

Trauma Module

SUPPLEMENT 1

How true do you feel these statements are about your family?

In my home, there is a **parent or some other adult** who...

	Not At All True	A Little True	Pretty Much True	Very Much True
X1. talks with me about my problems.	A	B	C	D
X2. listens to me when I have something to say.	A	B	C	D
X3. helps me when I am upset.	A	B	C	D
X4. makes me feel good about myself.	A	B	C	D

How true do you feel these statements are about your friends?

I have a **friend** my age who...

	Not At All True	A Little True	Pretty Much True	Very Much True
X5. talks with me about my problems.	A	B	C	D
X6. listens to me when I have something to say.	A	B	C	D
X7. helps me when I am upset.	A	B	C	D
X8. makes me feel good about myself.	A	B	C	D

How true do you feel these statements are about a **teacher or other adult at school**?

At my school, there is a **teacher or other adult** who...

	Not At All True	A Little True	Pretty Much True	Very Much True
X9. would understand my problems if I shared them.	A	B	C	D
X10. would be helpful to me if I came to school upset.	A	B	C	D
X11. makes me feel good about myself.	A	B	C	D
X12. I can count on to help me, no matter what.	A	B	C	D

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How true do you feel these statements are about your feelings at school?

At my school,...

	Not At All True	A Little True	Pretty Much True	Very Much True
X13. I feel socially accepted.	A	B	C	D
X14. I feel understood as a person.	A	B	C	D
X15. I feel that I matter to others.	A	B	C	D

The following questions ask about how safe you feel in your neighborhood and at home or where you live.

X16. How safe do you feel at home or the place where you live?

- A) Very safe
- B) Safe
- C) Neither safe nor unsafe
- D) Unsafe
- E) Very unsafe

X17. How safe do you feel in the neighborhood where you live?

- A) Very safe
- B) Safe
- C) Neither safe nor unsafe
- D) Unsafe
- E) Very unsafe

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The following questions ask about how you felt or what you did in **the past 30 days**.

	Never	1–3 times a month	1–2 times a week	2–3 times a week	Almost every day
X18. I got upset easily or got into arguments or physical fights.	A	B	C	D	E
X19. I had trouble concentrating or paying attention.	A	B	C	D	E
X20. I had trouble feeling happiness or love.	A	B	C	D	E
X21. I felt alone even when I was around other people.	A	B	C	D	E
X22. I had trouble going to sleep, woke up often, or had trouble getting back to sleep.	A	B	C	D	E
X23. How often are you able to pull yourself out of a bad mood?					
A) Almost never					
B) Once in a while					
C) Sometimes					
D) Frequently					
E) Almost always					
X24. When everybody around you gets angry, how relaxed can you stay?					
A) Not relaxed at all					
B) Slightly relaxed					
C) Somewhat relaxed					
D) Quite relaxed					
E) Extremely relaxed					
X25. How often are you able to control your emotions when you need to?					
A) Almost never					
B) Once in a while					
C) Sometimes					
D) Frequently					
E) Almost always					

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X26. Once you get upset, how often can you get yourself to relax?

- A) Almost never
- B) Once in a while
- C) Sometimes
- D) Frequently
- E) Almost always

X27. When things go wrong for you, how calm are you able to remain?

- A) Not calm at all
- B) Slightly calm
- C) Somewhat calm
- D) Quite calm
- E) Extremely calm

Below is a list of symptoms that students sometimes have.

In the last 2 weeks, how much were you bothered by each symptom?

	Not At All	A Little	Some	A Lot	A Whole Lot
X28. Stomach aches	A	B	C	D	E
X29. Headaches	A	B	C	D	E
X30. Pains in your lower back	A	B	C	D	E
X31. Feeling faint or dizzy	A	B	C	D	E
X32. Pain in your arms or legs	A	B	C	D	E
X33. Heart beating too fast (even when you are not exercising)	A	B	C	D	E
X34. Feeling like you might throw up or having an upset stomach	A	B	C	D	E
X35. Feeling weak in parts of your body	A	B	C	D	E