

Trauma Informed Screening Tools

OVERVIEW-

Post-traumatic stress disorder symptoms typically start within three months of a traumatic event. In a small number of cases, though, PTSD symptoms may not appear until years after the event. Post-traumatic stress disorder symptoms are generally grouped into three types: intrusive memories, avoidance and numbing, and increased anxiety or emotional arousal (hyperarousal).¹

Post-traumatic stress disorder symptoms can come and go. You may have more post-traumatic stress disorder symptoms when things are stressful in general, or when you run into reminders of what you went through. Screening is important to help identify, understand, and treat the symptoms of traumatic stress.

PICKING SCREENING TOOLS-

Checklist and screenings are to be used as a prompt for the worker to explore and understand how trauma may be a factor in impacting a person's well-being or ability to function. The checklist is to be used as a guide to consider whether a trauma specific mental health assessment and services should be considered.

Important considerations:

- Non-traumatized children and adults may present one or more of these behaviors depending on various factors such as personality, temperament, intelligence, maturity (or lack thereof), media exposure, mental illness, or modeling.
- Non-traumatized children and adults may present with one or more of these behaviors according to their cultural norms and traditions.
- Corroborating with other professionals is necessary to get a complete picture and provide the greatest response and referral.

SCREENING VS ASSESSMENT –

- Trauma-informed screening refers to a *brief, focused inquiry* to determine whether an individual has experienced specific traumatic events or reactions to trauma and indicate need for further assessment by clinical/mental health professional. ²
- Trauma assessment is a more *in-depth exploration* of the nature and severity of the traumatic events, the impact of those events, current trauma-related symptoms and functional impairment. Assessment informs treatment. ²

REFERENCES

1. Mayo Clinic. Diseases and Conditions Symptoms for Post Traumatic Stress Disorder. Accessed February 19, 2014. <http://www.mayoclinic.org/diseases-conditions/post-traumatic-stress-disorder/basics/symptoms/con-20022540>
2. http://www.ncswtraumaed.org/wp-content/uploads/2011/07/Child-and-Adolescent-Trauma-Measures_A-Review-with-Measures.pdf
3. Conradi, Lisa, Henry, Jim, and Kisiel, Cassandra. "Trauma Screening and Assessment Measures for Child Welfare." *The National Child Traumatic Stress Network*. Publisher of Website, 17 May 2012 article. Web. Retrieved May 21, 2014. <http://learn.nctsn.org/course/view.php?id=72>.

Trauma Informed Screening Tools for ages (13-18)

CONSIDERATIONS: This age group is at a critical period of brain development for the areas responsible for executive functioning skills that assist with self-regulation. Traumatic exposure at this stage in development may result in other symptoms that make the past trauma sometimes overlooked such as substance abuse, eating disorders, depression and a wide variety of other symptoms associated with lack of inhibition and self-regulation (Cook et al., 2003). Adolescents may vary widely in response to a traumatic experience including the duration after event in which there is a response, and whether response is external or internal in nature. *Symptoms you may see in this age group include: "Anxiety, fear, and worry about safety of self and others, worry about recurrence or consequences of violence, changes in behavior including angry outbursts and/or aggression, change in academic performance, decreased attention and/or concentration, increase in activity level, absenteeism and increase in impulsivity, risk-taking behavior, increased risk for substance abuse, and negative impact on issues of trust and*

SCREENING TOOLS- recommended because of empirical base, ability to identify for further assessment, developmental appropriateness and feasible time to complete. Age ranges are also specified for intended use of each tool. Some tools can be child completed or caregiver completed.

- [Traumatic Events Screening Inventory- Self Report Revised \(TESI-SRR, ages 6-18, 24 items\)](#)
- [Traumatic Events Screening Inventory- Parent Report Form Revised \(TESI-PRR, ages 6-18, 24 items\)](#)
- [Traumatic Events Screening Inventory-Interview](#) is for clinicians or provider use
- **Childhood Trauma Questionnaire (CTQ)** (ages 12 to 18)-Can be purchased at this [link](#).
- Southwest Michigan Children's Trauma Assessment Center, [Screening Checklist: Identifying Children at Risk \(ages 6-18\)](#). Can be completed by child, caregiver, or by provider with interview.
- [Young Child PTSD Checklist- Child Version \(ages 7-17, 17 items\)](#)- Can be completed by child or caregiver.

FOLLOWUP/REFERRAL:

- Ensure that type/range of traumatic exposures is considered in follow-up.
- Ensure that strengths are also considered for adolescent and caregiver(s) involved.
- Promote family engagement in treatment planning as a protective factor.
- Consider level of risk from screening to match to intensity of follow up assessments and treatment.

REFERENCES

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2. Cook, Alexandra; Blaustein, Margaret; Spinazzola, Joseph et al., eds. (2003). *Complex Trauma in Children and Adolescents: White Paper from the National Child Traumatic Stress Network, Complex Trauma Task Force*. [National Child Traumatic Stress Network](#). Retrieved 2014 Oct-15
3. http://www.ncswtraumaed.org/wp-content/uploads/2011/07/Child-and-Adolescent-Trauma-Measures_A-Review-with-Measures.pdf
4. Ribbe, D. (1996). Psychometric review of Traumatic Event Screening Instrument for Children (TESI-C). In B. H. Stamm (Ed.), *Measurement of stress, trauma, and adaptation* (pp. 386-387). Lutherville, MD: Sidran Press.
5. *National Child Traumatic Stress Network Schools Committee. (October 2008). Child Trauma Toolkit for Educators. Los Angeles, CA & Durham, NC: National Center for Child Traumatic Stress.*
6. Ippen, C. G., Ford, J., Racusin, R., Acker, M., Bosquet, M., Rogers, K., Ellis, C., Schiffman, J., Ribbe, D., Cone, P., Lukovitz, M., & Edwards, J. (2002). *Traumatic Events Screening Inventory - Parent Report Revised*.