# **Trauma Module (5)**

**Question to Consider for this Module:** How is the individual responding to traumatic events? **Please** rate the highest level from the past 30 days.

# **Traumatic Stress Symptoms**

**AFFECTIVE/PHYSICAL DYSREGULATION** - This item rates the individual's ability to respond to the demands of experience with a range of emotions in a way that is socially appropriate, flexible enough to allow for spontaneous reaction and able to delay reaction as necessary. Consider both facial affect and physical movement here.

### **Questions to Consider**

- → Does the individual have reactions that seem larger or smaller than appropriate to the situation?
- → Does the individual have extreme or unchecked reactions to situations?

# **Ratings & Definitions**

- **0** Individual has no problems with affective or physical regulation.
- 1 Individual has mild to moderate problems with affect or physical regulation.
- Individual has severe problems with affect or physical regulation but is able to control affect at times. Problems with regulation interfere with individual's functioning in some life domains.
- 3 Individual unable to regulate affect.

**INTRUSIONS** - This item rates the frequency with which the individual experiences thoughts of his/her trauma that s/he cannot control and how much/how little these thoughts impact his/her ability to function.

#### **Questions to Consider**

- Does the individual think about the traumatic event when s/he does not want to?
- → Do reminders of the traumatic event bother the individual?

### **Ratings & Definitions**

- ${\bf 0}$  There is no evidence that the individual experiences intrusive thoughts of trauma.
- 1 Individual experiences some intrusive thoughts of trauma but it does not affect his/her functioning.
- 2 Individual experiences intrusive thoughts that interfere in his/her ability to function in some life domains.
- 3 Individual experiences repeated and severe intrusive thoughts of trauma.

**TRAUMATIC GRIEF** - This rating describes the level of traumatic grief the individual is experiencing due to death or loss /separation from significant caregivers, siblings, or other significant figures.

# **Questions to Consider**

- → Is the trauma reaction of the individual based on a grief/loss experience?
- → How much does the individual's reaction to the loss impact his/her functioning?

- There is no evidence that the individual is experiencing traumatic grief or separation from the loss of significant caregivers. Either the individual has not experienced a traumatic loss (e.g., death of a loved one) or the individual has adjusted well to separation.
- Individual is experiencing a mild level of traumatic grief due to death or
   loss/separation from a significant person in a manner that is expected and/or appropriate given the recent nature of loss or separation.
- Individual is experiencing a moderate level of traumatic grief or difficulties with separation in a manner that impairs functioning in some but not all areas. This could include withdrawal or isolation from others or other problems with day-to-day functioning.
- Individual is experiencing significant traumatic grief reactions. Individual exhibits impaired functioning across several areas (e.g. interpersonal relationships, school) for a significant period of time following the loss or separation. Symptoms require immediate or intensive intervention.

**REEXPERIENCING** - These symptoms consist of intrusive memories or reminders of traumatic events, including nightmares, flashbacks, intense reliving of the events, and repetitive play with themes of specific traumatic experiences. These symptoms are part of the DSM criteria for PTSD.

#### **Questions to Consider**

- → Do sights, verbal cues, smells, sounds, etc. trigger the individual to feel as though they are suddenly immersed in his/her traumatic experience once again?
- → Does the individual have nightmares related to the traumatic experience?
- → Are flashbacks part of the individual's experience?

# **Ratings & Definitions**

- **0** This rating is given to an individual with no evidence of intrusive symptoms.
- This rating is given to an individual with some problems with intrusions, including occasional nightmares about traumatic events.
- symptoms. This individual may have recurrent frightening dreams with or without recognizable content or recurrent distressing thoughts, images, perceptions or memories of traumatic events. This individual may exhibit trauma-specific reenactments through repetitive play with themes of trauma or intense physiological reactions to exposure to traumatic cues.

This rating is given to an individual with moderate difficulties with intrusive

This rating is given to an individual with severe intrusive symptoms. This individual may exhibit trauma-specific reenactments that include sexually or physically traumatizing other individual or sexual play with adults. This individual may also exhibit persistent flashbacks, illusions or hallucinations that make it difficult for the individual to function.

**HYPERAROUSAL** - These symptoms include difficulty falling or staying asleep, irritability or outbursts of anger, difficulty concentrating, hypervigilance and/or exaggerated startle response. Individual may also commonly manifest physical symptoms such as stomachaches and headaches. These symptoms are part of the DSM criteria for PTSD.

#### **Questions to Consider**

- → Is the individual always on edge?
- → Can the individual fall/stay asleep?
- → Is the individual easily startled?

- This rating is given to an individual with no evidence of hyperarousal symptoms.
- This rating is given to an individual who exhibits mild hyperarousal that does not significantly interfere with his or her day-to-day functioning. Individual may also occasionally manifest physical symptoms such as stomachaches and headaches.
- This rating is given to an individual with moderate symptoms of hyperarousal. The individual may exhibit one significant symptom or a combination of two or more of the following symptoms: difficulty falling or staying asleep, irritability or outbursts of anger, difficulty concentrating, hypervigilance and/or exaggerated startle response. Individual may also commonly manifest physical symptoms such as stomachaches and headaches.
- This rating is given to an individual who exhibits multiple and or severe hyperarousal symptoms including but not limited to difficulty falling or staying asleep, irritability or outbursts of anger, difficulty concentrating, hypervigilance and/or exaggerated startle response. The intensity or frequency of these symptoms are distressing for the individual and lead to frequent problems with day-to-day functioning.

**AVOIDANCE** - These symptoms include efforts to avoid stimuli associated with traumatic experiences. These symptoms are part of the DSM criteria for PTSD.

#### **Questions to Consider**

→ Does the individual make specific and concerted attempts to avoid sights, sounds, smells, etc. that are related to his/her trauma experience?

# **Ratings & Definitions**

**0** This rating is given to an individual with no evidence of avoidance symptoms.

This rating is given to an individual who exhibits some avoidance. This individual may exhibit one primary avoidant symptom, including efforts to avoid thoughts, feelings or conversations associated with the trauma.

This rating is given to an individual with moderate symptoms of avoidance. In addition to avoiding thoughts or feelings associated with the trauma, the individual may also avoid activities, places, or people that arouse recollections of the trauma.

This rating is given to an individual who exhibits significant or multiple avoidant symptoms. This individual may avoid thoughts and feelings as well as situations and a person associated with the trauma and is unable to recall important aspects of the trauma.

**NUMBING** - These symptoms include numbing responses that are part of the DSM criteria for PTSD. These responses were not present before the trauma.

# **Questions to Consider**

- → Does the individual seem to experience a normal range of emotions?
- → Does the individual have a normal range of affect?

- **0** This rating is given to an individual with no evidence of numbing responses.
- This rating is given to an individual who exhibits some problems with numbing.

  1 This individual may have a restricted range of affect or be unable to express or experience certain emotions (e.g., anger or sadness).
  - This rating is given to an individual with moderately severe numbing responses.
- This individual may have a blunted or flat emotional state or have difficulty experiencing intense emotions or feel consistently detached or estranged from others following the traumatic experience.
- This rating is given to an individual with significant numbing responses or multiple symptoms of numbing. This individual may have a markedly diminished interest or participation in significant activities and a sense of a foreshortened future.

**DISSOCIATION** - Symptoms included in this dimension are daydreaming, spacing or blanking out, forgetfulness, fragmentation, detachment, and rapid changes in personality often associated with traumatic experiences. This dimension may be used to rate dissociative disorders (e.g., Dissociative Disorder NOS, Dissociative Identity Disorder) but can also exist when other diagnoses are primary (e.g., PTSD, depression).

#### **Questions to Consider**

- Does the individual seem to lose touch with the present moment sometimes?
- → Is the individual frequently forgetful or caught daydreaming?

#### **Ratings & Definitions**

**0** This rating is given to an individual with no evidence of dissociation.

that is specified "with dissociative features."

- This rating is given to an individual with minor dissociative problems, including some emotional numbing, avoidance or detachment, and some difficulty with forgetfulness, daydreaming, spacing or blanking out.
  - This rating is given to an individual with a moderate level of dissociation. This can include amnesia for traumatic experiences or inconsistent memory for trauma (e.g., remembers in one context but not another), more persistent or perplexing difficulties with forgetfulness (e.g., loses things easily, forgets basic information), frequent daydreaming or trance-like behavior, depersonalization and/or derealization. This rating would be used for someone who meets criteria for Dissociative Disorder Not Otherwise Specified or another diagnosis
- This rating is given to an individual with severe dissociative disturbance. This can include significant memory difficulties associated with trauma that also impede day to day functioning. Individual is frequently forgetful or confused about things s/he should know about (e.g., no memory for activities or whereabouts of previous day or hours). Individual shows rapid changes in personality or evidence of distinct personalities. Individual who meets criteria for Dissociative Identity Disorder or a more severe level of Dissociative Disorder NOS would be rated here.

**TIME BEFORE TREATMENT** - This item identifies the amount of time that passed between the trauma and the beginning of treatment.

# **Questions to Consider**

→ How long after the trauma occurred did the individual begin receiving treatment?

# **Ratings & Definitions**

- Trauma was recognized and treatment started within one month of initial experience.
- 1 Trauma was recognized and treatment started within one to six months of initial experience.
- Trauma was recognized and treatment started within six months to one year of the initial experience.
- 3 Trauma was not recognized nor treated for more than one year after the initial experience.

# **Sexual Abuse Sub-Module (5a)**

**EMOTIONAL CLOSENESS OF PERPETRATOR -** This item defines the relationship between the individual and the perpetrator of sexual abuse.

#### **Questions to Consider**

- → Did the individual know the perpetrator?
- Was the perpetrator a family member?

- **0** Perpetrator was a stranger at the time of the abuse.
- Perpetrator was known to the individual at the time of event but only as an acquaintance.
- Perpetrator had a close relationship with the individual at the time of the event but was not an immediate family member.
- Perpetrator was an immediate family member (e.g. parent, sibling).

# **FREQUENCY OF ABUSE** - This item identifies the frequency of sexual abuse.

#### **Questions to Consider**

→ How often did the abuse occur?

## **Ratings & Definitions**

- **0** Abuse occurred only one time.
- Abuse occurred two times.
- 2 Abuse occurred two to ten times.
- Abuse occurred more than ten times.

# **DURATION** - This item identifies the length of time during which the abuse occurred.

#### **Questions to Consider**

→ For how long did the abuse occur?

# **Ratings & Definitions**

- **0** Abuse occurred only one time.
- 1 Abuse occurred within a six month time period.
- 2 Abuse occurred within a six-month to one year time period.
- Abuse occurred over a period of longer than one year.

### PHYSICAL FORCE - This item rates the severity of physical force or violence used during episodes of abuse.

#### **Questions to Consider**

→ Was there physical violence or the threat of physical violence used during the abuse?

#### **Ratings & Definitions**

- **0** No physical force or threat of force occurred during the abuse episode(s).
- 1 Sexual abuse was associated with threat of violence but no physical force.
- 2 Physical force was used during the sexual abuse.
- 3 Significant physical force/violence was used during the sexual abuse. Physical injuries occurred as a result of the force.

**REACTIONS TO DISCLOSURE** - This item rates the level of support the individual received from family after disclosing the sexual abuse.

#### **Questions to Consider**

- → Was the family supportive of the individual during the disclosure process?
- → Is the family aware of the abuse?

- All significant family members are aware of the abuse and supportive of the individual coming forward with the description of his/her abuse experience.
  - Most significant family members are aware of the abuse and supportive of the individual for coming forward.
- One or two family members may be less supportive. Parent may be experiencing anxiety/depression/guilt regarding abuse.
- Significant split among family members in terms of their support of the individual for coming forward with the description of his/her experience.
- 3 Significant lack of support from close family members of the individual for coming forward with the description of his/her abuse experience. Significant relationship (e.g. parent, care-giving grandparent) is threatened.