PTSD, CHILDREN, ADOLESCENTS AND THEIR FAMILIES

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A CLINICAL HANDBOOK / PRACTICAL THERAPIST MANUAL

For Assessing and Treating Adults with PTSD

Donald Meichenbaum, Ph. D. 600 Pages -- Softcover -- \$50 US Funds + \$5 Postage (\$10 overseas)

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Section III	 Assessment of PTSD Comprehensive enumeration of PTSD and related measures of comorbidity Describes a sequential gating assessment strategy Considers potential "positive" effects Includes the "best" clinical questions you can ask
Section IV	 Cautions About Assessment Consider the controversy over so-called "false memories" How to help the helpers
Section V	 Treatment Alternatives: A Critical Analysis Critically evaluates pharmacological, exposure, eye-movement desensitization, group interventions and other procedures Provides treatment guidelines and considers factors that influence the length of treatment
Section VI	 Specific Treatment Procedures: Practical "How to" Guidelines "How to": Educate clients about PTSD; deal with flashbacks; intrusive ideation; guilt; anger; addictive behaviors; depression; anxiety; conduct "memory work"; and address issues of multiple and borderline personality disorders Techniques include Stress inoculation training, cognitive restructuring, problem-solving, relapse prevention and family-based interventions
Section VII	 Post Disaster Interventions Consider who is most at "high risk" Describes and critiques Critical Incident Stress Debriefing; When can CISD make individuals "worse"? Workplace, accident, community interventions Consider the role of religion and rituals Over 1500 references

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Reviews of Meichenbaum's PTSD Handbook

"A **comprehensive** reference work **unsurpassed** in richness, depth and utility for the clinician and scientist."

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Ervin Randolph Parson Journal of Traumatic Stress 1996, 9, 911 - 913

"Meichenbaum has provided clinicians and researchers with a **marvelous resource**. This is the single most comprehensive compilation of information on PTSD known to me."

"The Handbook is impressive for its **usefulness**, if not for its **polish**."

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"The Handbook is as **eclectic** as any one source could be."

"Meichenbaum has a remarkable ability to make use of exemplary work of others in the field."

Jon G. Allen Bulletin of the Menninger Clinic 1996, 60, 264 - 265

"Gathered together in one volume, this summary of the many facets of PTSD is more than a "manual" - it is a gift of many years of research and deduction to the understanding and impact of PTSD.

Adjectives like "definitive" and "indispensable" come to mind."

Claude Barbe Journal of Religion and Health, 1996

FACTORS THAT INFLUENCE THE DEVELOPMENT OF PTSD

STIMULUS FEATURES

- Aspects of traumatic exposure (Life threat, loss, death of a loved one, disruption)
- > Perception of life threat
- > Proximity of the event
- > Duration and intensity of life-threatening events
- Exposure to single or multiple incidents

RESPONSE FEATURES

- > Immediate Response: Recoil Phase
 - o psychic shock, anxiety, dissociative behavior

Post-impact Phase:

within 3 months

- o Intense fear, helplessness or horror, disorganized or agitated behavior
- o Acute Stress Disorder lasts minimum 2 days and maximum 4 weeks

> Recovery and Reconstruction Phase

PTSD lasts at least 1 month. Symptoms of PTSD include

- o **re-experiencing** with young children reflected in repetitive play with traumatic themes or by reenactment of traumatic events in play, drawing, or verbalizations
- o **avoidance or numbing** avoid reminders, having diminished interest in normal activities, feel detached or removed form others
- o symptoms of **hyperarousal** difficulty sleeping or concentrating, irritability, angry outbursts, hypervigilance, and an exaggerated startle response

PRESENCE OF COMORBID FEATURES

- ➤ Anxiety disorders separation anxiety disorder and agoraphobia that arise out of concerns about safety and security. Also trauma-related fears,
- ➤ Depression may emerge later on, especially for those youth who have lost loved ones. Depression is tied with bereavement process. Depression is more likely among youth who display chronic PTSD (lasts longer than 3 months).
- Anger outbursts and substance abuse and other forms of acting out.

➤ Problems with Academic Achievement are included by problems with sleep and lack of concentration.

PREEXISTING CHARACTERISTICS OF THE CHILD

- Sociodemographic
 - o age, gender, ethnicity
 - age-related differences are inconsistent, but symptoms profile varies developmentally
 - o gender differences boys tend to display more aggressive responses than girls
 - o minority youth report higher levels of PTSD and more difficulty recovering
- Preexisting levels of anxiety and depression are significant risk factors for development of PTSD
- ➤ Also a ruminative coping style, preexisting academic difficulties and attention problems and poor peer relations

ASPECTS OF RECOVERY ENVIRONMENT

- ➤ Parental Distress parents trauma-related symptoms
- Parental Psychopathology level of psychosocial functioning
- Individual strengths and resources
- Social and systemic resources
- ➤ Intelligence, communication skills, sense of self-efficacy, coping abilities, talents, feelings of bonding (Note these strengths vary by race and ethnicity).

MEASURES FOR VICTIMS OF ABUSE - CHILD MEASURES

O=Leary-Porter Scale Porter & O=Leary, 1980

Child Witness to Violence Interview Jaffe et al., 1989

Physical Aggression Scale of the Conflict Straus, 1979

Tactics Scale

The Children=s Perceptions of Interpersonal Grych et al., 1992, 2000

Conflict Scale (CPIC)

Violence Exposure Scale for Children (VEX-R) Fox & Leavitt, 1995; Raviv et al., 2001

The Levonn Scale

Richters et al., 1990 Trauma Symptom Checklist for Children

(TSCC) Briere, 1996; Suderman & Jaffe, 1999

Child Behavior Checklist (CBCL)

Achenbach, 1991

Youth Self-Report (YSR)
Achenbach, 1987

The Eyberg Child Behavior Inventory

Eyberg, 1980
The Connor=s Rating Scale

Goyette et al., 1978

Diagnostic Interview for Children and
Adolescents - Revised (DICA-R)
Wellner et al., 1987

The Anxiety Disorders Interview Schedule for Children (ADIS-C)

Silverman & Nelles, 1988

The Children's Depression Inventory (CDI)

Kovacs, 1992

MEASURES FOR VICTIMS OF ABUSE - ADULT MEASURES

Index of Spouse Abuse (ISA) Hudson & McIntosh, 1981

Partner Abuse scale: Non-Physical Hudson et al., 1992

(PASND) and Physical Abuse of Partner Scale

Tolman, 1989, 1999

Psychological Maltreatment of Women Inventory (PMWI)

MEASURES OF ANGER AND AGGRESSIVE BEHAVIOR IN ADULTS

(See Meichenbaum, 2002; Tyson et al., 2002)

Aggression Questionnaire (AQ)

Buss & Perry, 1992; Harris, 1997

Abuse Behavior Inventory (ABI) Shephard & Campbell, 1992

Revised Conflict Tactics Scale (CTS2) Straus, 1979, 1990; Straus et al., 1996

State-Trait Anger Expression Inventory 2 Spielberger et al., 1999

(STAXI)

Job Stress Inventory (JSI) Vagg & Spielberger, 1998

Occupational Stress Inventory (OSI) Osipow & Davis, 1988

Personality Assessment Inventory (PAI) Marey, 1999

Risk of Eruptive Violence Scale (REV) Mehrabian, 1990

Brief Anger and Aggression Scale (BAAS)

Maiuro et al., 1987

Feelings of Acts of Violence Scale (FAV) Plutchik & van Praag, 1990

Staff Observation Aggression Scale (SOAS) Bech & Mak, 1995

Scale for Assessment of Agitated and Bech & Mak, 1995

Aggressive Behavior (SAAB)

MEASURES OF VIOLENT BEHAVIOR IN YOUTH

(See Tyson et al., 2002)

Psychopathology Checklist - Revised (PCL- Hare, 1991; Hare et al., 1991 R)

Modified-conflict Tactics Scale (M-CTS) Cascardi et al., 1999; Neidig, 1986

Multiple-problem Screening Inventory Hudson & McMurty, 1997

Shortform Assessment for Children Glisson et al., in press

Child Behavior Checklist (CBCL) Achenbach, 1991a,b

Youth Self-Report Scale Achenbach, 1987

Adolescent Antisocial Behavior Checklist Kaplan et al., 1990; Marohn et al., 1980

(AABC)

(MPSI)

Adolescent Violence Survey (AVS) Kingery, 1998

Conflict in Relationships (CIR) Wolfe et al., 1994; Wolfe et al., 1998

Intimate Violence of Adolescent Youth Wolfe et al., 1998

Michigan Youth Services Delinquency Risk OJJDP, 1994

assessment Scale

Alaska Youth Services Need Assessment OJJDP, 1994

Scale

ASSESSMENT OF PTSD IN CHILDREN

(See Carlson, 1997; McNally, 1998; Nader, 1997; Saylor & De Roma, 2002; and National Center for PTSD Website)

The following List of Trauma-related measures was put together by Saylor & De Roma, 2002.

Instrument	Contact	Address
Exposure Instruments		
A Stress Response Questionnaire	Charles Faupe	lfaupece@mail.auburn.edu
Perceived Disruption During Rebuilding Inventory	Kent Burnett	Kburnett@miami.edu
Hurricane related Experiences Questionnaire	Cynthia Swenson	swensonc@musc.edu
A Stress Scale	Fran H. Norris	Fnorris@gsu.edu
An Exposure Experiences Questionnaire	Christopher Lonigan	Lonigan@psy.FSU.edu
Fernald Mental Experiences Questionnaire – Child	Bonnie Green	Bgreen01@goergetown.edu
Fire Questionnaire – Child Form	Russell T. Jones	R.T.Jones@vt.edu
Hurricane Related Experiences Questionnaire	Eric Vernburg	Vernberg@Ukans.edu
A Measure of Disaster Stress	Nuray Kaniasty	Kaniastu@Grove.IUP.edu
Personal Loss Scale	Norman Milgram	Fax: 011-972-3640-6722

Instrument	Contact	Address
Coping Instruments		
Structured Interview to Assess Thinking About Disaster	Lenore Terr	Jmusgrov@slip.net
About the Future Scale	P.A. Saigh	Psaigh@GC.CUNY.edu
Optimism Life Orientation Test –	Charles Carver	ccarver@miami.edu
Revised	Curtic McMillen	Cmcmille@gwbssw.wvustl.edu
The Perceived Benefits Scale	L. Greening	Legreeni@gp.as.ua.edu
Evaluation of Cognitive Heuristics	A.Nuray Karranci	Karanci@metu.edu.tr
Earthquake Related Cognitions Questionnaire	Charles Carver	ccarver@miami.edu
Modified Version of COPE Scale	Anthony Spirito	Anthony_Spirito@Brown.edu
Kidcope		www.cpp-db.com
Coping Resources Inventory	Coppell	Dbcphd@aol.com
Coppel's Index of Social Support	Susan Harter	Sgarter@nova.psy.Den.edu
Social Support Scale for Children and Adolescents	Mitchell Prinstein	Mitchell.Prinstein@yale.edu
Modified Children's Coping Assistance Checklist	Norman Milgram	Fax: 011-972-3640-6722
Confronting Behavior and Support Persons Questionnaire		

Instrument	Contact	Address				
Posttraumatic Stress Disorder (PTSD) Instruments						
Posttraumatic Stress Disorder	R. Pynoos	Rpynoos@mednet.UCLA.edu				
Pynoos PTSD Reaction Index	R. Pynoos	Rpynoos@mednet.UCLA.edu				
Children's PTSD Inventory	P. A. Saigh	Psaigh@mednet.UCLA.edu				
Clinician Administered PTSD Scale – Child and Adolescent Versions		www.ncptsd.org				
Pediatric Emotional Distress Reaction Scale	Conway Saylor	Saylor@citadel.edu				
Parent PTSD Reaction Index	C. Frederick	Cfrede2301@aol.com				
Modified Version of Frederick Reaction Index	C. Lonigan	Lonigan@psy.FSU.edu				
Acute Stress Reactions Scale	Norman Milgram	Fax: 011-972-3640-6722				
When Bad Things Happen	K. Fletcher	Kenneth.fletcher@banyan.um.mec				

Lessons From the Literature on PTSD (Goodman et al., 2002)

- > Traumatic events experienced before age 11 are three times more likely to result in serious emotional and behavioral problems than those experienced later in life
- > The psychological impact of such events tends to persist or become worse with time
- ➤ Parents often underestimate the intensity and duration of their children=s reaction to stress
- ➤ These reactions vary with a child=s age, intellectual capacity, personality and social challenges
- ➤ The functioning of adults who care for a child has a tremendous effect on the child=s capacity to recover
- > The traumatic nature of a death can complicate bereavement
- The most likely problems are post-traumatic stress disorder and other forms of anxiety, grief and depression, aggressive and defiant behavior, physical symptoms, lowered self-esteem, and social and academic difficulties

Possible Reactions in Children After Trauma/Disaster

Adapted from R. H. Gurwitch, J. F. Silovsky, S. Shultz, M. Kees, & S. Burlingame, 2002. Also see reactions and Guidelines for Children Following Trauma/Disaster (www.helping.apa.org)

- ➤ Most children who develop PTSD or its symptoms do so in the first weeks or months following the event. The <u>severity of the symptoms</u> has prognostic implications. Moderate and severe symptoms have poorer prognosis.
- ➤ Worries, fears and anxieties about safety of self and others (younger children may be more clinging to adults; older children may also have discomfort with feelings of vulnerability)
- ➤ Worries about re-occurrence of violence (older children may also be worried about school violence and/or consequences of War on Terrorism).
- Changes in behavior
 - o increased activity level
 - decreased concentration and/or attention (these behaviors may appear and be confused with ADHD in school-aged children)
 - angry outbursts or aggression (younger children may have increased temper tantrums)
 - o increased irritability with friends, family, adults, and situations or events
 - o withdrawal
- ➤ Changes in academic performance (usually a slight, short-lived decline) (Adolescents may have an increase in absenteeism)
- Somatic complaints (e.g., headaches, stomachaches, vague aches and pains)
- > Changes in sleep (young children may have nightmares seemingly unrelated to the trauma)
- > Changes in appetite
- > Decreased interest in usual pleasurable activities
- Increased negative behaviors (e.g., defiance) or emotions (e.g., sadness, anger, worry)
- ➤ Increased sensitivity to sounds (e.g., sirens, planes, thunder)
- ➤ Hate or intense anger statements (young children may show more hateful or hurtful play)
- ➤ Repeated questions or discussions of events (most common in young children) (Young children may have posttraumatic play; school-aged children=s comments may often be gruesome or graphic in nature)
- ➤ Preschool children to early elementary school children may show regressive behaviors (e.g., babytalk, bed-wetting, tantrums)
- Late elementary through high school aged children may have a decreased sense of trust and more negative perceptions of others, particularly those perceived as being "different". They may also have discomfort with feelings related to the perpetrators of the event, particularly revenge thoughts
- ➤ Older children may have repetitive thoughts about death and dying, including suicidal

thoughts (by adolescents, this reaction may also result in an increase in risk taking behaviors such as alcohol and other substance abuse and promiscuous sexual behaviors)

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http://www.aap.org/disaster

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http://www,mentalhealth.org/publications/allpubs/SMA95-3022/default.asp

American Psychological Associate Disaster Response Network

http://www.apa.org/practice/drn.html

Crisis Counseling

www.projectliberty.state.ny.us

National Center for PTSD

http://www.ncptsd.org/treatment/assessment/instruments_pilots.html

PTSD and Children

www.aboutourkids.org

The Range and Magnitude and Duration of the Effects of Natural Disasters: A Review of the Empirical Literature (from Norris et al.)

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