Using Mental Health Screening Tools with Child Trauma Survivors

Children’s Advocacy Centers and Victim Service Organizations are often a first point of contact for families who have been impacted by child sexual abuse and other traumas. These entities play a key role in connecting youth with resources and supports to meet their needs. In many cases, this means making a mental health referral for further assessment and/or therapy. Screening tools can be a valuable source of information in determining which youth are at risk for mental health issues and would benefit from such a referral.

Below are frequently asked questions about screening tools, as well as a list of free tools for your consideration.

What is a mental health screening tool?

A screening tool is a brief checklist or questionnaire that helps to differentiate youth at high risk for mental health problems from youth at low risk. Screening tools are usually given to a population of individuals (such as all youth seen at a CAC) to identify those most likely to have mental health concerns that warrant intervention. Screening tools may focus on a specific area of concern, such as posttraumatic stress symptoms, or on more general mental health.

Screening tools typically yield a score that is used to determine whether a youth is at risk. The youth’s score is compared to a recommended “cut-off score,” which has been determined through research on how emotionally healthy youth and youth with certain mental health diagnosis typically respond to the screening tool.

What are the benefits of using a screening tool?

Screening tools:

- may reveal symptoms or concerns that the youth or family has not yet disclosed or that are not immediately evident to staff.
- offer a data-driven alternative to relying solely on the judgment and impressions of staff.
- provide information about the youth’s and caregiver’s perceptions of how the youth is doing, both in response to a trauma and in general.
- assist organizations with identifying youth likely to be most in need of treatment and triaging cases. This allows limited resources, including staff time and therapist availability, to be used wisely.

What are some important considerations when using screening tools?

A screening tool is a first step for identifying which youth are most likely to be struggling with posttraumatic stress or other mental health issues. However, it should never be used as the sole source of information for determining what services are needed or to make a diagnosis. Youth identified as at-risk should be referred to a mental health professional for further assessment.
Both youth and caregivers may under- or over-report symptoms. If a youth scores low on screening measures, but the youth or caregiver reports concerns or problems, a referral for mental health assessment should still be considered. Never rely solely on a screening tool to make decisions about referral.

Organizations should seek consultation with a qualified mental health professional who can provide guidance about appropriately using screening tools and consult with staff as needed about specific cases.

**What type of screening tools should we use?**

While some youth experience symptoms of Posttraumatic Stress Disorder following traumatic experiences, others develop symptoms of anxiety, depression, or behavior problems. Using a general symptom checklist in addition to a PTSD checklist can ensure that a range of possible difficulties is considered when screening youth.

**Who should complete the screening tools?**

If possible, have both the youth (if old enough) and a caregiver complete the screening tools. This increases the likelihood of identifying youth who could benefit from further assessment. For instance, a youth may minimize or deny difficulties, while his/her caregiver reports observing a high level of symptoms. Conversely, a youth may disclose symptoms of which the caregiver is unaware.

**What should we keep in mind when sharing the results with the client?**

In most cases, sharing the outcome of the screening with the youth and family can be useful. Share the overall score and how it compares to the recommended cut-off can provide a family with a general picture of how the youth seems to be doing. However, for confidentiality reasons it is generally not wise to provide a copy of the completed checklist to the family.

If the youth needs to be referred for further assessment/treatment, normalize the symptoms and difficulty that the youth is experiencing and emphasize that there are effective trauma therapies that can help youth recover. Provide a sense of hope! If few symptoms are reported, provide the family with information about future signs that could indicate a need for support.
The following are free symptom checklists that can be used as screening tools. Copies can be found at [http://www.episcenter.psu.edu/newvpp/tfcbt/evaluation-tools](http://www.episcenter.psu.edu/newvpp/tfcbt/evaluation-tools), under Screening Tools. Use of both a PTSD screen and a general mental health screen is recommended.

<table>
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<tr>
<th>PTSD Screening Tools</th>
<th>Age Range</th>
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<td><strong>Option 1</strong></td>
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| Child PTSD Symptom Scale for DSM-5 (CPSS-SR-5) | 8-18 years | Youth | Total Score ≥ 21  
  - 21-80: Moderate to Severe Symptoms  
  - ≥31: Probable Diagnosis |
| Young Child PTSD Checklist (YCPC) | 1-6 years | Caregiver | Total Symptom Score ≥12  
  - 12-25: Warrants clinical attention  
  - 26+: Probable PTSD |
| **Option 2**         |           |              |                                  |
| Child & Adolescent Trauma Screen (CATS) - Child Available in Spanish | 7-17 years | Youth | Total Score ≥ 15  
  - 15-20: Moderate distress  
  - 21+: Probable PTSD |
| Child & Adolescent Trauma Screen (CATS) – Caregiver Available in Spanish | 3-6 years 7-17 years | Caregiver | Total Score ≥12 for ages 3-6  
  - 12-14: Moderate distress  
  - 15+: Probable PTSD  
  Total Score ≥15 for ages 7-17  
  - 15-20: Moderate distress  
  - 21+: Probable PTSD |
| **General Mental Health Screening Tool** | | | |
| Strengths & Difficulties Questionnaire (SDQ) Available in many languages | 11-17 years | Youth | Total Difficulties ≥ 18  
  - 15-17: Slightly raised  
  - 18-40: High/Very High  
  Or, refer if a specific subscale is High/Very High |
| Strengths & Difficulties Questionnaire (SDQ) 3 versions based on age of child; available in many languages | 2-4 years 4-10 years 11-17 years | Caregiver | Ages 2-4: Total Difficulties ≥ 16  
  - 13-15: Slightly raised  
  - 16-40: High/Very High  
  Ages 4-17: Total Difficulties ≥ 17  
  - 14-16: Slightly raised  
  - 17-40: High/Very High  
  Or, refer if a specific subscale is High/Very High |