children’s and adolescent’s PTSD symptoms for up to three identified traumatic events (Nader, Newman, Weathers, Kriegler, Blake, & Pynoos, 1998).

Description: The Clinician Administered PTSD Scale for Children and Adolescents (CAPS-CA) was modeled after the adult measure Clinician Administered PTSD Scale. The CAPS-C (children) preceded the CAPS-CA. The CAPS-CA (Nader, et.al., 1998) is a semi-structured clinical interview. Thirty-four items assess DSM-IV PTSD symptoms, and eight additional associate features (i.e., guilt, shame, dissociation, changes in attachment behaviors and trauma-specific fears). There is diagnostic requirement that the youth have experienced at least one traumatic event. Symptoms are explored after the Life Events Checklist, a 17-item checklist used to identify traumatic events. The measure allows for the evaluation of the frequency and intensity of each PTSD symptoms, and the impact of symptoms on social functioning.

Thirty minutes to two hours are needed to complete the entire interview. Utilizing pictorial scales and cartoon faces children and adolescents are asked to respond frequency and intensity for each item. Frequency and intensity are rated on a 4-point scale. The design requires that a clinician or researcher who is knowledgeable about PTSD and experienced with interviewing children administer the measure (Carlson, 1997). The protocol manual for administration and scoring is not currently available.

Psychometrics Properties: The adult CAPS and CAPS-C are widely accepted due to their sound psychometric properties. Currently, psychometric properties for the CAPS-CA are under investigation. There is no validity measure other than asking the rater for their subjective assessment of the child’s accuracy. Developers encourage researchers to share data to further assess psychometric properties.

Contact Information: The National Center for PTSD (116-D), VA Medical & Regional Office Center, White River Junction, VT 05009, ncptsd@ncptsd.org
16. **(D-4)** hypervigilance

**Frequency**
D-4a.f. Have you felt like something bad was going to happen and you needed to be ready for it, sort of like watching out for danger or things that you're afraid of? [DEMONSTRATE BY HOLDING SHOULDERS UP AND LOOKING LEFT AND RIGHT]? (Were you kind of jumpy and worried like something bad might happen?) Has this changed or were you always like that? [IF CHANGE:] When did you first start being watchful (worried)? (Did you ever feel this way before [EVENT]?)

In the (past month/week/lifetime worst month), how much of the time did you feel this way?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>None of the time (less than 10%)</td>
</tr>
<tr>
<td>1</td>
<td>A little of the time (less than 10%)</td>
</tr>
<tr>
<td>2</td>
<td>Some of the time (approx. 20-30%)</td>
</tr>
<tr>
<td>3</td>
<td>Much of the time (approx. 50-60%)</td>
</tr>
<tr>
<td>4</td>
<td>Most or all of the time (more than 80%)</td>
</tr>
</tbody>
</table>

**Description/Examples:**

**Intensity**
D-4a.i. In the past (month/week/lifetime worst month), how much did you watch out for something bad that might happen? Did you do anything special to make yourself feel better (safer)? [IN RATING THIS ITEM INCLUDE OBSERVATIONS OF HYPERVIGILANCE DURING THE INTERVIEW.]

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Not at all, watching for danger, no hypervigilance</td>
</tr>
<tr>
<td>1</td>
<td>Little, mild, minimal hypervigilance, slight heightening of awareness</td>
</tr>
<tr>
<td>2</td>
<td>Some, moderate, hypervigilance clearly present, watchful in public (e.g. sits away from windows)</td>
</tr>
<tr>
<td>3</td>
<td>A lot, severe, marked hypervigilance, very alert, scans environment for danger, exaggerated concern for safety of self/family/home</td>
</tr>
<tr>
<td>4</td>
<td>A whole lot, extreme, excessive hypervigilance, efforts to ensure safety consume significant time and energy and may involve extensive safety/checking behaviors, marked watchful behavior during interview</td>
</tr>
</tbody>
</table>

**QV (SPECIFY)**

**Current: Trauma Related?**

| unlikely | definite | probable |

**Lifetime: Trauma Related?**

| unlikely | definite | probable |
### Impact on Scholastic Functioning

**[CURRENT]** Are you going to school now?  
**[IF YES]:** In the past (month/week), did the PTSD symptoms/problems you've told me about make it harder for you to do your schoolwork or do well at school? Was this a change or were you always like that? **[RATE THE OVERALL IMPACT THAT THE PTSD SYMPTOMS HAVE HAD ON ABILITY TO ATTEND AND PERFORM IN SCHOOL. TAKE INTO CONSIDERATION THE REPORTED PRE- AND POST-TRAUMA ACADEMIC HISTORY. ALSO CONSIDER PROBLEMS DUE TO REASONS OTHER THAN PTSD SYMPTOMS.]

**[LIFETIME]** During [MONTH IDENTIFIED AS WORST], were you going to school?  
**[IF YES]:** Back then, did the PTSD symptoms/problems you've told me about make it harder for you to do your schoolwork or do well at school? Was this a change or were you always like that? **[RATE THE OVERALL IMPACT THAT THE PTSD SYMPTOMS HAVE HAD ON ABILITY TO ATTEND AND PERFORM IN SCHOOL. TAKE INTO CONSIDERATION THE REPORTED PRE- AND POST-TRAUMA ACADEMIC HISTORY. ALSO CONSIDER PROBLEMS DUE TO REASONS OTHER THAN PTSD SYMPTOMS.]

<table>
<thead>
<tr>
<th>Current</th>
<th>Lifetime</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No adverse impact</td>
</tr>
<tr>
<td>1</td>
<td>Mild impact, minimal impairment in scholastic functioning</td>
</tr>
<tr>
<td>2</td>
<td>Moderate impact, definite impairment, but many aspects of scholastic functioning still intact</td>
</tr>
<tr>
<td>3</td>
<td>Severe impact, marked impairment, few aspects of scholastic functioning still intact</td>
</tr>
<tr>
<td>4</td>
<td>Extreme impact, little or no scholastic functioning</td>
</tr>
<tr>
<td>5</td>
<td>Not Applicable</td>
</tr>
</tbody>
</table>

**QV**

---

---
23. (F) Impact on developmental functioning: Loss of acquired skill

[CURRENT] Over the past (month/week), did you find yourself doing things again like you did them when you were younger or doing things someone younger than you might do (like needing someone with you more, being afraid to be alone, biting your nails, sucking your fingers more, wetting your pants, or not doing things as well as you used to do them)?

[IF NEEDED:] (You know how when you are young, you do certain things and as you get older you stop doing them? After [EVENT], were you doing things like you did when you were younger? How about this past month? You know how when you are young you don’t do certain things well, but as you get older you get better at them. After [EVENT], were you not able to do those things you got better at doing? How about over this past (month/week)?

[LIFETIME] At that time when things were hardest, did you find yourself doing things again like you did them when you were younger or doing things someone younger than you might do (like needing someone with you more, being afraid to be alone, biting or sucking your fingers more, wetting your pants, or not doing things as well as you used to)?

[IF NEEDED:] (You know how when you are young, you do certain things and as you get older you stop doing them? During [MONTH IDENTIFIED AS THE WORST TIME], were you doing things like you did when you were younger? How about over this past month? You know how when you are young you don’t do certain things well, but as you get older you get better at them. During [MONTH IDENTIFIED AS THE WORST TIME], were you not able to do things you got better at doing?)

24 Global Validity Rating

ESTIMATE THE OVERALL VALIDITY OF RESPONSES. CONSIDER FACTORS SUCH AS COMPLIANCE WITH THE INTERVIEW, MENTAL STATUS (E.G., PROBLEMS WITH CONCENTRATION, COMPREHENSION, DISSOCIATION), AND EFFORTS TO EXAGGERATE OR MINIMIZE SYMPTOMS.

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Excellent, no reason to suspect invalid responses</td>
</tr>
<tr>
<td>1</td>
<td>Good, factors present that may adversely affect validity</td>
</tr>
<tr>
<td>2</td>
<td>Fair, factors present that definitely reduce validity</td>
</tr>
<tr>
<td>3</td>
<td>Poor, substantially reduced validity</td>
</tr>
<tr>
<td>4</td>
<td>Invalid responses, severely impaired mental status or possible deliberate &quot;faking bad&quot; or &quot;faking good&quot;</td>
</tr>
</tbody>
</table>
25: Global Severity Rating

ESTIMATE THE OVERALL SEVERITY OF PTSD SYMPTOMS. CONSIDER DEGREE OF SUBJECTIVE DISTRESS, DEGREE OF FUNCTIONAL IMPAIRMENT, OBSERVATIONS OF BEHAVIORS IN INTERVIEW, AND JUDGMENT REGARDING REPORTING STYLE.

<table>
<thead>
<tr>
<th>Score</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Asymptomatic</td>
</tr>
<tr>
<td>1</td>
<td>Mild, minimal distress or functional impairment</td>
</tr>
<tr>
<td>2</td>
<td>Moderate, definite distress or functional impairment but functions satisfactorily with effort</td>
</tr>
<tr>
<td>3</td>
<td>Severe, considerable distress or functional impairment, limited functioning even with effort</td>
</tr>
<tr>
<td>4</td>
<td>Extreme, incapacitating distress or pervasive impairment</td>
</tr>
</tbody>
</table>

26. Global Improvement Rating

RATE TOTAL OVERALL IMPROVEMENT PRESENT SINCE THE INITIAL RATING. [IF NO EARLIER RATING, ASK HOW THE SYMPTOMS ENDORSED HAVE CHANGED OVER THE PAST 6 MONTHS.] RATE THE DEGREE OF CHANGE, WHETHER OR NOT, IN YOUR JUDGMENT, IT IS DUE TO TREATMENT.

<table>
<thead>
<tr>
<th>Score</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Asymptomatic</td>
</tr>
<tr>
<td>1</td>
<td>Very much improvement</td>
</tr>
<tr>
<td>2</td>
<td>Moderate improvement</td>
</tr>
<tr>
<td>3</td>
<td>Slight improvement</td>
</tr>
<tr>
<td>4</td>
<td>No improvement</td>
</tr>
<tr>
<td>5</td>
<td>Insufficient information</td>
</tr>
</tbody>
</table>

Current PTSD Symptoms

Criterion A met (traumatic event)? NO YES

___ # Criterion B sx (≥ 1)? NO YES

___ # Criterion C sx (≥ 3)? NO YES

___ # Criterion D sx (≥ 2)? NO YES

Criterion E met (duration ≥ 1 month)? NO YES

Criterion F met (distress/impairment)? NO YES

CURRENT PTSD (Criteria A-F met)? NO YES

IF CURRENT PTSD CRITERIA ARE MET, SKIP TO ASSOCIATED FEATURES. IF NOT, ASSESS FOR LIFETIME PTSD. IDENTIFY A PERIOD OF AT LEAST A MONTH SINCE THE TRAUMATIC EVENT IN WHICH SYMPTOMS WERE WORSE.

*Since the (EVENT), has there been a time when these (PTSD SYMPTOMS/things I've asked you about) were a lot worse than they have been in the past month? When was that? How long did it last? (At least a month?) [OPTIONAL: MONTH CALENDAR CAN BE CONSTRUCTED AT THIS TIME]

IF MULTIPLE PERIODS IN THE PAST: When were you bothered the most by these (PTSD SYMPTOMS)?

IF AT LEAST ONE PERIOD, INQUIRE ITEMS 1-17, CHANGING FREQUENCY PROMPTS TO REFER TO WORST PERIOD: During that time, did you (EXPERIENCE SYMPTOM)? How often?
Lifetime PTSD Symptoms

Criterion A met (traumatic event)? NO YES

Criterion B sx (≥ 1)? NO YES

Criterion C sx (≥ 3)? NO YES

Criterion D sx (≥ 2)? NO YES

Criterion E met (duration ≥ 1 month)? NO YES

Criterion F met (distress/impairment)? NO YES

LIFETIME PTSD (Criteria A-F met)? NO YES

Associated Features

27. Guilt over acts of commission or omission

Frequency

26af. Did you think that (EVENT) was your fault? [IF YES:] How was it your fault? Have you felt bad (guilty) about things you did at the time of the (EVENT)? Did you feel bad (guilty) about things you didn't do at time of event? (Did you wish you had acted differently? How? Did you think a lot about things you wished you had done? How did that make you feel?) Did you think (EVENT) took place because you were bad or wrong? (How did that make you feel? Did you worry that other people thought (EVENT) was your fault?) In the (past month/week/lifetime worst month), how much of the time (how often) did you feel this way?

0 None of the time
1 Very little of the time (less than 10%)
2 Some of the time (approx. 20-30%)
3 Much of the time (approx. 50-60%)
4 Most or all of the time (more than 80%)

Description/Examples

Intensity

26ai. In this (past month/week/lifetime worst month) what would you do when you felt bad or guilty? (Did you stop what you were doing or were you able to keep doing what you were doing?) In the (past month/week/lifetime worst month), how strong were these bad (guilty) feelings?

0 None, no feelings of guilt [May wish to have done something differently but does not feel bad or guilty]
1 A little, mild, slight feelings of guilt
2 Some, moderate, guilt definitely present but still manageable
3 A lot, severe, marked feelings of guilt, considerable distress
4 A whole lot, extreme guilt, pervasive feelings of guilt, self-condemnation regarding behavior, incapacitating distress

QV (SPECIFY)

Current: Trauma Related?

unlikely definite probable

Lifetime: Trauma Related?

unlikely definite probable
### Survivor guilt

**Frequency**
27af. Did you feel bad or guilty that it was not as bad for you as it was for others? *IF APPLICABLE ASK:* (Have you felt that it should have been you instead of someone else who got badly hurt or died?) How much of the time in the past (month/week, lifetime worst month) did you feel bad?

<table>
<thead>
<tr>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 None of the time</td>
</tr>
<tr>
<td>1 Very little of the time (less than 10%)</td>
</tr>
<tr>
<td>2 Some of the time (approx. 20-30%)</td>
</tr>
<tr>
<td>3 Much of the time (approx. 50-60%)</td>
</tr>
<tr>
<td>4 Most or all of the time (more than 80%)</td>
</tr>
<tr>
<td>5 Not Applicable</td>
</tr>
</tbody>
</table>

**Description/Examples**

### Intensity
27ai. In the past month/lifetime worst month, what did you do when you started to feel bad? (Did you stop what you were doing or were you able to keep doing what you were doing? How strong were these bad and/or guilty feelings?)

<table>
<thead>
<tr>
<th>Intensity</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 None, no feelings of guilt [May wish to have done something differently but does not feel bad or guilty]</td>
</tr>
<tr>
<td>1 A little, mild slight feelings of guilt</td>
</tr>
<tr>
<td>2 Some, moderate, guilt definitely present but still manageable</td>
</tr>
<tr>
<td>3 A lot, severe, marked feelings of guilt, considerable distress</td>
</tr>
<tr>
<td>4 A whole lot, extreme guilt, pervasive feelings of guilt, self-condemnation regarding behavior, incapacitating distress</td>
</tr>
<tr>
<td>5 Not applicable</td>
</tr>
</tbody>
</table>

**QV (SPECIFY)**

Current: Trauma Related?

<table>
<thead>
<tr>
<th>Current</th>
</tr>
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<tr>
<td>unlikely definite probable</td>
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</table>

Lifetime: Trauma Related?

<table>
<thead>
<tr>
<th>Lifetime</th>
</tr>
</thead>
<tbody>
<tr>
<td>unlikely definite probable</td>
</tr>
</tbody>
</table>

### Shame

**Frequency**
28af. Have you felt embarrassed, (dirty, shameful) about what happened? Did what happened make you feel different about yourself? How? How much of the time in the past (month/week/lifetime worst month)? Has this changed or did you always feel embarrassed (dirty, shameful)? *IF CHANGE:* (When did you start being embarrassed, [dirty, shameful]) Did you ever feel this way before [EVENT]?

<table>
<thead>
<tr>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 None of the time</td>
</tr>
<tr>
<td>1 Very little of the time (less than 10%)</td>
</tr>
<tr>
<td>2 Some of the time (approx. 20-30%)</td>
</tr>
<tr>
<td>3 Much of the time (approx. 50-60%)</td>
</tr>
<tr>
<td>4 Most or all of the time (more than 80%)</td>
</tr>
<tr>
<td>5 Not Applicable</td>
</tr>
</tbody>
</table>

**Description/Examples**

### Intensity
28ai. In this the past (month/week/lifetime worst month), what did you do when you feel that way happens? (Did you stop what you are doing or are you able to keep doing what you are doing?) How strong were these feelings for you this month (LIFETIME WORST MONTH)?

<table>
<thead>
<tr>
<th>Intensity</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 Not at all</td>
</tr>
<tr>
<td>1 A little, mild, slight feelings of shame</td>
</tr>
<tr>
<td>2 Some, moderate, shame clearly present but still manageable, some distress but still manageable</td>
</tr>
<tr>
<td>3 A lot, severe, marked feelings of shame, considerable distress shame</td>
</tr>
<tr>
<td>4 A whole lot, extreme, pervasive feelings of shame, incapacitating distress</td>
</tr>
</tbody>
</table>

**QV (SPECIFY)**

Current: Trauma Related?

<table>
<thead>
<tr>
<th>Current</th>
</tr>
</thead>
<tbody>
<tr>
<td>unlikely definite probable</td>
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</table>

Lifetime: Trauma Related?

<table>
<thead>
<tr>
<th>Lifetime</th>
</tr>
</thead>
<tbody>
<tr>
<td>unlikely definite probable</td>
</tr>
</tbody>
</table>
30. a reduction in awareness of his or her surroundings (e.g., "being in a daze")

<table>
<thead>
<tr>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>29a. Have there been times when you felt spacey, or like you had gone away in your mind? Did you feel like things were going on all around you but you didn't know it (like you were out of touch with the world)? What was that like? [DISTINGUISH FROM FLASHBACK EPISODES.] Did anyone tell you they have to call your name many times before you answer them, even if you are right next to the person? [Tell me about that.] [RULE OUT NOISE &amp; HEARING PROBLEMS]. How much of the time has that happened in the past (month/week/lifetime worst month)? (When did you first start feeling that way? After the [EVENT]? [IF NOT CLEAR:] (Were you sick? Had you just had medicine, drugs or alcohol?)</td>
</tr>
<tr>
<td>0</td>
</tr>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Intensity</th>
</tr>
</thead>
<tbody>
<tr>
<td>29a. In this the past (month/week/lifetime worst month), what were these feelings like for you? (Were you confused about where you actually were or what you were doing at the time?) How long did it last? What did you do while this was happening? (Did other people notice your behavior? What did they say?)</td>
</tr>
<tr>
<td>0</td>
</tr>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>QV (SPECIFY)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

**Current:** Trauma Related?

<table>
<thead>
<tr>
<th>unlikely</th>
<th>definite</th>
<th>probable</th>
</tr>
</thead>
</table>

**Lifetime:** Trauma Related?

<table>
<thead>
<tr>
<th>unlikely</th>
<th>definite</th>
<th>probable</th>
</tr>
</thead>
</table>
### Frequency

30af. Have there been times when things going on around you seemed very strange, when you didn't know whether it was real or not? (What was that like? Was it like you were dreaming but you were really awake?)

What about times when someone you knew seemed like someone you didn't know? (What was that like?) Have you felt like you were in a strange place even though it was a place you knew really well? (What was that like?)

How often has that happened in the past (month/week/lifetime worst month)? (When did you first start feeling that way? After the [EVENT]?)

**[IF NOT CLEAR:]** (Were you sick? Had you just had medicine, drugs or alcohol?)

0 Never
1 Once or twice
2 Once or twice a week
3 Several times a week
4 Daily or almost every day

### Description/Examples

#### Intensity

30ai. In the past (month/week/lifetime worst month), what were these feelings like for you? How long did these feelings last? What did you do while this was happening? (Did other people say something about how you were acting? What did they say?)

- 0 No derealization
- 1 Mild, a little, slight derealization
- 2 Moderate, some, definite but transient derealization
- 3 Severe, considerable derealization, marked confusion about what is real, may persist for several hours
- 4 Extreme, profound derealization, dramatic loss of sense of reality or familiarity

### QV (SPECIFY)

**Current: Trauma Related?**

unlikely definite probable

**Lifetime: Trauma Related?**

unlikely definite probable

### Frequency

31af. Have there been times you felt like you were not in your body but watching yourself? Were there times you felt set apart or separate from yourself or your body? Tell me about it. How much of the time has that happened in the past (month/week/lifetime worst month)?

**[IF NOT CLEAR:]** (Were you sick? Had you just had medicine, drugs or alcohol?)

0 Never
1 Once or twice
2 Once or twice a week
3 Several times a week
4 Daily or almost every day

### Description/Examples

#### Intensity

31ai. In this the past (month/week/lifetime worst month), how long did this feeling last? What did you do while this was happening? (Did other people notice your behavior? What did they say?)

- 0 No depersonalization
- 1 Mild, slight depersonalization
- 2 Moderate, definite but transient depersonalization
- 3 Severe, considerable depersonalization, may persist for several hours
- 4 Extreme, profound depersonalization,

### QV (SPECIFY)

**Current: Trauma Related?**

unlikely definite probable

**Lifetime: Trauma Related?**

unlikely definite probable
33. Changes in attachment

**Frequency**

31af. What people do you count on or depend upon most? (Who are you closest to? Who do you care about most?) [ASCERTAIN NAMES].

Have you needed or wanted [NAMES] close to you a lot of the time? (Has this changed? Was it more than before [EVENT] happened/tak place?)

Have you needed or wanted to stay away from [NAME] a lot of the time? (Has this changed? Was it more than before [EVENT] happened?)

Have you felt scared of (worried about) being away (separated, set apart) from [NAMES]? (Has this changed? Was it more than before [EVENT] happened/ took place?)

How did you feel when you were by yourself? (Did you feel OK when you were alone? Has this changed? Was it more than before [EVENT] happened?)

FOR YOUNGER CHILDREN: Did saying hello and good-bye to [NAMES] feel different after [EVENT]? (How was it different?)

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Once or twice</th>
<th>Once or twice a week</th>
<th>Several times a week</th>
<th>Daily or almost every day</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td></td>
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<td></td>
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<tr>
<td>1</td>
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<td>4</td>
<td></td>
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</tr>
</tbody>
</table>

**Description/Examples**

No intensity rating. SPECIFY:

**Current:**

Relationship
Attachment Problem:
Lifetime:
Relationship
Attachment Problem:

QV (SPECIFY)

**Current:** Trauma Related?

unlikely  definite  probable

**Lifetime:** Trauma Related?

unlikely  definite  probable
34. How do you think (EVENT) has affected your life?

35. Has anything helped you to feel better since the event?

36. What do you do to help yourself to feel better when you are feeling bad?

END OF CAPS-CA INTERVIEW.
### CAPS- CA Form 2 (Diagnostic) SUMMARY SHEET

<table>
<thead>
<tr>
<th>Category</th>
<th>CURRENT</th>
<th>LIFETIME</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A. Traumatic event:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>B. Reexperiencing symptoms</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) intrusive recollections</td>
<td>Freq</td>
<td>Int</td>
</tr>
<tr>
<td>(2) distressing dreams</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) acting or feeling as if event were recurring</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) psychological distress at exposure to cues</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5) physiological reactivity on exposure to cues</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>B subtotals</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>NUMBER OF CRITERION B SYMPTOMS (NEED 1)</strong></td>
<td>NO</td>
<td>YES</td>
</tr>
<tr>
<td><strong>C. Avoidance and numbing symptoms</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6) avoidance of thoughts, feelings, or conversations</td>
<td>Freq</td>
<td>Int</td>
</tr>
<tr>
<td>(7) avoidance of activities, places, or people</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8) inability to recall important aspect of trauma</td>
<td></td>
<td></td>
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<tr>
<td>(9) diminished interest or participation in activities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(10) detachment or estrangement</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(11) restricted range of affect</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(12) sense of a foreshortened future</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>C subtotals</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>NUMBER OF CRITERION C SYMPTOMS (NEED 3)</strong></td>
<td>NO</td>
<td>YES</td>
</tr>
<tr>
<td><strong>D. Hyperarousal symptoms</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(13) difficulty falling or staying asleep</td>
<td>Freq</td>
<td>Int</td>
</tr>
<tr>
<td>(14) irritability or outbursts of anger</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(15) difficulty concentrating</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(16) hypervigilance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(17) exaggerated startle response</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>D subtotals</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>NUMBER OF CRITERION D SYMPTOMS (NEED 2)</strong></td>
<td>NO</td>
<td>YES</td>
</tr>
<tr>
<td><strong>E. Duration of disturbance</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(19) duration of disturbance at least one month</td>
<td>CURRENT</td>
<td>LIFETIME</td>
</tr>
<tr>
<td></td>
<td>NO</td>
<td>YES</td>
</tr>
<tr>
<td><strong>F. Significant distress or impairment in functioning</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(20) overall distress</td>
<td>CURRENT</td>
<td>LIFETIME</td>
</tr>
<tr>
<td>(21) impairment in social functioning</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(22) impairment in scholastic functioning</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(23) impairment in developmental functioning</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>F subtotals</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>AT LEAST ONE ≥ 2?</strong></td>
<td>NO</td>
<td>YES</td>
</tr>
<tr>
<td><strong>PTSD diagnosis</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PTSD PRESENT -- ALL CRITERIA (A-F) MET?</td>
<td>CURRENT</td>
<td>LIFETIME</td>
</tr>
<tr>
<td></td>
<td>NO</td>
<td>YES</td>
</tr>
<tr>
<td>Specify:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(18) with delayed onset (≥ 6 months delay)</td>
<td>Specify</td>
<td></td>
</tr>
<tr>
<td>(19) acute (&lt; 3 months duration) or chronic (≥ 3 months duration)</td>
<td>acute</td>
<td>chronic</td>
</tr>
<tr>
<td>Global clinical ratings</td>
<td>CURRENT</td>
<td>LIFETIME</td>
</tr>
<tr>
<td>-------------------------</td>
<td>---------</td>
<td>----------</td>
</tr>
<tr>
<td>(24) global validity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(25) global severity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(26) global improvement</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Associated features</th>
<th>CURRENT</th>
<th>LIFETIME</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Freq</td>
<td>Int</td>
</tr>
<tr>
<td>(27) guilt over acts of commission or omission</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(28) survivor guilt</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(29) shame</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(30) reduction in awareness of surroundings</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(31) derealization</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(32) depersonalization</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(33) changes in attachment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(34) trauma-specific fears</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intensity Rating Sheet #2</td>
<td>No Feelings</td>
<td>Little Bit of Some Feelings</td>
</tr>
<tr>
<td>---------------------------</td>
<td>-------------</td>
<td>----------------------------</td>
</tr>
<tr>
<td>A</td>
<td><img src="image1.png" alt="Image" /></td>
<td><img src="image2.png" alt="Image" /></td>
</tr>
<tr>
<td>B</td>
<td><img src="image5.png" alt="Image" /></td>
<td><img src="image6.png" alt="Image" /></td>
</tr>
<tr>
<td>C</td>
<td><img src="image9.png" alt="Image" /></td>
<td><img src="image10.png" alt="Image" /></td>
</tr>
<tr>
<td>D</td>
<td><img src="image13.png" alt="Image" /></td>
<td><img src="image14.png" alt="Image" /></td>
</tr>
<tr>
<td>E</td>
<td><img src="image17.png" alt="Image" /></td>
<td><img src="image18.png" alt="Image" /></td>
</tr>
<tr>
<td>Intensity Level</td>
<td>Description</td>
<td></td>
</tr>
<tr>
<td>----------------------</td>
<td>-----------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Not a problem</td>
<td>Not at all</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>A little</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>More than a little, but I can handle it</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>A problem, it gets in the way</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>A big problem, I have to stop what I am doing</td>
<td></td>
</tr>
</tbody>
</table>

**Intensity Rating Sheet**

How much of a problem was it?
FREQUENCY RATING SHEET

How often or how much of the time does the problem happen:

<table>
<thead>
<tr>
<th>How often or how much of the time</th>
<th>Most of the time</th>
<th>4 or more days per week</th>
<th>Most</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Much of the time</td>
<td>3 times per week</td>
<td>Many</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Some of the time</td>
<td>1 or 2 times per week</td>
<td>Some</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Little of the time</td>
<td>1 or 2 times per month</td>
<td>Few</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>None of the time</td>
<td></td>
<td></td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>

None of the time

Never

None

0
LIFE EVENTS CHECKLIST

Listed below are things that sometimes happen to people. I'll read this aloud and together let's mark the boxes that describe things you've lived through or seen. For each event let's check one or more of the boxes to show if the event: (a) **happened to you**; (b) **you saw it happen** to someone else; (c) **you learned about it happening** to someone close to you; (d) you're **not sure** if it fits; or (e) **it never happened** to you or anyone close to you. Be sure to think about your **whole life** growing up as you go through the list of events.

<table>
<thead>
<tr>
<th>Event</th>
<th>Happened to me</th>
<th>Saw it</th>
<th>Learned about it</th>
<th>Not Sure</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Disaster (for example, a flood, hurricane, tornado, or earthquake)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Fire or explosion</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>3. Vehicle accident (for example, car, bus, truck, or boat accident; train wreck or plane crash)</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>4. Bus accident at school, home, or while playing</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>5. Being near dangerous chemicals, leaking gas, or radiation; being made sick from poison</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Being slapped, kicked, hit, bitten, attacked, or beaten up</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Being attacked with a weapon, (for example, belt, bottles, knife, gun, or bomb); or being told you would be hurt with a weapon (but you weren't hurt after all)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Someone touching your body in a way you didn't want to be touched; being made to watch someone's body; someone saying or trying to touch your body but the touching never happened</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Living in an area where there was fighting in the streets or a war going on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Not having enough food, water, clothing; not having a home; being left alone for many days without food or anyone to take care of you</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Being near dying, hungry, or homeless people; being around kids without any adults to care for them</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Being forced to stay someplace against your wishes (kidnapped, being stolen)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Illness or injury that might have caused death</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Violent death or dead bodies</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. Death of someone close to you</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. Bodily hurting someone on purpose or by accident</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17. Any other very bad or scary event or experience or time you thought your life was in danger</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Los Angeles Symptom Checklist (LASC)

Author(s): King, King, Leskin & Foy  
Year: 1995

Population/Age Group: Adolescents (mean age 16).

Purpose: To measure Posttraumatic Stress Disorder (PTSD) and general distress in a variety of adult and adolescents traumatized populations.

Description: The LASC (King, King, Leskin & Foy, 1995) is a 43-item self-report checklist that provides an index of distress in addition to a subset of items. For adolescent a version has been modified for reading level and age appropriateness. Some items adhere to DSM-IV PTSD criteria, and other items were developed based on clinical experience of more general stress-related problems for adolescents (abusive drinking, pervasive disgust, girlfriend/boyfriend problems, and excessive eating) (Greenwald, 2000).

On a Likert scale of 0 (not a problem) to 4 (extreme problem), the adolescent endorses “how much of problem” each symptom is. At total score is achieved by summing responses. PTSD symptoms can be scored separately from the entire measure, and a continuous score for PTSD can be obtained.

Psychometrics Properties: One of the first studies examined psychometric properties with a small sample of incarcerated juvenile offenders (Burton, Foy, Bwanausi, Johnson & Moore, 1994), and a second study was completed with a small sample of male and female enrolled in alternative schools (Guevara, 1991). A combination of the two studies resulted in high alpha for the entire measure, and for the continuous PTSD severity score. For this study the LASC was modified again. In a sample of 639 high school ethnically diverse males and females enrolled at three inner city and one suburban schools (Foy, Wood, King, King, & Resnick, 1997). Results demonstrate the LASC possesses a high internal consistency and test-retest reliability.

Contact Information: David W. Foy, Graduate School of Education and Psychology, Pepperdine University, 400 Corporate Pointe, Culver City, CA 90230
Los Angeles Symptom Checklist  
(Adolescent Version)  
This is a list of problems that people your age sometimes have, and I would like you to rate each one on a scale of 0 to 4, according to how much of a problem it is for you.

<table>
<thead>
<tr>
<th>Not a problem</th>
<th>Slight problem</th>
<th>Moderate problem</th>
<th>Serious problem</th>
<th>Extreme problem</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Difficulty falling asleep</td>
<td></td>
<td></td>
<td>24. Eating too much</td>
<td></td>
</tr>
<tr>
<td>2. Drinking too much alcohol</td>
<td></td>
<td></td>
<td>25. Difficulty concentrating</td>
<td></td>
</tr>
<tr>
<td>4. Restlessness, not able to sit</td>
<td></td>
<td></td>
<td>27. Sexual problems</td>
<td></td>
</tr>
<tr>
<td>5. Nightmares, bad dreams</td>
<td></td>
<td></td>
<td>28. Waking during the night</td>
<td></td>
</tr>
<tr>
<td>6. Difficult getting to school</td>
<td></td>
<td></td>
<td>29. Difficulty with memory</td>
<td></td>
</tr>
<tr>
<td>7. Difficulty staying in school (skipping school, probation problems, getting kicked out)</td>
<td></td>
<td></td>
<td>30. Very self-conscious, worried about what others think or feel about me</td>
<td></td>
</tr>
<tr>
<td>8. Getting angry easily and/or temper problems</td>
<td></td>
<td></td>
<td>31. Depression</td>
<td></td>
</tr>
<tr>
<td>9. Feeling disgusted at everything and everybody</td>
<td></td>
<td></td>
<td>32. Can’t make and keep male friends</td>
<td></td>
</tr>
<tr>
<td>10. Momentary blackouts and/or fainting spells</td>
<td></td>
<td></td>
<td>33. Can’t make and keep female friends</td>
<td></td>
</tr>
<tr>
<td>11. Feeling uncomfortable in my gut (stomach, insides)</td>
<td></td>
<td></td>
<td>34. Being too jumpy</td>
<td></td>
</tr>
<tr>
<td>12. Management of money (spending it unwisely)</td>
<td></td>
<td></td>
<td>35. Waking up early in the morning when I don’t need to</td>
<td></td>
</tr>
<tr>
<td>13. Dissatisfied with school</td>
<td></td>
<td></td>
<td>36. Loss of weight or appetite</td>
<td></td>
</tr>
<tr>
<td>14. Strong memories of unpleasant things that have happened</td>
<td></td>
<td></td>
<td>37. Heart pounding/beating very fast</td>
<td></td>
</tr>
<tr>
<td>15. Hostility/violence (you toward others)</td>
<td></td>
<td></td>
<td>38. Suddenly feeling very afraid or as if I’m going crazy, for no good reason</td>
<td></td>
</tr>
<tr>
<td>16. Boyfriend or girlfriend problems (problems forming or maintaining relationships)</td>
<td></td>
<td></td>
<td>39. Problems with authority (the law or police, the government, the principal)</td>
<td></td>
</tr>
<tr>
<td>17. Get tired easily</td>
<td></td>
<td></td>
<td>40. Avoiding doing things that remind me of unpleasant things that have happened</td>
<td></td>
</tr>
<tr>
<td>18. Drug abuse</td>
<td></td>
<td></td>
<td>41. Trouble trusting other people</td>
<td></td>
</tr>
<tr>
<td>19. Unable to show my feelings</td>
<td></td>
<td></td>
<td>42. Loss of interest in things that I usually do</td>
<td></td>
</tr>
<tr>
<td>20. Feeling tense or nervous</td>
<td></td>
<td></td>
<td>43. Feeling numb inside, my emotions don’t change—I don’t have strong feelings, either happy or sad</td>
<td></td>
</tr>
</tbody>
</table>

21. No leisure activities (don’t do anything for fun
22. Suicidal thoughts, feeling like I want to hurt myself
23. Physical or medical problems  
Please describe: __________________________
### Los Angeles Symptom Checklist Subscales

#### 17-Item PTSD Adolescent Scoring Form

<table>
<thead>
<tr>
<th>Subscale</th>
<th>Item Description</th>
<th>Item Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reexperiencing/Intrusion</td>
<td>Nightmares</td>
<td>5</td>
</tr>
<tr>
<td>Reexperiencing/Intrusion</td>
<td>Strong memories of unpleasant things that have happened</td>
<td>4</td>
</tr>
<tr>
<td>Reexperiencing/Intrusion</td>
<td>Waking during the night</td>
<td>28</td>
</tr>
<tr>
<td>Avoidance/Numbing</td>
<td>Unable to show my feelings</td>
<td>19</td>
</tr>
<tr>
<td>Avoidance/Numbing</td>
<td>Difficulty w/ memory</td>
<td>29</td>
</tr>
<tr>
<td>Avoidance/Numbing</td>
<td>Avoiding doing things that remind me of unpleasant things that have happened</td>
<td>40</td>
</tr>
<tr>
<td>Avoidance/Numbing</td>
<td>Trouble trusting other people</td>
<td>41</td>
</tr>
<tr>
<td>Avoidance/Numbing</td>
<td>Loss of interest in things that I usually do</td>
<td>42</td>
</tr>
<tr>
<td>Avoidance/Numbing</td>
<td>Feeling numb inside, my emotions don’t change—I don’t have strong feelings, either happy or sad</td>
<td>43</td>
</tr>
<tr>
<td>Hyperarousal</td>
<td>Difficulty falling asleep</td>
<td>1</td>
</tr>
<tr>
<td>Hyperarousal</td>
<td>Restlessness, unable to sit still</td>
<td>4</td>
</tr>
<tr>
<td>Hyperarousal</td>
<td>Getting angry easily &amp;/or temper problems</td>
<td>8</td>
</tr>
<tr>
<td>Hyperarousal</td>
<td>Feeling tense or nervous</td>
<td>20</td>
</tr>
<tr>
<td>Hyperarousal</td>
<td>Difficulty concentrating</td>
<td>25</td>
</tr>
<tr>
<td>Hyperarousal</td>
<td>Being too jumpy</td>
<td>34</td>
</tr>
<tr>
<td>Hyperarousal</td>
<td>Heart pounding/beating very fast</td>
<td>37</td>
</tr>
<tr>
<td>Hyperarousal</td>
<td>Suddenly feeling very afraid or as if I’m going crazy, for no good reason</td>
<td>38</td>
</tr>
</tbody>
</table>
Angie-Andy Cartoon Trauma Scale (ACTS)

**Author(s):** Praver, Pelcovitz & Deguiseppe  
**Year:** 1996

**Population/Age Group:** Designed for children 6 – 11, with a sample mean of 8 years.

**Purpose:** The Angie/Andy Cartoon Scale was designed to capture the inner experience of children exposed to repeated or chronic episodes of violence or other trauma. It attempts, through the use of drawings, to provide a non-threatening format for the child to report subjective reactions to traumatic experience.

**Description:** This instrument is designed in a cartoon-based format which presents drawings of a girl or boy who manifests traumatic stress symptoms. The person administering the scale points to the picture, reads the accompanying items and asks the child how often they feel, think or act like Angie or Andy. The child uses a thermometer response format, pointing to a picture of a thermometer – on four separate cards each filled in to varying degrees and labeled "never", “just a few times”, “some of the time” and “a lot of the time” - to respond.

This scale is based on an adult scale - the Structured Interview for Disorders of Extreme Stress (SIDES) (van der Kolk et al., 1993) which was designed to measure complex PTSD. The original 110 item Angie Andy test takes about 45 minutes to administer. The items result in information on six scales: 1) Dysregulation of affect, 2) Attention or Consciousness, 3) Self-Perception, 4) Relations with others, 5) Somatization and 6) System of meaning. The first two scales form one composite scale measuring the three main constructs (re-experiencing, avoidance and arousal) associated with posttraumatic stress. Scales three through six form a second composite scale – the Total Associated Symptom Scale.

**Psychometrics Properties:** The authors report excellent internal reliability (Cronbach’s alpha was .90 for the Total PTSD scale and .95 for the Total Associated Symptom scale). Promising construct and concurrent validity based on a study with three groups of traumatized children and one non trauma group were also reported. Children were predominantly Black and Hispanic. The scales differentiated between trauma and non-trauma groups in the predicted direction, i.e. the most severely traumatized group of children with exposure to multiple traumas manifested the most elevated scores on a majority of the scales. Results of data collection geared to inform both construct and concurrent validity are reported (Praver et al., 2000).

**Contact Information:** Multi-Health Systems Inc., P.O. Box 950, North Tonawanda, NY 14120, 800-456-3003, www.mhs.com
Children’s Impact of Traumatic Events Scale –Revised (CITES-R)

Author(s): Wolfe, Gentile, Michienzi, Sas, & Wolfe  
Year: 1991

Population/Age Group: The target population is sexually abused children aged 8 -16.

Purpose: The purpose of this instrument is to assess PTDS, sexualization and mediating factors in children who have been sexually abused.

Description: The CITES-R is comprised of 78 items that fall into 11 scales along four dimensions: 1) PTSD symptoms, 2) Eroticism, 3) Abuse Attribution and 4) Social Reactions. It is an interview which takes approximately ten to 40 minutes to administer.

Psychometrics Properties: Reliability is moderate, with an overall alpha of .69 for the 11 scales. However, there is some variability, with a range of .56 to .79. The strongest domain appears to be that of Social Support, with a mean alpha of .73. Construct validity was highest for the symptom scales (PTSD and Eroticism), but the predicted correlations were more modest than predicted. The symptom scales were also largely uncorrelated with parent report measures and there was no significant correlation with behavioral severity of sexual abuse. Construct validity for both the abuse attribution and social support domains was mixed (Wolfe, Gentile, Michienzi, Sas & Wolfe, 1991).

Contact Information: Vicky Wolfe, Children’s Hospital of Western Ontario Department of Psychiatry, 800 Commissioners Road East, London, Ontario, Canada N6A 5C2, 519-667-5755, vicky.wolfe@lhsc.on.ca
Feelings and Emotions Experienced During Sexual Abuse (FEEDSA)

**Author(s):** Wolfe & Birt  
**Year:** 1993

**Population/Age Group:** Sexually abused children. The measure has been used with abused girls only.

**Purpose:** Feelings and Emotions Experienced During Sexual Abuse (FEEDSA) was created to assess a child’s emotional reaction to a sexual abuse experience.

**Description:** The FEEDSA is a 54 item self-report measure. The measure has two subscales: 1) trauma and 2) dissociation. The response format is a 4 point Likert scale (0=none to 3= a lot) (Feindler, Rathurs & Silver, 2003).

**Psychometrics Properties:** Limited psychometric properties are available. High reliability for the trauma subscale (alpha .95) and good reliability for the dissociation subscale (alpha .80) were reported. Predictive validity was established by high trauma subscale scores and reports of dissociation (Feindler, Rathurs & Silver, 2003).

**Contact Information:** Vicky Wolfe, Children’s Hospital of Western Ontario Department of Psychiatry, 800 Commissioners Road East, London, Ontario, Canada N6A 5C2, 519-667-5755, vicky.wolfe@lhsc.on.ca
Negative Appraisals of Sexual Abuse Scale (NASAS)

**Author(s):** Spaccarelli  
**Year:** 1995

**Population/Age Group:** Sexually abused children and adolescents.

**Purpose:** Predict youth’s adjustment to sexual abuse via assessment of negative cognitive appraisals to threat, harm, or loss attributed to sexual abuse.

**Description:** The NASAS is a 56 item self-report that measures perception of threat or harm associated to sexual abuse. Eight theoretical subscales comprise the NASAS: 1) Physical Pain/Damage, 2) Negative Self-Evaluation, 3) Global, Negative Self-Evaluation, 4) Sexuality, 5) Loss of Desired Resources, 6) Harm to Relationships/Security, 7) Harm to Others, and 8) Criticism of others. The youth is instructed to discuss their feelings and thoughts about what happened to the perpetrator. Then each item is answered according to a 4-point Likert scale (1=not at all to 4= a lot). The scoring is built into the NASAS, and a total score is achieved by summing all items. It was normed with 48 sexually abused girls aged 11 to 18 (Spaccarelli & Fuchs, 1997; Spaccarelli, 1995).

**Psychometrics Properties:** For the total scale high internal consistency was found, and moderate to high internal consistency was found the subscales. Symptoms of depression and anxiety were correlated with negative appraisals. Additionally, a correlation between the CBCL (parent report) and the NASAS (child report) was found, thereby demonstrating concurrent validity. Convergent validity was established between the correlation between negative appraisal total scores and therapist ratting of abuse stress (Spaccarelli & Fuchs, 1997; Spaccarelli, 1995). Psychometric properties were assessed with same sample as the C-SARS.

**Contact Information:** Steven Spaccarelli, Institute for Juvenile Research, Department of Psychiatry, University of Illinois at Chicago, 907 South Wolcott Ave., Chicago, IL 60612
Pediatric Emotional Distress Scale (PEDS)

**Author(s):** Saylor & Swenson  
**Year:** 1999

**Population/Age Group:** Children 2 – 10.

**Purpose:** The purpose of this instrument is to provide a brief screening measure that can be used to detect elevated levels of symptoms and behavior in children following exposure to a stressful an/or traumatic event without burdening parents, child victims themselves or professionals.

**Description:** This is a 21-item parent report scale. Employing a 4 – item Likert rating scale (1) Almost Never (2) Sometimes, (3) Often and (4) Very Often), the parent responds to 17 general behavior items and four trauma-specific items. The items focus on specific symptoms empirically related to childhood trauma (Saylor et.al., 1999). Cut-off scores are developed for the total scale and each of the subscales. More detailed scoring information is contained in the referenced article. It is not intended to be a diagnostic instrument.

**Psychometrics Properties:** Factor analysis on the 21 items generated from four samples of two- to ten-year olds (traumatic event exposure and non-traumatic event exposure) yielded three reliable factors. These are labeled Anxious/Withdrawn, Fearful and Acting Out. Total and subscale scores demonstrated good internal consistency and both test-retest and interrater reliability were at satisfactory levels. Discriminant analyses distinguished between trauma exposure and non-trauma exposure groups.

**Contact Information:** Dr. Conway Saylor, Department of Psychology, The Citadel, 171 Moultrie Ave., Charleston, SC 29409, conway.saylor@citadel.edu
PEDiatric EMOTional DISTRESS SCALE (Peds)*

If you have a child between the ages of 2 and 10: Please circle one number for each item to describe how often your child has shown each behavior IN THE LAST MONTH.

Gender of child to be rated (M/F)________
Child's birth date: (M/D/Y)__________

<table>
<thead>
<tr>
<th></th>
<th>Almost Never</th>
<th>Sometimes</th>
<th>Often</th>
<th>Very Often</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Acts whiny</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>2.</td>
<td>Wants things right away</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>3.</td>
<td>Refuses to sleep alone</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>4.</td>
<td>Has trouble going to bed/falling asleep</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>5.</td>
<td>Has bad dreams</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>6.</td>
<td>Seems fearful without good reason</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>7.</td>
<td>Seems worried</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>8.</td>
<td>Cries without good reason</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>9.</td>
<td>Seems sad and withdrawn</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>10.</td>
<td>Clings to adults/doesn't want to be alone</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>11.</td>
<td>Seems &quot;hyperactive&quot;</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>12.</td>
<td>Has temper tantrums</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>13.</td>
<td>Gets frustrated too easily</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>14.</td>
<td>Complains about aches and pains</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>15.</td>
<td>Acts younger than used to for age (ie, bedwetting, baby talk, thumbsucking)</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>16.</td>
<td>Seems to be easily startled</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>17.</td>
<td>Acts aggressively</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>18.</td>
<td>Creates games, stories, or pictures about________________________</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>19.</td>
<td>Brings up________________________ in conversation.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>20.</td>
<td>Avoids talking about________________________ even when asked.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>21.</td>
<td>Seems fearful of things that are reminders of________________________</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

If your child has had a major trauma or stress in the last year, please describe it on the line provided (eg, loved one in the war, illness, death or loss, accident, natural disaster). Then rate their behavior with regard to the trauma/stress. (Describe trauma/stress.)

http://www.mentalhealth.org/publications/allpubs/SMA95-3022/default.asp
Sexual Abuse Fear Evaluation (SAFE)

**Author(s):** Wolfe & Wolfe

**Year:** 1986

**Population/Age Group:** Sexually abused children.

**Purpose:** To assess abuse-related fears and distressing situation in sexually abused children.

**Description:** The Sexual Abuse Fear Evaluation (SAFE) is a 27-item scale that is part of a larger 80-item Fear Survey Schedule for Children-Revised. Two subscales comprise the SAFE: Sexual Associated Fears and Interpersonal Discomfort. The 3-point scale response format facilitates scoring (Feindler, Rathus & Silver, 2003).

**Psychometrics Properties:** High Internal Reliability was found for both subscales. Validity could not be established. The measure was not able to discriminate between identified children of sexual and non-abused children. The response format may be root of the problem since it may not detect differences between sexual and non sexually abuse children. (Feindler, Rathus & Silver, 2003).

**Contact Information:** Vicky Wolfe, Children’s Hospital of Western Ontario Department of Psychiatry, 800 Commissioners Road East, London, Ontario, Canada N6A 5C2, 519-667-5755, vicky.wolfe@lhsc.on.ca
Trauma Symptom Checklist for Children (TSCC)

Author(s): John Briere

Year: 1996

Population/Age Group: 8 – 16 years.

Purpose: This instrument was designed to evaluate the impact of trauma as manifest both in symptoms of posttraumatic stress disorder and “related psychological symptomatology” (Briere, 1996).

Description: The TSCC is a self-report measure with 54 items, and is also available in a 44 item alternative version – the TSCC-A – minus items making reference to sexual issues. Items are grouped into two rater validity scales and six clinical scales. The six clinical scales are Anxiety, Depression, Anger, Posttraumatic Stress, Dissociation (with two subscales) and Sexual Concerns. Respondents answer questions directly into a booklet, which can be hand scored by the examiner. T-scores are then calculated on sex and age groupings. There is also a tear-off scoring sheet which can be computer-scored if desired. The measure takes 15 – 20 minutes to complete.

Psychometrics Properties: This measure has the advantage of extensive administration with normative samples, and yields high internal consistency for five of the six scales (alpha range is from .82 to .89). The Sexual Concerns scale has slightly lower internal consistency (alpha=.77). Results indicate strong construct validity (Singer, 1995; Evans et.al., 1994 & Elliot & Briere, 1994), convergent and discriminant validity (Briere & Lanktree, 1995; Briere, 1996; Evans et. al., 1994; Friedrich & Jopwaski, 1995), and criterion (or predictive) validity (Diaz, 1994). It is standardized on a large sample of racially and economically diverse children, providing norms on age and sex.

Contact Information: Psychological Assessment Resources, Inc. 16204 N. Florida Ave., Lutz ,FL 33549, 800-727-9329, parinc.com
Trauma Symptom Checklist for Young Children (TSCYC)

**Author(s):** John Briere  
**Year:** Available 2004

**Population/Age Group:** Children 3 – 12.

**Purpose:** This measure was designed to help address the gap in standardized trauma measures for children under age seven.

**Description:** This is a 90-item parent or caretaker report measure. It contains two scales to help determine the validity of caretaker reports and eight clinical scales designed to measure the psychological consequences of exposure to trauma. Like other symptom measures, it does not gather data regarding specific trauma or “anchor” events. The eight scales are 1) Posttraumatic stress-Intrusion; 2) Posttraumatic stress-Avoidance, 3) Posttraumatic stress- Arousal; (A composite scale Posttraumatic stress-Total), 4) Sexual concerns, 5) Dissociation, 6) Anxiety, 7) Depression, and 8) Anger/Aggression. It also has an item assessing the hours of weekly contact between the respondent and the child.

**Psychometrics Properties:** Findings reported on a multi-site analysis suggest good internal reliability with Alpha ranging from .81 for sexual concerns to .93 for PTSD-Total, with an average of .87 across all scales (Briere et. al, 2001). The authors report good construct validity for the scales measuring post-traumatic stress, sexual concerns and dissociation, but not for the three mood-related scales (anxiety, depression and anger). The latter were also not associated with abuse history in the study, and these scales may be less valid, despite good face validity. The mean age in the study exploring reliability and association with abuse experiences was 7.1 years.

A testing of the ability of the scales to discriminate between abused and non-abused children awaits convergent validity studies using a mixed sample of abused and non-abused children. The reported study found few rater variable effects, a promising sign. Data is not yet available on a normative population.

**Contact Information:** Psychological Assessment Resources, Inc. 16204 N. Florida Ave., Lutz, FL 33549, 800-727-9329, parinc.com
Weekly Behavior Report (WBR)

Author(s): Cohen & Mannarino

Year: 1996

Population/Age Group: Parents of sexual abused preschoolers.

Purpose: The purpose of the Weekly Behavior Report (WBR) is document the frequency of problem behaviors associated with sexual abuse. The total number of types and number of episodes a behavior occurred over a week’s time periods are recorded.

Description: The parent-checklist consisting of 21 items. There is one item for each type of problematic behavior. Empirical data, literature, and consultation were used to identify problem behaviors. During the course of week parents are required to record if a behavior (i.e. sleep difficulties, anxiety symptoms, inappropriate sexual behaviors) occurred one or more times. Parents record the exact number of times each behavior occurred and trace the occurrence in time blocks. Two scores can be obtained. First, a total score can be yield by summing all episodes, and, second, the type scores indicate the number of different behaviors that occurred at least once (Feindler, Rathurs, & Silver, 2003).

Psychometrics Properties: At two-week test-retest good reliability was found for type of behaviors (.81) and number of behaviors (.88). Among the sexually abused population good internal consistency was demonstrated (.80), and low (.76) for the control group. Low to moderate correlations were found between the WBR and the Child Behavior Checklist (r=.29 to r=.60).

Contact Information: Judith A. Cohen, The Center for Traumatic Stress in Children and Adolescent, Department of Psychiatry, Allegheny General Hospital, 4 Allegheny Center, 8th Floor, Pittsburgh, PA 15212, 412-330-4328, jcohen1@wpahs.org
### Child & Adolescent Trauma Measures

#### Both Exposure and Symptoms Measures

<table>
<thead>
<tr>
<th>Measure</th>
<th>Author(s)</th>
<th>Construct(s) Measured</th>
<th>Format</th>
<th>Age Group</th>
<th>Time to Administer (minutes)</th>
<th>Corresponds to DSM Criteria</th>
<th>Published Psychometrics</th>
<th>Cost / Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescent Self-Report Trauma Questionnaire</td>
<td>Horowitz, Weine &amp; Jekel</td>
<td>Violence</td>
<td>Self-Report</td>
<td>12-21</td>
<td>20</td>
<td>YES</td>
<td>YES</td>
<td>No Cost <a href="mailto:smweine@uic.edu">smweine@uic.edu</a></td>
</tr>
<tr>
<td>Childhood PTSD Interview Child (CPTSDI-C)</td>
<td>Fletcher</td>
<td>PTSD</td>
<td>Interview</td>
<td>7-18</td>
<td>30</td>
<td>YES</td>
<td>YES</td>
<td>No Cost <a href="mailto:kenneth.fletcher@umassmed.edu">kenneth.fletcher@umassmed.edu</a></td>
</tr>
<tr>
<td>Parent (CPTSDI-P)</td>
<td></td>
<td></td>
<td>Parent</td>
<td>30-60</td>
<td></td>
<td></td>
<td>YES</td>
<td></td>
</tr>
<tr>
<td>Children’s PTSD Inventory</td>
<td>Saigh</td>
<td>PTSD</td>
<td>Interview</td>
<td>7-18</td>
<td>5 (no history) 15-20 (w/ history)</td>
<td>YES</td>
<td>YES</td>
<td>43.00 for 25 psychcorp.com</td>
</tr>
<tr>
<td>My Worst Experience Scale (MWES)</td>
<td>Hyman, Snook, Berna, DuCette &amp; Kohr</td>
<td>PTSD</td>
<td>Self-Report</td>
<td>9-18</td>
<td>20-30</td>
<td>YES</td>
<td>YES</td>
<td>115.00 / Kit wpspublish.com</td>
</tr>
<tr>
<td>UCLA PTSD Index for DSM-IV (Child, Adolescent, Parent)</td>
<td>Rodriguez, Steinberg, Pynoos</td>
<td>PTSD</td>
<td>Self-Report</td>
<td>Children 7-12 Adolescents 13 + Parent</td>
<td>20</td>
<td>YES</td>
<td>YES</td>
<td>No Cost rpynoos.mednet.ucla.edu</td>
</tr>
<tr>
<td>When Bad Things Happen Scale (WBTH)</td>
<td>Fletcher</td>
<td>PTSD</td>
<td>Self-Report</td>
<td>8-13</td>
<td>10-20</td>
<td>YES</td>
<td>YES</td>
<td>No Cost <a href="mailto:kenneth.fletcher@umassmed.edu">kenneth.fletcher@umassmed.edu</a></td>
</tr>
<tr>
<td>Abusive Sexual Exposure Scale (ASES)</td>
<td>Spaccarelli</td>
<td>Sexual Abuse</td>
<td>Self-Report</td>
<td>Children &amp; Adolescents</td>
<td>N/A</td>
<td>NO</td>
<td>YES</td>
<td>N/A</td>
</tr>
<tr>
<td>Anatomical Doll Questionnaire (ADQ)</td>
<td>Levy, Markovic Kalinowski, Ahart, &amp; Torres</td>
<td>Sexual Abuse</td>
<td>Interview</td>
<td>2-7</td>
<td>N/A</td>
<td>NO</td>
<td>YES</td>
<td>N/A</td>
</tr>
<tr>
<td>Attributions for Maltreatment Interview (AFMI)</td>
<td>McGee &amp; Wolfe</td>
<td>Hostile Maltreatment</td>
<td>Interview</td>
<td>Adolescents</td>
<td>N/A</td>
<td>NO</td>
<td>YES</td>
<td>No Cost <a href="mailto:vicky.wolfe@lhsc.on.ca">vicky.wolfe@lhsc.on.ca</a></td>
</tr>
<tr>
<td>Checklist of Sexual Abuse and Related Stressors (C-SARS)</td>
<td>Spaccarelli</td>
<td>Sexual Abuse</td>
<td>Self-Report</td>
<td>Children &amp; Adolescents</td>
<td>N/A</td>
<td>NO</td>
<td>YES</td>
<td>N/A</td>
</tr>
<tr>
<td>Checklist for Child Abuse Evaluation (CCAE)</td>
<td>Petty</td>
<td>Abuse &amp; Neglect</td>
<td>Interview</td>
<td>Children &amp; Adolescents</td>
<td>N/A</td>
<td>NO</td>
<td>NO</td>
<td>126.00 Manual &amp; 25 checklists parinc.com</td>
</tr>
</tbody>
</table>
## History of Exposure to Trauma Measures

<table>
<thead>
<tr>
<th>Measure</th>
<th>Author(s)</th>
<th>Construct(s) Measured</th>
<th>Format</th>
<th>Age Group</th>
<th>Time to Administer (minutes)</th>
<th>Corresponds to DSM Criteria</th>
<th>Published Psychometrics</th>
<th>Cost / Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Abuse and Neglect Interview Schedule-Revised (CANIS-R)</td>
<td>Ammerman, Van Hasselt &amp; Herson</td>
<td>Maltreatment &amp; Abuse</td>
<td>Parent Interview</td>
<td>Children &amp; Adolescents</td>
<td>45</td>
<td>NO</td>
<td>YES</td>
<td>N/A <a href="mailto:robert.ammerman@chmcc.org">robert.ammerman@chmcc.org</a></td>
</tr>
<tr>
<td>Child Sexual Behavior Inventory (CSBI-I)</td>
<td>Friedrich</td>
<td>Sexual Abuse/ Sexual Behavior</td>
<td>Parent-Report</td>
<td>2-12</td>
<td>10-13</td>
<td>NO</td>
<td>YES</td>
<td>139.00 Manual &amp; 50 Booklets partme.com</td>
</tr>
<tr>
<td>Childhood Trauma Questionnaire (CTQ)</td>
<td>Bernstein &amp; Fink</td>
<td>Abuse &amp; Neglect</td>
<td>Self-Report</td>
<td>12 and older</td>
<td>5</td>
<td>NO</td>
<td>YES</td>
<td>105.00 25 Copies &amp; Manual psychcorp.com</td>
</tr>
<tr>
<td>History of Victimization Form (HVF)</td>
<td>Wolfe, Wolfe, Gentile &amp; Bourdeau</td>
<td>Maltreatment &amp; Abuse</td>
<td>Self-Report</td>
<td>Children</td>
<td>N/A</td>
<td>NO</td>
<td>YES</td>
<td>No cost <a href="mailto:vicke.wolfe@lhsc.on.ca">vicke.wolfe@lhsc.on.ca</a></td>
</tr>
<tr>
<td>Lifetime Incidence of Exposure to Traumatic Events (LITE)- Students &amp; Parents</td>
<td>Greenwald</td>
<td>Trauma</td>
<td>Self-Report Parent-Report</td>
<td>8 and older</td>
<td>10</td>
<td>NO</td>
<td>YES</td>
<td>Each form 12.00/ 5 Sidran.org</td>
</tr>
<tr>
<td>Survey of Children’s Exposure to Community Violence</td>
<td>Richters &amp; Saltzman</td>
<td>Exposure to Community Violence</td>
<td>Parent-Report</td>
<td>6-10</td>
<td>N/A</td>
<td>NO</td>
<td>YES</td>
<td>No Cost <a href="mailto:jrichter@nih.gov">jrichter@nih.gov</a></td>
</tr>
<tr>
<td>Traumatic Events Screening Inventory (TESI) Self-Report Revised</td>
<td>Ippen, Ford, Racusin, Acker Bosquet, Rogers, Ellis, Schiffman, Ribbe, Cone, Lukovitz &amp; Edwards</td>
<td>Lifetime Exposure To Traumatic Events</td>
<td>Self-Report Parent-Report or Interview</td>
<td>6-18</td>
<td>20-30</td>
<td>YES</td>
<td>NO</td>
<td>No Cost <a href="mailto:neptsd@neptsd.org">neptsd@neptsd.org</a></td>
</tr>
<tr>
<td>Parent-Report Revised</td>
<td></td>
<td></td>
<td>Parent-Report or Interview</td>
<td>8 or younger</td>
<td>20-30</td>
<td>YES</td>
<td>NO</td>
<td></td>
</tr>
</tbody>
</table>
## Impact of Trauma – Symptoms and/or Distress Indices
### PTSD and Dissociative Measures

<table>
<thead>
<tr>
<th>Measure</th>
<th>Author(s)</th>
<th>Construct(s) Measured</th>
<th>Format</th>
<th>Age Group</th>
<th>Time to Administer (minutes)</th>
<th>Corresponds to DSM Criteria</th>
<th>Published Psychometrics</th>
<th>Cost / Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescent Dissociative Experience Survey (A-DES)</td>
<td>Armstrong, Putnam &amp; Carlson</td>
<td>Normal &amp; Pathological Dissociation</td>
<td>Self-Report</td>
<td>11-18</td>
<td>15-30</td>
<td>NO</td>
<td>YES</td>
<td>3.00 for Printing &amp; Mailing</td>
</tr>
<tr>
<td>Child and Adolescent Psychiatric Assessment (CAPA-C)</td>
<td>Angold, Cox, Prendergast, Rutter &amp; Simonoff</td>
<td>Symptoms for Psychiatric Diagnoses</td>
<td>Interview</td>
<td>9-18</td>
<td>90</td>
<td>YES</td>
<td>YES</td>
<td>65.00</td>
</tr>
<tr>
<td>The Life Events/Posttraumatic Stress Module of CAPA-C</td>
<td>Putnam</td>
<td>Dissociative Symptoms</td>
<td>Parent-Report</td>
<td>5-12</td>
<td>5</td>
<td>NO</td>
<td>YES</td>
<td>No Cost</td>
</tr>
<tr>
<td>Child Dissociative Checklist (CDC)</td>
<td>Putnam</td>
<td>Dissociative Symptoms</td>
<td>Parent-Report</td>
<td>5-12</td>
<td>5</td>
<td>NO</td>
<td>YES</td>
<td>No Cost</td>
</tr>
<tr>
<td>Child PTSD Symptom Scale (CPSS)</td>
<td>Foa, Johnson, Feeny &amp; Tredwell</td>
<td>PTSD Symptoms</td>
<td>Self-Report</td>
<td>8-18</td>
<td>15</td>
<td>YES</td>
<td>YES</td>
<td>No Cost</td>
</tr>
<tr>
<td>Post-Traumatic Symptoms (PROPS)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child Reaction to Traumatic Events Scale (CRTES)</td>
<td>Jones</td>
<td>Psychological Response to Stressful Life</td>
<td>Self-Report</td>
<td>8-12</td>
<td>5-10</td>
<td>YES</td>
<td>YES</td>
<td>No Cost</td>
</tr>
<tr>
<td>Clinician-Administered PTSD Scale for Children &amp; Adolescents (CAPS-CA)</td>
<td>Nader, Krieger, Blake, Pynoos,</td>
<td>Stress, Trauma Adaptation &amp; PTSD</td>
<td>Interview</td>
<td>7-18</td>
<td>30-120</td>
<td>YES</td>
<td>YES</td>
<td>No Cost National for PTSD</td>
</tr>
<tr>
<td>Los Angeles Symptom Checklist (LASC)</td>
<td>Foy, King &amp; Resnick</td>
<td>PTSD</td>
<td>Interview</td>
<td>Adolescents &amp; Adults</td>
<td>10-20</td>
<td></td>
<td>YES</td>
<td>No Cost</td>
</tr>
</tbody>
</table>
### Impact of Trauma – Symptoms and/or Distress Indices

#### Multiple Trauma Symptom Measures

<table>
<thead>
<tr>
<th>Measure</th>
<th>Author(s)</th>
<th>Construct(s) Measured</th>
<th>Format</th>
<th>Age Group</th>
<th>Time to Administer (minutes)</th>
<th>Corresponds to DSM Criteria</th>
<th>Published Psychometrics</th>
<th>Cost / Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Angie/Andy Cartoon Trauma Scale (ACTS)</td>
<td>Praver, Pelcovitz, &amp; Deguireppe</td>
<td>PTSD, Violence &amp; Abuse</td>
<td>Self-Report</td>
<td>6-12</td>
<td>45</td>
<td>NO</td>
<td>YES</td>
<td>36.00</td>
</tr>
<tr>
<td>Children's Impact of Traumatic Events Scale Revised (CITES-R)</td>
<td>Wolfe, Gentile Michienzi, Sas &amp; Wolfe</td>
<td>PTS, Eroticism Perceptions of Support &amp; Abuse</td>
<td>Interview</td>
<td>8-16</td>
<td>20-40</td>
<td>YES</td>
<td>YES</td>
<td>No Cost</td>
</tr>
<tr>
<td>Feelings and Emotions Experienced During Sexual Abuse (FEEDSA)</td>
<td>Wolfe &amp; Birt</td>
<td>Emotional Reactions to Sexual Abuse</td>
<td>Self-Report</td>
<td>Children</td>
<td>N/A</td>
<td>YES</td>
<td>YES</td>
<td>No Cost</td>
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<td>Negative Appraisals of Sexual Abuse Scale (NASAS)</td>
<td>Spaccarelli</td>
<td>Negative Cognitive Appraisals Associated with Sexual Abuse</td>
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<td>Pediatric Emotional Distress Scale (PEDS)</td>
<td>Saylor &amp; Swenson</td>
<td>Symptoms Following a Stressful/ Traumatic Event</td>
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<td>Sexual Abuse Fear Evaluation (SAFE)</td>
<td>Wolfe &amp; Wolfe</td>
<td>Abuse-Related Fears</td>
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<td>Trauma Symptom Checklist for Children (TSCC)</td>
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<td>Posttraumatic Stress, PTSD Symptoms</td>
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<td>Trauma Symptom Checklist for Young Children (TSCYC)</td>
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<td>Caretaker-Report</td>
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<td>Weekly Behavior Report (WBI)</td>
<td>Cohen &amp; Mannarino</td>
<td>Behavior Associated with Sexual Abuse</td>
<td>Parent-Report</td>
<td>Preschool aged Children</td>
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References


Epidemiology, Department of Psychiatry and Behavioral Sciences, Duke University Medical Center.


Fletcher, K. (2002). Instructions for use of four measures of childhood PTSD and the Dimensions of Stressful Events (DOSE) Rating Scale., Psychiatry Department, University of Massachusetts Medical Center.

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