Stressful or scary events happen to many people. Below is a list of stressful and scary events that sometimes happen. Mark YES if it happened to you. Mark No if it didn’t happen to you.

1. Serious natural disaster like a flood, tornado, hurricane, earthquake, or fire.
2. Serious accident or injury like a car/bike crash, dog bite, sports injury.
3. Robbed by threat, force or weapon.
4. Slapped, punched, or beat up in your family.
5. Slapped, punched, or beat up by someone not in your family.
6. Seeing someone in your family get slapped, punched or beat up.
7. Seeing someone in the community get slapped, punched or beat up.
8. Someone older touching your private parts when they shouldn’t.
9. Someone forcing or pressuring sex, or when you couldn’t say no.
10. Someone close to you dying suddenly or violently.
11. Attacked, stabbed, shot at or hurt badly.
12. Seeing someone attacked, stabbed, shot at, hurt badly or killed.
13. Stressful or scary medical procedure.
15. Other stressful or scary event?

Describe: ________________________________

Which one is bothering you the most now? __________

If you marked “YES” to any stressful or scary events, then turn the page and answer the next questions.
Mark 0, 1, 2 or 3 for how often the following things have bothered you in the last two weeks:

0 Never / 1 Once in a while / 2 Half the time / 3 Almost always

1. Upsetting thoughts or pictures about what happened that pop into your head. 0 1 2 3
2. Bad dreams reminding you of what happened. 0 1 2 3
3. Feeling as if what happened is happening all over again. 0 1 2 3
4. Feeling very upset when you are reminded of what happened. 0 1 2 3
5. Strong feelings in your body when you are reminded of what happened (sweating, heart beating fast, upset stomach). 0 1 2 3
6. Trying not to think about or talk about what happened. Or to not have feelings about it. 0 1 2 3
7. Staying away from people, places, things, or situations that remind you of what happened. 0 1 2 3
8. Not being able to remember part of what happened. 0 1 2 3
9. Negative thoughts about yourself or others. Thoughts like I won’t have a good life, no one can be trusted, the whole world is unsafe. 0 1 2 3
10. Blaming yourself for what happened, or blaming someone else when it isn’t their fault. 0 1 2 3
11. Bad feelings (afraid, angry, guilty, ashamed) a lot of the time. 0 1 2 3
12. Not wanting to do things you used to do. 0 1 2 3
13. Not feeling close to people. 0 1 2 3
14. Not being able to have good or happy feelings. 0 1 2 3
15. Feeling mad. Having fits of anger and taking it out on others. 0 1 2 3
16. Doing unsafe things. 0 1 2 3
17. Being overly careful or on guard (checking to see who is around you). 0 1 2 3
18. Being jumpy. 0 1 2 3
19. Problems paying attention. 0 1 2 3
20. Trouble falling or staying asleep. 0 1 2 3

Please mark “YES” or “NO” if the problems you marked interfered with:

1. Getting along with others [ ] Yes [ ] No
2. Hobbies/Fun [ ] Yes [ ] No
3. School or work [ ] Yes [ ] No
4. Family relationships [ ] Yes [ ] No
5. General happiness [ ] Yes [ ] No

Total Score____
Clinical = 15+