Measuring Exposure to Trauma, PTSD, and Subclinical PTSD in Large Scale Surveys

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Considerations in Measurement:

- Purpose of Measurement (Adults or Children)
- Length of Time Available
- Quality of Existing Measures (e.g. Sensitivity/Specificity)
- Self or Clinician or Lay Administered
- Extent of Psychopathology to be Observed (Comorbidity)
- Measures of Functioning, Impairment, Quality of Life
- Comparability to Other Surveys (Present & Past)
- Time & Costs to Train Site Investigators.
- Fidelity and Drift of Measures over Time.
- Stability of Measures Selected in Treatment Settings.
- Internal Consistency of Measures of Constructs (PTSD).
Self-Report Measures for Criterion A (Exposure)

- **Traumatic Life Events Questionnaire (TLEQ; Kubany et al., 2000)**
  - Assesses occurrence of 23 events (22 specific events and “other”) consistent with DSM-IV
  - For each event, rates number of times the event occurred
  - Good test-retest reliability

- **Traumatic Events Questionnaire (TEQ; Vrana & Lauterbach, 1994)**
  - Assesses 11 specific traumatic events consistent with DSM-IV
  - Good, quick screen for traumatic events
  - High test-retest reliability

- **Trauma History Questionnaire (THQ; Green, 1996)**
  - 24 items followed by probes to assess frequency and age at the time
  - DSM-IV symptoms
  - Moderate to high test-retest reliability
Exposure (cont.)

- Life Events Checklist (LEC; Gray et al., 2004)*
  - Precedes CAPS, but is used as a stand-alone measure too
  - Assesses 16 events and other.
  - Adequate psychometric properties and convergent validity
- Stressful Life Events Screening Questionnaire (SLESQ; Goodman et al., 1988)
  - 13-item report on lifetime exposure to traumatic events
  - Respondent reports age at trauma, and probes vary to provide more detail on the nature of the event
  - English and Spanish versions

*Revised for DSM-5
Exposure (cont.)

- Traumatic Stress Schedule (TSS; Norris, 1990)
  - Screening measure for assessing exposure & response
  - Measures 10 events based on DSM-III-R, plus 12 symptoms
  - English and Spanish versions
  - High test-retest correlation between English and Spanish version
  - Symptom portion moderately reliable
  - Useful as a quick screen, but not for PTSD diagnosis

- Trauma Assessment for Adults – Self Report (TAA; Resnick et al., 1996)
  - 17-item self-report measure that assesses 14 life events
  - Asks about presence of injury, perception of danger, and ages

- The Life Stressor Checklist – Revised (LSC-R; Wolfe et al., 1996)
  - Assesses 30 events
  - For all, with special focus on events relevant to women (i.e., abortion)
Exposure (cont.)

- **Trauma History Screen (THS; Carlson et al., 2011)**
  - Brief, 14-item measure on 13 event types and other
  - Dichotomous, frequency, and emotional rating
  - Assess age at time of event, actual or threat of death or injury, helplessness, dissociation, duration of distress, and distress level
  - Low reading level

- **Brief Trauma Questionnaire (BTQ; Schnurr et al., 1999)**
  - Assesses 10 traumatic events
  - Complete assessment of criterion A1
  - Good interrater reliability
Summary of Exposure Measures

• “Best” measure depends on intended purpose
• TSS, TEQ, BTQ, TAA, and THS are brief screens
• THQ and TLEQ aim to provide comprehensive trauma histories where length is not an issue
• SLESQ is in-depth on sexual trauma and IPV
• LSC-R does confine observations to trauma, but includes other seriously stressful events
Self-Report Measures That Closely Follow Criteria B-D

• PTSD Checklist, Civilian (PCL-C; Weathers et al., 1993)*
  ▫ 17 questions that ask how often they are bothered by each symptom in the previous month (DSM-IV)
  ▫ May be worded generally (PCL-C) or for specific event (PCL-S)
  ▫ In the public domain; Spanish
  ▫ High internal consistency and test-retest reliability, validity.

• Posttraumatic Stress Diagnostic Scale (PDS; Foa et al., 1997)
  ▫ 49-item measure of current (previous month) PTSD anchored to the single event that “bothers” them most (DSM-IV)
  ▫ Addresses criteria A-F
  ▫ Good agreement with SCID
  ▫ High test-retest reliability and internal consistency

*Revised for DSM-5
Symptom Measures (cont.)

- **Davidson Trauma Scale (DTS; Davidson et al., 1997)**
  - Assesses 17 symptoms, and each is rated for frequency and severity using a past-week time frame (DSM-IV)
  - Self-Rating
  - High internal consistency, high test-retest reliability, good sensitivity and specificity

- **Trauma Symptom Checklist (TSC-40; Elliot & Briere, 1992)**
  - 40-item measure of distress from sexual trauma occurring in child or adulthood
  - Rate frequency of symptom in the last two months
  - Intended exclusively for research purposes
  - High internal consistency
Symptom Measures (cont.)

• Modified PTSD Symptom Scale (MPSS-SR; Falsetti et al., 1993)
  ▫ 17-item measure that assesses the DSM-III-R symptoms of PTSD
  ▫ Modification of the PSS (Foa et al., 1993)
    • Not keyed to any specific event
  ▫ Rates frequency and intensity on 4-point scale
  ▫ Asks to identify what event the symptom corresponds to
  ▫ Good internal consistency and concurrent validity

• PTSD – Interview (PTSD-I; Watson et al., 1991)
  ▫ 17 items keyed to worst event (DSM-III-R)
  ▫ Designed for use by lay interviewers
  ▫ French and Spanish versions as well
  ▫ High test-retest reliability and internal consistency
Symptom Measures (cont.)

- National Women’s Study PTSD Module (Kilpatrick et al., 1989)
  - Derived from the Diagnostic Interview Schedule (DIS)
  - Designed for use by lay interviewers
  - 20 symptom items (yes/no), then dates of first and last experiences of those symptoms are recorded (DSM-IV)
  - Good concurrent validity, sensitivity, and specificity

- Purdue PTSD Scale – Revised (Lauterbach & Vrana, 1996)
  - 17-item measure keyed to single worst event (DSM-III-R)
  - Correlates well with multiple other measures
  - Internally consistent, good test-retest reliability, and support for convergent and discriminant validity
Symptoms (cont.)

- **Screen for Posttraumatic Stress Symptoms (SPTSS; Carlson, 2001)**
  - Made to provide a measure that does not require respondent to focus on a single event – or any event
    - May be useful for those who have experienced multiple traumas
  - 17 items match criteria of DSM-IV
  - High internal consistency, good evidence for validity

- **Self-Rating Inventory for PTSD (SRIP; Hovens et al., 2002)**
  - 22-item measure that assesses current symptoms without identifying specific experiences (DSM-IV)
  - Dutch and English versions available
  - Correlates with multiple scales
  - High internal consistency, and good specificity and sensitivity
Additional PTSD Scales

- **Composite International Diagnostic Interview – PTSD Module (CIDI; Kessler & Ustun, 2004)**
  - Includes a screening module and 40 sections that focus on diagnoses, functioning, treatment, risk factors, socio-demographic correlates, and methodological factors (DSM-IV)
  - Trained lay interviewers administer the questionnaire
  - Good internal consistency and validity

- **Impact of Event Scale – Revised (IES-R; Weiss & Marmar, 1996)**
  - 22-item self-report survey
  - Assesses subjective distress caused by traumatic events
  - Corresponds to 14/17 DSM-IV symptoms
  - Spanish version available
  - Use mean of scores instead of raw scores to compare to SCL-90-R
  - Not used to diagnose PTSD but gives overview of history of symptoms
  - Good internal consistency and test-retest reliability
Symptom Measures (cont.)

- **PTSD Symptom Scale – Interview (PSS-I; Foa et al., 1993)**
  - 17-item semi-structured interview assessing the presence and severity of PTSD symptoms related to a single traumatic event (DSM-IV)
  - Precursor of the PDS (Foa et al., 1997) discussed earlier
  - Brief and can be administered by a lay interviewer trained to recognize clinically traumatized respondent
  - Good internal consistency, test-retest reliability, and concurrent validity

- **Symptom Checklist – 90 PTSD Scales (Derogatis, 1977)**
  - **A. SCL-Supplemented PTSD (Ursano et al., 1995)**
    - 31 items selected on their relevance and assigned to B, C, and D
    - Self-report
    - DSM-IV guidelines, rather than a cutpoint, can be used to classify “probable PTSD”
    - Good sensitivity, high specificity
  - **B. CR-PTSD (Saunders et al., 1990)**
    - 28-item self-report scale that discriminates between crime victims with and without PTSD, derived from SCL-90 (DSM-III)
    - Can be administered without knowledge of trauma history
    - Used in many settings
    - High internal consistency
Symptom Measures (cont.)

- **Penn Inventory for PTSD (Hammarberg, 1992)**
  - 26-item self-report measure of severity or frequency of a feeling or thought (DSM-IV)
  - Developed for veterans but not specific to the military
  - Moderate-strong validity

- **Los Angeles Symptom Checklist (King et al., 1995)**
  - 43-item self report of PTSD and associated factors
  - Does not observe specific trauma
  - Observation of 17 DSM-IV symptoms
  - Can observe preliminary diagnosis, PTSD symptom severity, and global assessment of distress and adjustment issues that may be a consequence of a traumatic event
  - High internal consistency and test-retest reliability, acceptable convergent validity

- **Trauma Symptom Inventory (TSI; Briere, 1995)**
  - Not a measure of PTSD, but rather a global measure of trauma sequelae
  - 100-item self-report measure on a variety of symptoms
  - Corresponds to DSM-IV symptoms, but doesn’t specifically assess
  - Can be self-administered by anyone with a fifth-grad reading level
  - Moderate-strong evidence of validity
Symptom Measures

• **Distressing Events Questionnaire** (DEQ; Kubany et al., 2000)
  - 38-item self-report measure that assesses DSM-IV criteria
  - Asks respondent to indicate an event that causes them the most distress and rate distress (past month) for PTSD symptoms
  - 8th grade reading level
  - Strong convergent validity, high internal consistency, very good discriminant validity

• **Posttraumatic Symptom Scale** (PTSS; Holen, 1990)
  - 10- and 12-item self-report versions
  - Does not map to DSM posttraumatic symptoms
  - High internal consistency, moderate validity
Symptom Measures (cont.)

- **MMPI-PTSD PK (Keane, et al. 1985)**
  - 46-item self-report measure that discriminate between veterans who did and did not have diagnoses of PTSD
  - Does not explicitly measure DSM-IV criteria, but correlates high with symptoms
  - Used with veterans but there is nothing specific to military experience in the wording; can be used with other groups
  - High specificity, sensitivity, and concurrent validity

- **National Stress Events Survey (NSES; Kilpatrick et al., 2013)**
  - 28-item measure observing exposure to 25 specific and 3 “other” events
  - Self-administered
  - Assessed exposure to DSM-IV and DSM-5 Criterion A events, PTSD symptoms and distress or impairment associated with symptoms
  - Strong internal consistency & concurrent validity
Culturally Specific/ Cross-Culture Scales

- Harvard Trauma Questionnaire (HTQ; Mollica et al., 1992)
  - Traumatic events and symptoms included (Refugee Trauma Focus)
  - 17-item self-report measure on a range of stressors experienced by refugees
  - Additional 30 items for symptom portion, 16 correspond to DSM-IV and 14 included for other aspects of distress in Indochinese culture
  - Core PTSD should stay same but other questions based on cultural background
  - High internal consistency and test-retest reliability
  - Good sensitivity and specificity

- Revised Civilian Mississippi Scale (Keane, et al. 1988; Norris, 1992)
  - Created from Mississippi Scale for Combat-Related PTSD due to the measures strong psychometric characteristics
  - 30-item (28 from original, 2 from TSS) self-report measure according to DSM-IV symptoms
  - Spanish and English versions
  - Performs well as a continuous measure of PTS and validation stands out for use with Spanish-speaking populations
Measures Fully Updated for DSM-5

• PTSD Checklist for DSM-5 (PCL-5; Weathers et al., 2013)
  ▫ Most similar to the PCL-S (specific) version.
  ▫ There are no corresponding PCL-M or PCL-C versions of PCL-5.
  ▫ 20 items rated on how much bothered by symptoms on a scale from 0-4
  ▫ Based on DSM-5; change in rating scale

• Life Events Checklist for DSM-5 (LEC-5; Weathers et al., 2013)
  ▫ Very minimal changes
  ▫ Psychometrics currently not available for DSM-5

• Primary Care PTSD Screen (PC-PTSD; in process)
  ▫ Will be available in Spanish
Summary

• All scales show acceptable reliability and validity
• How should one choose which measure to use?
  ▫ Depends on what is important
    • In public domain
    • Some adhere to DSM-IV/DSM-5 while others have high content validity
    • Length: brief vs. extensive
    • Current symptoms (window) vs lifetime
• One scale from A and one from B-D?