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# A Review of the Clinical Utility and Psychometric Properties of the International Trauma Questionnaire - Child and Adolescent Version (ITQ-CA): Percentile Rankings and Qualitative Descriptors

The International Trauma Questionnaire - Child and Adolescent Version (ITQ-CA) was developed by Cloitre and colleagues (2018). It is a 22-item self-report measure designed to assess symptoms of Post Traumatic Stress Disorder (PTSD) and Disturbances in Self Organization (DSO), which together constitute Complex PTSD (CPTSD), in children and adolescents aged 7 to 17 years. This technical review provides clinicians with percentile rankings and qualitative descriptors to enhance the interpretation and clinical utility of ITQ-CA scores.

View the ITQ-CA on NovoPsych.com

**April 2025**

## Developer

The International Trauma Questionnaire - Child and Adolescent Version (ITQ-CA) was developed by Cloitre and colleagues (2018):

> Cloitre, M., Shevlin, M., Brewin, C. R., Bisson, J. I., Roberts, N. P., Maercker, A., Karatzias, T., & Hyland, P. (2018). The International Trauma Questionnaire: Development of a self-report measure of ICD-11 PTSD and Complex PTSD. *Acta Psychiatrica Scandinavica, 138*(6), 536–546. https://doi.org/10.1111/acps.12956

This document was developed by NovoPsych to review contemporary literature and to describe original scoring methodologies and to provide interpretation material, enhance normative data and provide qualitative descriptors.

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## Description

The International Trauma Questionnaire - Child and Adolescent Version (ITQ-CA) is based on the International Classification of Diseases 11 (ICD-11) model of trauma-related diagnoses, offering a clinically relevant tool for identifying PTSD and Complex PTSD (CPTSD) symptoms. It is the child and adolescent version of the International Trauma Questionnaire (ITQ) for adults.

The ITQ-CA has two subscales with three symptom clusters in each.

Post Traumatic Stress Disorder (PTSD)

- Re-experiencing - intrusive memories, flashbacks, or nightmares where the traumatic event feels as though it is happening again in the present
- Avoidance - deliberate efforts to avoid thoughts or feelings and situations, people, or places that evoke memories of the traumatic event
- Sense of threat - persistent feelings of being in danger, manifesting as hypervigilance (being "on guard") and heightened startle response

Disturbances in Self Organization (DSO)

- Affective dysregulation - difficulties managing emotions, including heightened emotional reactivity or emotional numbing
- Negative self-concept - persistent negative beliefs about oneself, including feelings of worthlessness or viewing oneself as a failure
- Disturbances in relationships - difficulties in forming and maintaining close relationships, feeling distant or cut off from others, and finding it challenging to stay emotionally close to people

The ITQ-CA reliably discriminates between young people with PTSD alone and those with CPTSD (Haselgruber et al. 2020a; Ho et al., 2022; Kazlauskas et al., 2020; Redican et al., 2022). Individuals with PTSD alone score above the threshold on the PTSD symptom clusters without meeting criteria for DSO, whereas those with CPTSD score above the threshold on both PTSD and DSO subscales. The ITQ-CA also assesses functional impairments associated with PTSD and DSO, ensuring a comprehensive assessment of trauma-related symptoms and their impact on functioning.

Scores on the ITQ-CA indicate the presence and severity of PTSD and/or DSO symptoms and associated functional impairments. The ITQ-CA can be used by qualified professionals, such as psychologists, as part of a comprehensive diagnostic assessment process for PTSD and CPTSD and for monitoring treatment progress over time.

Compared to other PTSD assessment tools, such as the Child and Adolescent Trauma Screen (CATS), the ITQ-CA has a distinct advantage in its inclusion of CPTSD.

Research suggests that CPTSD is experienced by approximately 50% of adolescents who meet criteria for a trauma-related disorder (Kazlauskas et al., 2020). Young people with CPTSD tend to experience greater functional impairment compared to those with PTSD alone, affecting their relationships, schooling, and overall quality of life.

PTSD and CPTSD are often associated with different types of traumatic experiences:

- PTSD is frequently linked to single-event traumas, such as serious accidents, natural disasters, or witnessing isolated incidents of violence.
- CPTSD is more commonly associated with prolonged, repeated or accumulated interpersonal trauma, particularly sexual trauma and exposure to direct harm or violence (Daniunaite et al., 2021; Haselgruber et al., 2020a; Redican et al., 2022).

By differentiating between PTSD and CPTSD, the ITQ-CA helps qualified professionals identify the distinct symptom profiles associated with different trauma experiences. Individuals with CPTSD may benefit from treatment approaches that address not only the core PTSD symptoms but also difficulties with emotional regulation and self-identity. This

differentiation allows clinicians to develop more tailored treatment plans based on the specific presentation of trauma-related symptoms.

## Psychometric Properties

The International Trauma Questionnaire - Child and Adolescent Version (ITQ-CA) has been validated across different populations of young people, demonstrating good reliability and validity as a measure of ICD-11 Post-Traumatic Stress Disorder (PTSD) and Complex PTSD (CPTSD). It facilitates differential diagnosis between PTSD and CPTSD by capturing both PTSD and Disturbances in Self Organization (DSO) symptoms together with associated functional impairment in areas relevant to children and adolescents.

Confirmatory factor analysis (CFA) has yielded mixed results regarding the optimal factor structure of the ITQ-CA. In a study of Austrian foster children (Haselgruber et al., 2020b) and in a study of Chinese mental health service seeking adolescents (Ho et al., 2022), a two-factor second-order model (i.e., PTSD and DSO) was found to have the best fit, consistent with CFA studies of the ITQ for adults (Cloitre et al., 2018; Hyland et al., 2017, 2024), while in a study of Lithuanian adolescents, a correlated six-factor model (with factors representing six symptom clusters) was preferred (Kazlauskas et al., 2020). The PTSD and DSO factors have been found to be highly correlated in these studies, ranging from 0.75 to 0.92, suggesting that while they are related, they represent distinct constructs.

Latent class analysis and factor mixture modeling (FMM) has also supported the conceptual distinctiveness of PTSD and CPTSD in young people (Haselgruber et al. 2020a; Ho et al., 2022; Kazlauskas et al., 2020; Redican et al., 2022), aligning with the ICD-11 conceptualisation of trauma-related disorders.

The ITQ-CA has demonstrated good to excellent internal consistency, with Cronbach's alpha values of 0.79 for the PTSD subscale and 0.86 for the DSO subscale (Kazlauskas et al., 2020). Composite reliability (CR) estimates have also been excellent for both the PTSD subscale (CR = 0.85-0.86) and DSO subscale (CR = 0.91-0.95) (Haselgruber et al., 2020a; Haselgruber et al., 2020b).

The concurrent validity of the ITQ-CA has been supported through correlations between ITQ-CA symptom clusters and corresponding PTSD symptom clusters as assessed by the Child and Adolescent Trauma Screen (CATS) (Haselgruber et al., 2020b; Kazlauskas et al., 2020). Convergent validity has been demonstrated by moderate to strong correlations with depression, anxiety, dissociation, and lifetime traumatisation (Haselgruber et al., 2020a; Ho et al., 2022). The PTSD and DSO subscales also show distinct associations with external variables, providing support for discriminant validity. For example, Ho and colleagues (2022) found PTSD symptoms were more strongly associated with anxiety and DSO symptoms were more strongly associated with depression, while Redican et al. (2022) observed different patterns of comorbidity across symptom profiles.

Research has identified several key factors that predict PTSD and CPTSD in children and adolescents. Trauma characteristics are particularly important, with both trauma type and quantity influencing outcomes. While cumulative trauma exposure increases risk for both PTSD and CPTSD, interpersonal trauma — particularly sexual trauma and exposure to direct harm or violence — has been identified as a particularly salient risk factor for CPTSD (Daniunaite et al., 2021; Redican et al., 2022). Social factors such as family problems, school problems, and lack of social support have also been found to discriminate between PTSD and CPTSD in adolescents (Daniunaite et al., 2021), highlighting the specific relevance of such factors to CPTSD.

The ITQ-CA has been validated across different countries and cultures, including Austria, China, Lithuania, and Northern Ireland (Haselgruber et al., 2020b; Ho et al., 2022; Kazlauskas et al., 2020; Redican et al., 2022). These validation studies have included both general population samples and more specific populations such as foster children and mental health service seeking adolescents.

Thus, the ITQ-CA demonstrates good psychometric properties, including reliability, validity, and cross-cultural and multilingual applicability. It provides a developmentally appropriate tool for the assessment and differential diagnosis of PTSD and CPTSD in children and adolescents (Sarr et al., 2024).

Percentiles for normative and diagnostic samples, developed by NovoPsych, are presented in the Supporting Information section, which includes detailed information about the composition of these reference samples.

## Scoring & Interpretation

The International Trauma Questionnaire - Child and Adolescent Version (ITQ-CA) has two subscales:

- Post Traumatic Stress Disorder (PTSD) - assesses the core symptoms of PTSD according to the ICD-11, focusing on intrusive re-experiencing, deliberate avoidance, and persistent sense of threat.
- Disturbances in Self Organization (DSO) - assesses the additional symptom clusters that, together with PTSD symptoms, constitute Complex PTSD (CPTSD), and which reflect pervasive psychological disturbances that typically arise following prolonged or repeated traumatic experiences

It includes six items measuring PTSD symptoms from three symptom clusters:

- Re-experiencing (Items 1 and 2) - assesses intrusive memories, flashbacks, or nightmares where the traumatic event feels as though it is happening again in the present moment, rather than being remembered as a past event
- Avoidance (Items 3 and 4) - measures deliberate efforts to avoid internal reminders (thoughts, feelings, physical sensations) and external reminders (people, places, conversations, objects, activities, situations) that evoke memories of the traumatic event
- Sense of threat (Items 5 and 6) - evaluates persistent feelings of current danger, manifesting as hypervigilance (being “on guard” or watchful) and heightened startle response (being jumpy or easily startled)

It also includes six items measuring DSO symptoms from three symptom clusters:

- Affective dysregulation (Items 12 and 13) - measures difficulties managing emotions, including heightened emotional reactivity (difficulty calming down when upset) and emotional numbing (feeling emotionally shut down or disconnected from feelings)
- Negative self-concept (Items 14 and 15) - assesses persistent negative beliefs about oneself, including feelings of worthlessness and viewing oneself as a failure, reflecting a diminished sense of value or identity
- Disturbances in relationships (Items 16 and 17) - evaluates difficulties in forming and maintaining close relationships, feeling distant or cut off from others, and finding it challenging to stay emotionally close to people

The PTSD and DSO subscales are each accompanied by three items measuring associated functional impairments in relation to friends, family, school, other important areas (e.g., hobbies, other relationships), and general happiness.

- PTSD related functional impairment (Items 7, 8, 9, 10, and 11) - measures the impact of PTSD symptoms on relationships with friends and family, schoolwork, other important areas (e.g., hobbies, other relationships), and general happiness, indicating how significantly these symptoms disrupt daily functioning
- DSO related functional impairment (Items 18, 19, 20, 21, and 22) - measures the impact of DSO symptoms on relationships with friends and family, schoolwork, other important areas (e.g., hobbies, other relationships), and general happiness, indicating how significantly these disturbances disrupt daily functioning

Each symptom item is rated on a 5-point Likert-type scale from 0 to 4 and each functional impairment item is answered in a binary Yes (1) or No (0) format.

The scoring approach uses dichotomous scoring for diagnostic purposes and dimensional scoring for symptom severity.

*Dichotomous Scoring*

A score of 2 (Likert = "Moderately") or higher on a symptom item and a score of 1 ("Yes") on a functional impairment item indicates the presence (i.e., endorsement) of that symptom or impairment.

PTSD is indicated if:

- at least one symptom is present from each PTSD symptom cluster, and
- there is at least one functional impairment associated with these PTSD symptoms.

Complex PTSD (CPTSD) is indicated if:

- at least one symptom is present from each PTSD symptom cluster,
- there is at least one functional impairment associated with these PTSD symptoms,
- at least one symptom is present from each DSO symptom cluster, and
- there is at least one functional impairment associated with these DSO symptoms.

A person may receive a diagnosis of PTSD or CPTSD, but not both.

*Dimensional Scoring*

- The PTSD symptom severity score is the sum of items 1 to 6 and ranges from 0 to 24.
- The DSO symptom severity score is the sum of items 12 to 17 and ranges from 0 to 24.

The respondent's scores are presented as raw scores and as percentiles based on normative data for trauma-exposed children and adolescents, contextualising their scores relative to the typical scores of children and adolescents in this normative sample. For example, the 50th percentile represents the typical level of symptom severity for a child or adolescent who has been exposed to trauma (i.e., "Mild"), while scores on the 90th percentile fall within the top 10% and are considered "Severe".

Qualitative descriptors categorise the respondent's scores based on specific ranges of percentiles.

- "Minimal" - Below the 25th percentile (subscale score between 0 and 3)
- "Mild" - 25th to 50th percentile (subscale score between 4 and 7)
- "Moderate" - 51st to 75th percentile (subscale score between 8 and 11)
- "Severe" - 76th to 95th percentile (subscale score between 12 and 17)
- "Very Severe" - Above the 95th percentile (subscale score between 18 and 24)

A diagnostic criteria descriptor also accompanies each score, indicating whether diagnostic criteria for PTSD and DSO symptoms are met, and whether specific symptom clusters and functional impairments are present, according to the dichotomous scoring threshold. CPTSD is indicated if the diagnostic criteria descriptor says "Criteria met" for both the PTSD subscale and the DSO subscale.

## Results

| | Raw Score (0-24) | Percentile | Descriptor | Diagnostic Criteria |
|---|---|---|---|---|
| PTSD | 14 | 83 | Severe | Criteria met |
| DSO | 17 | 95 | Severe | Criteria met |

## PTSD Symptoms and Functioning

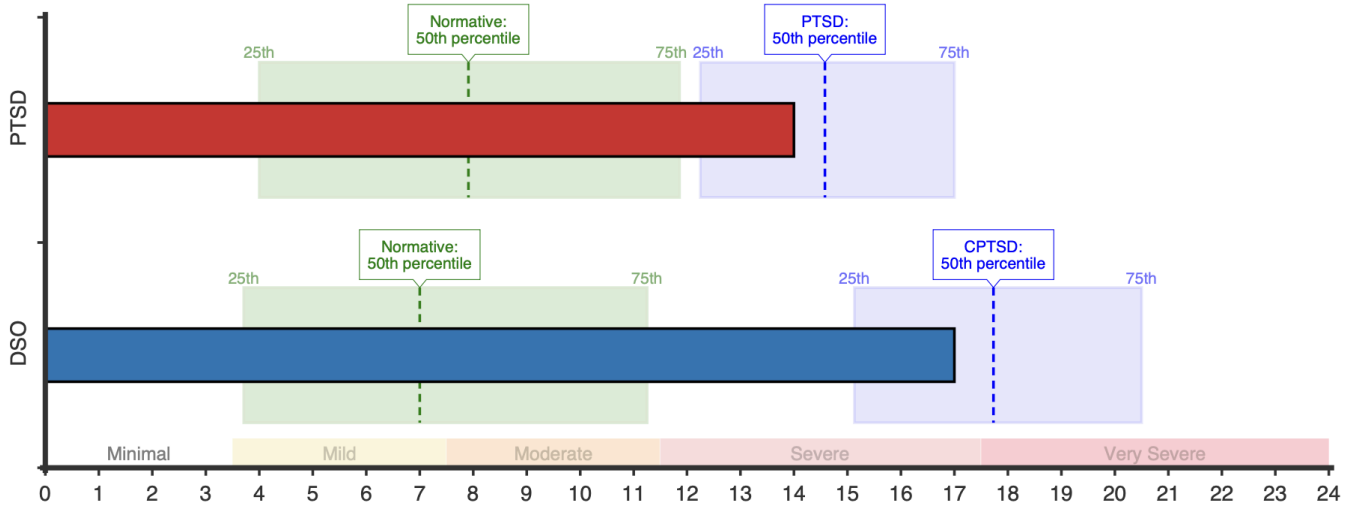
| | Raw Score | Percentile | Descriptor | Diagnostic Criteria |
|---|---|---|---|---|
| Re-experiencing (0-8) | 4 | 81 | Severe | Present |
| Avoidance (0-8) | 5 | 69 | Moderate | Present |
| Sense of threat (0-8) | 5 | 74 | Moderate | Present |
| Functional impairment (0-5) | 2 | 44 | Mild | Present |

## DSO Symptoms and Functioning

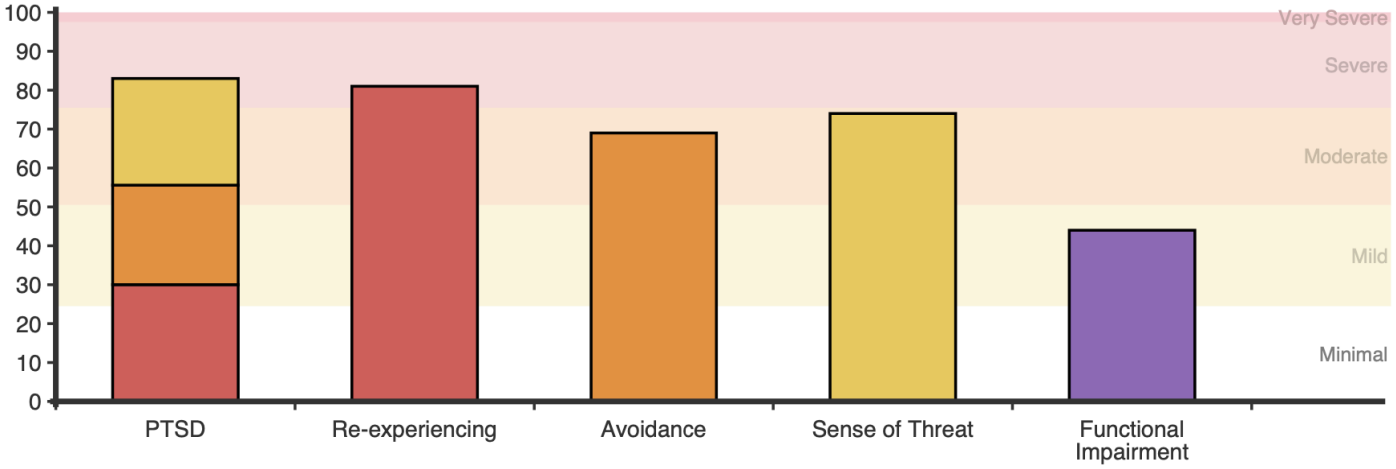
| | Raw Score | Percentile | Descriptor | Diagnostic Criteria |
|---|---|---|---|---|
| Affective dysregulation (0-8) | 6 | 90 | Severe | Present |
| Negative self-concept (0-8) | 5 | 86 | Severe | Present |
| Disturbances in relationships (0-8) | 6 | 89 | Severe | Present |
| Functional impairment (0-5) | 2 | 46 | Mild | Present |

On first administration, graphs are presented showing the respondent's scores as percentiles based on normative data for trauma-exposed children and adolescents. A graph is also presented comparing the respondent's PTSD and DSO symptom severity scores to two samples: (1) the normative sample of trauma-exposed children and adolescents; and (2) a diagnostic sample. For the PTSD symptom severity score, this diagnostic sample consists of children and adolescents meeting the ITQ-CA's criteria for PTSD. For DSO symptom severity scores, the diagnostic sample consists of children and adolescents meeting the ITQ-CA's criteria for CPTSD. Shaded areas correspond to scores between the 25th and 75th percentile. This graph contextualises the respondent's scores relative to typical symptom severity levels in these samples.

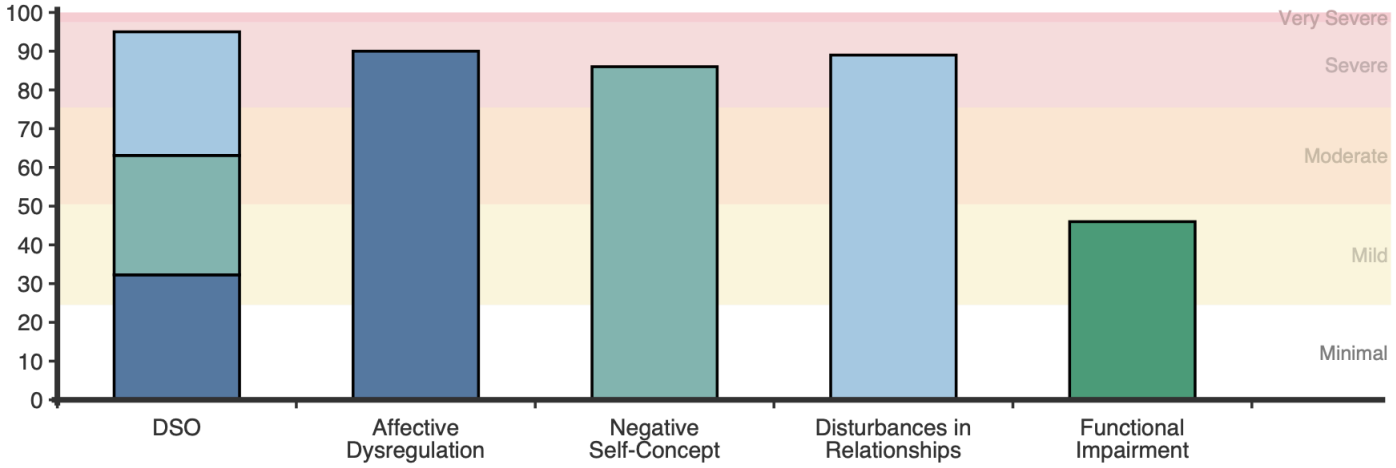
### ITQ-CA Subscale Scores Compared to Trauma-Exposed Normative and Diagnostic Samples



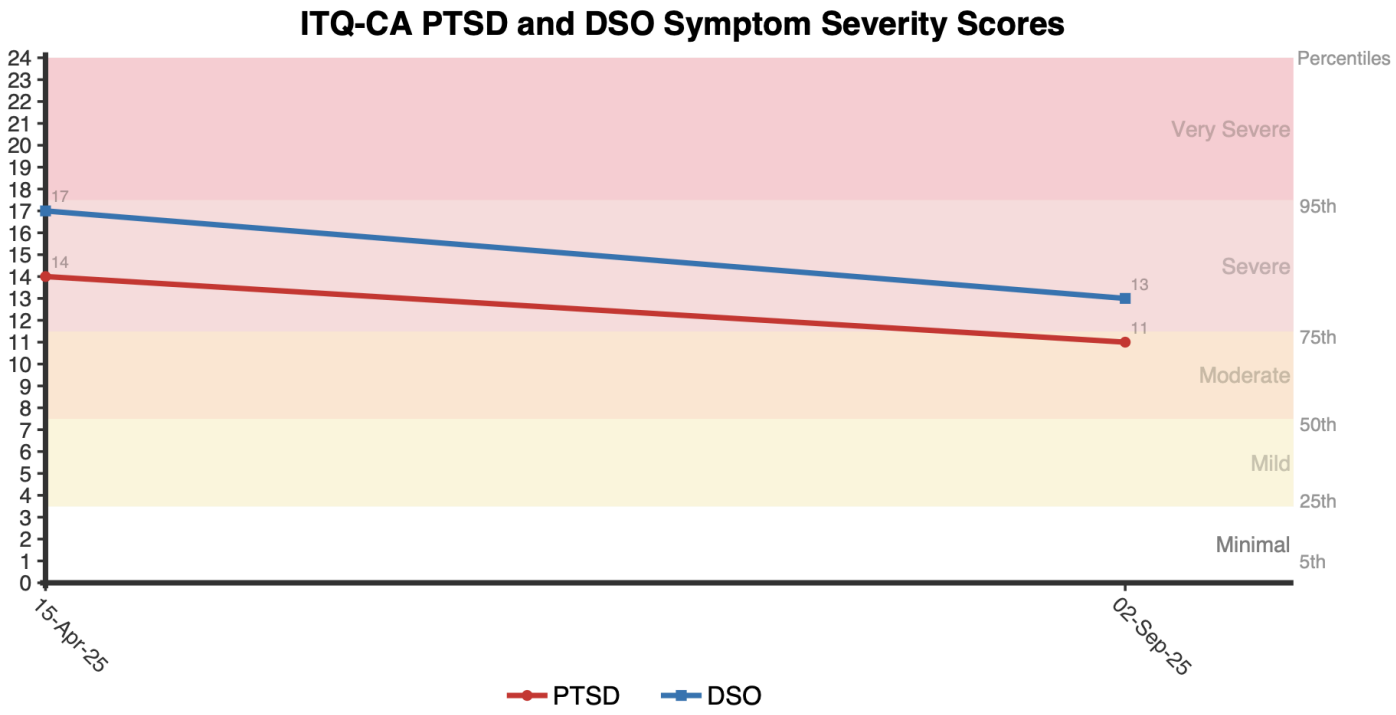
## ITQ-CA PTSD Normative Percentiles




## ITQ-CA DSO Normative Percentiles



If administered more than once, longitudinal graphs are presented for the respondent's raw PTSD and DSO symptom severity scores, which is useful for monitoring any changes in symptom severity over time and treatment progress and outcomes. A meaningful change in PTSD symptom severity is defined as a change of 7 or more points in the PTSD symptom severity score, and a meaningful change in DSO symptom severity is defined as a change of 6 or more points in the DSO symptom severity score, based on Reliable Change Index (RCI) calculations (i.e., a 6-7 or more point decrease indicates significant improvement; a 6-7 or more point increase indicates significant deterioration; and less than a 6-7 point change indicates no significant change).



## Supporting Information

This section outlines NovoPsych's development of norms and percentile rankings for the ITQ-CA based on data obtained from clients assessed on NovoPsych. These norms and percentile rankings enhance the interpretability of ITQ-CA scores.

This section also outlines NovoPsych's development of classification thresholds and qualitative descriptors for ITQ-CA scores. These descriptors provide clinicians with clear and consistent classifications of severity levels, supporting better understanding and communication of ITQ-CA scores.

Lastly, this section describes the structure and logic of the automated interpretive text that NovoPsych provides in ITQ-CA reports. This interpretive text adapts to the respondent's scores, providing clinicians with comprehensive, tailored interpretations of ITQ-CA results.

### *Percentile Calculations*

The percentiles shown in Tables 1, 2, and 3.1 to 3.8 are based on data for three samples obtained from among clients assessed on NovoPsych between October 2022 and April 2025:

- **Normative sample:** A normative sample of 665 clients scoring in the "Normal" range (i.e., less than or equal to 23 out of 63) on the Depression Anxiety Stress Scales - Youth Version (DASS-Y) on the same day as completing the ITQ-CA, while receiving mental health care. This approach provides a reference sample of trauma-exposed children and adolescents without significant psychological distress, allowing for interpretation of ITQ-CA scores in relation to a sample that may resemble a community sample. Several normative methods were evaluated during development, including percentile matching with known population distributions and alternative DASS-Y score ranges. Statistical validation confirmed that using clients in the "Normal" range on the DASS-Y produced appropriate percentile distributions comparable to community samples while maintaining adequate sample size for reliable estimates.
- **PTSD sample**: A diagnostic sample of 931 clients meeting the ITQ-CA's dichotomous scoring criteria for PTSD (i.e., PTSD only and not DSO).
- **CPTSD sample**: : A diagnostic sample of 2,983 clients meeting the ITQ-CA's dichotomous scoring criteria for CPTSD (i.e., both PTSD and DSO).

The percentiles were calculated directly from the observed distribution of scores in each sample, according to the following equation.

$$Percentile = 100 \times (\Sigma I(X_i < x))/N$$

Where:

- $x$ is the score being converted to a percentile
- $\Sigma I(X_i < x)$ represents the count of individuals who scored less than $x$
- $N$ is the total number of individuals (i.e., 665 for the normative sample, 931 for the PTSD sample, or 2,983 for the CPTSD sample)

These percentiles contextualise each score relative to typical symptom severity levels in each sample, offering a clearer perspective on how the respondent's symptom severity levels compare to those of a normative sample and a relevant diagnostic sample.

## *Percentile Tables*

Table 1. Percentiles for PTSD symptom severity scores relative to normative and PTSD samples.

| | | Percentile | |
|---|---|---|---|
| Descriptor | Score | Normative | PTSD |
| Minimal | 0 | 0.01 | 0.01 |
| | 1 | 5 | 0.01 |
| | 2 | 11 | 0.01 |
| | 3 | 16 | 0.01 |
| Mild | 4 | 25 | 0.01 |
| | 5 | 29 | 0.01 |
| | 6 | 35 | 0.01 |
| | 7 | 40 | 0.11 |
| Moderate | 8 | 51 | 1 |
| | 9 | 55 | 3 |
| | 10 | 63 | 6 |
| | 11 | 69 | 12 |
| Severe | 12 | 76 | 22 |
| | 13 | 79 | 34 |
| | 14 | 83 | 43 |
| | 15 | 88 | 55 |
| | 16 | 91 | 65 |
| | 17 | 94 | 75 |
| Very Severe | 18 | 96 | 83 |
| | 19 | 97 | 90 |
| | 20 | 98.5 | 93 |
| | 21 | 99.4 | 96 |
| | 22 | 99.7 | 97 |
| | 23 | 99.98 | 98.5 |
| | 24 | 99.99 | 99.6 |

Table 2. Percentiles for DSO symptom severity scores relative to normative and CPTSD samples.

| | | Percentile | |
|---|---|---|---|
| Descriptor | Score | Normative | CPTSD |
| Minimal | 0 | 0.01 | 0.01 |
| | 1 | 5 | 0.01 |
| | 2 | 10 | 0.01 |
| | 3 | 20 | 0.01 |
| Mild | 4 | 27 | 0.01 |
| | 5 | 35 | 0.01 |
| | 6 | 44 | 0.01 |
| | 7 | 50 | 0.03 |
| Moderate | 8 | 56 | 0.3 |
| | 9 | 62 | 0.5 |
| | 10 | 69 | 1.5 |
| | 11 | 74 | 3 |
| Severe | 12 | 78 | 6 |
| | 13 | 84 | 10 |
| | 14 | 88 | 16 |
| | 15 | 91 | 24 |
| | 16 | 94 | 32 |
| | 17 | 95 | 42 |
| Very Severe | 18 | 97 | 53 |
| | 19 | 98 | 62 |
| | 20 | 98.5 | 71 |
| | 21 | 99.3 | 79 |
| | 22 | 99.4 | 86 |
| | 23 | 99.7 | 91 |
| | 24 | 99.9 | 96 |

Table 3.1. Percentiles for Re-experiencing symptom cluster scores relative to normative and PTSD samples.

| | | Percentile | |
|---|---|---|---|
| Descriptor | Score | Normative | PTSD |
| Minimal | 0 | 0.01 | 0.01 |
| Mild | 1 | 28 | 0.01 |
| | 2 | 49 | 0.01 |
| Moderate | 3 | 67 | 14 |
| Severe | 4 | 81 | 44 |
| | 5 | 90 | 66 |
| Very Severe | 6 | 96 | 83 |
| | 7 | 98.8 | 93 |
| | 8 | 99.7 | 98 |

Table 3.2. Percentiles for Avoidance symptom cluster scores relative to normative and PTSD samples.

| | | Percentile | |
|---|---|---|---|
| Descriptor | Score | Normative | PTSD |
| Minimal | 0 | 0.01 | 0.01 |
| | 1 | 14 | 0.01 |
| Mild | 2 | 27 | 0.01 |
| | 3 | 40 | 3 |
| Moderate | 4 | 57 | 16 |
| | 5 | 69 | 35 |
| Severe | 6 | 83 | 56 |
| | 7 | 92 | 76 |
| Very Severe | 8 | 96 | 89 |

Table 3.3. Percentiles for Sense of Threat symptom cluster scores relative to normative and PTSD samples.

| | | Percentile | |
|---|---|---|---|
| Descriptor | Score | Normative | PTSD |
| Minimal | 0 | 0.01 | 0.01 |
| | 1 | 19 | 0.01 |
| Mild | 2 | 33 | 0.01 |
| | 3 | 46 | 4 |
| Moderate | 4 | 61 | 24 |
| | 5 | 74 | 43 |
| Severe | 6 | 85 | 61 |
| | 7 | 93 | 80 |
| Very Severe | 8 | 97 | 91 |

Table 3.4. Percentiles for PTSD related functional impairment scores relative to normative and PTSD samples.

| | | Percentile | |
|---|---|---|---|
| Descriptor | Score | Normative | PTSD |
| Minimal | 0 | 0.01 | 0.01 |
| Mild | 1 | 29 | 0.01 |
| | 2 | 44 | 13 |
| Moderate | 3 | 60 | 33 |
| Severe | 4 | 78 | 58 |
| | 5 | 89 | 82 |

Table 3.5. Percentiles for Affective Dysregulation symptom cluster scores relative to normative and CPTSD samples.

| | | Percentile | |
|---|---|---|---|
| Descriptor | Score | Normative | CPTSD |
| Minimal | 0 | 0.01 | 0.01 |
| | 1 | 9 | 0.01 |
| Mild | 2 | 26 | 0.01 |
| | 3 | 48 | 1 |
| Moderate | 4 | 67 | 7 |
| Severe | 5 | 83 | 21 |
| | 6 | 90 | 43 |
| Very Severe | 7 | 97 | 68 |
| | 8 | 99.4 | 88 |

Table 3.6. Percentiles for Negative Self-Concept symptom cluster scores relative to normative and CPTSD samples.

| | | Percentile | |
|---|---|---|---|
| Descriptor | Score | Normative | CPTSD |
| Minimal | 0 | 0.01 | 0.01 |
| Mild | 1 | 29 | 0.01 |
| | 2 | 47 | 0.01 |
| Moderate | 3 | 65 | 2 |
| | 4 | 75 | 10 |
| Severe | 5 | 86 | 25 |
| | 6 | 92 | 41 |
| Very Severe | 7 | 97 | 64 |
| | 8 | 98.5 | 79 |

Table 3.7. Percentiles for Disturbances in Relationships symptom cluster scores relative to normative and CPTSD samples.

| | | Percentile | |
|---|---|---|---|
| Descriptor | Score | Normative | CPTSD |
| Minimal | 0 | 0.01 | 0.01 |
| Mild | 1 | 29 | 0.01 |
| | 2 | 42 | 0.01 |
| Moderate | 3 | 59 | 1.8 |
| | 4 | 70 | 11 |
| Severe | 5 | 82 | 26 |
| | 6 | 89 | 42 |
| Very Severe | 7 | 96 | 68 |
| | 8 | 98.8 | 80 |

Table 3.8. Percentiles for DSO related functional impairment scores relative to normative and CPTSD samples.

| | | Percentile | |
|---|---|---|---|
| Descriptor | Score | Normative | CPTSD |
| Minimal | 0 | 0.01 | 0.01 |
| Mild | 1 | 29 | 0.01 |
| | 2 | 46 | 2 |
| Moderate | 3 | 60 | 10 |
| Severe | 4 | 77 | 23 |
| | 5 | 90 | 48 |

### *Descriptors*

In addition to norms and percentile rankings, NovoPsych has established classification thresholds and qualitative descriptors for the ITQ's subscales, symptom clusters, and functional impairment indicators, based on percentile rankings within the normative sample.

The following qualitative descriptors correspond to specific percentile ranges:

- "Minimal" - Below the 25th percentile
- "Mild" - 25th to 50th percentile
- "Moderate" - 51st to 75th percentile
- "Severe" - 76th to 95th percentile
- "Very Severe" - Above the 95th percentile

For the PTSD and DSO subscales, these qualitative descriptors and percentile ranges correspond to the following symptom severity scores:

- "Minimal" - Subscale score of 0 to 3
- "Mild" - Subscale score of 4 to 7
- "Moderate" - Subscale score of 8 to 11
- "Severe" - Subscale score of 12 to 17
- "Very Severe" - Subscale score of 18 to 24

The score ranges, and corresponding percentiles, are highlighted in different colours in Tables 1, 2, and 3.1 to 3.8.

*Interpretive Text*

The interpretive text for the ITQ-CA follows a structured format that adapts based on the respondent's scores.

The text begins with a statement indicating whether diagnostic criteria for PTSD or CPTSD are met according to the dichotomous scoring approach.

Neither PTSD or DSO criteria met:

*"The responses on the International Trauma Questionnaire - Child and Adolescent Version (ITQ-CA) do not meet the ITQ-CA's diagnostic criteria for PTSD or Complex PTSD (CPTSD)."*

PTSD (i.e., PTSD only and not DSO) criteria met:

*"The responses on the International Trauma Questionnaire - Child and Adolescent Version (ITQ-CA) are consistent with a diagnosis of PTSD."*

CPTSD (i.e., both PTSD and DSO) criteria met:

*"The responses on the International Trauma Questionnaire - Child and Adolescent Version (ITQ-CA) are consistent with a diagnosis of Complex PTSD (CPTSD) given that they meet the ITQ-CA's diagnostic criteria for both PTSD and Disturbances in Self Organization (DSO)."*

A statement is then provided about the respondent's PTSD and DSO symptom severity levels. The statement includes a percentile comparison to the normative sample and the corresponding qualitative descriptor.

PTSD:

*"The respondent's PTSD symptom severity score is on the XXst/nd/rd/th percentile when compared to young people in a trauma-exposed normative sample, which is within the <"Minimal" | "Mild" | "Moderate" | "Severe" | "Very Severe"> range."*

DSO:

*"The respondent's DSO symptom severity score is on the XXst/nd/rd/th percentile when compared to young people in a trauma-exposed normative sample, which is within the <"Minimal" | "Mild" | "Moderate" | "Severe" | "Very Severe"> range."*

For "Moderate", "Severe", and "Very Severe" scores, the statement includes percentile comparisons to both normative and diagnostic samples:

PTSD:

*"The respondent's PTSD symptom severity score is on the XXst/nd/rd/th percentile when compared to young people in a trauma-exposed normative sample, which is within the <"Minimal" | "Mild" | "Moderate" | "Severe" | "Very*

*Severe"> range. When compared to young people meeting the ITQ-CA's diagnostic criteria for PTSD, the respondent's PTSD symptom severity score is on the XXst/nd/rd/th percentile."*

DSO:

*"The respondent's DSO symptom severity score is on the XXst/nd/rd/th percentile when compared to young people in a trauma-exposed normative sample, which is within the <"Minimal" | "Mild" | "Moderate" | "Severe" | "Very Severe"> range. When compared to young people meeting the ITQ-CA's diagnostic criteria for CPTSD, the respondent's DSO symptom severity score is on the XXst/nd/rd/th percentile."*

For each subscale (i.e., PTSD and DSO), the text then lists and describes any symptom clusters and functional impairment indicators that score in the "Moderate", "Severe", or "Very Severe" ranges (hereafter referred to as "notable" clusters/indicators). These clusters/indicators are listed in order, first by classification ("Very Severe", then "Severe", then "Moderate") and then by percentile value. For each notable cluster/indicator, the text includes:

- The cluster's/indicator's percentile comparisons to the normative sample
- The implications of notable scores on this cluster/indicator
- The respondent's ratings of the specific questionnaire items in this cluster/indicator

**PTSD Symptoms and Functioning**

For "Moderate", "Severe", or "Very Severe" scores on the Re-experiencing symptom cluster:

*"The respondent's **Re-experiencing** symptom cluster score is on the XXst/nd/rd/th percentile when compared to young people in a trauma-exposed normative sample, which is within the <"Minimal" | "Mild" | "Moderate" | "Severe" | "Very Severe"> range. This suggests the respondent is experiencing intrusive memories, flashbacks, or nightmares where the traumatic event feels as though it is happening again in the present. These re-experiencing symptoms can be highly distressing, may occur unpredictably, and can interfere with daily functioning by disrupting concentration, sleep patterns, and emotional regulation. The items within this symptom cluster were rated as follows:"*

For "Moderate", "Severe", or "Very Severe" scores on the Avoidance symptom cluster:

*"The respondent's **Avoidance** symptom cluster score is on the XXst/nd/rd/th percentile when compared to young people in a trauma-exposed normative sample, which is within the <"Minimal" | "Mild" | "Moderate" | "Severe" | "Very Severe"> range. This indicates the respondent is actively avoiding internal reminders (thoughts, feelings) and/or external reminders (people, places, conversations) associated with the traumatic event. While avoidance may temporarily reduce distress, it can significantly limit engagement in meaningful activities, restrict access to social support, and prevent processing of the traumatic experience, potentially maintaining PTSD symptoms. The items within this symptom cluster were rated as follows:"*

For "Moderate", "Severe", or "Very Severe" scores on the Sense of Threat symptom cluster:

*"The respondent's **Sense of Threat** symptom cluster score is on the XXst/nd/rd/th percentile when compared to young people in a trauma-exposed normative sample, which is within the <"Minimal" | "Mild" | "Moderate" | "Severe" | "Very Severe"> range. This reflects the respondent's heightened vigilance and physiological reactivity, manifesting as being constantly 'on guard' or easily startled. This persistent sense of threat can lead to chronic stress, exhaustion, sleep difficulties, irritability, and concentration problems. The hypervigilance may cause the respondent to misinterpret neutral situations as dangerous, affecting their ability to feel safe in everyday environments. The items within this symptom cluster were rated as follows:"*

For "Moderate", "Severe", or "Very Severe" scores on the PTSD related functional impairment indicator:

*"The respondent's **PTSD related functional impairment** score is on the XXst/nd/rd/th percentile when compared to young people in a trauma-exposed normative sample, which is within the <"Minimal" | "Mild" | "Moderate" | "Severe" | "Very Severe"> range. This indicates that PTSD symptoms are significantly impacting the respondent's daily life, including relationships with friends and family, schoolwork, other important areas of functioning (e.g., hobbies, other relationships), and general happiness. This impairment may manifest as difficulties maintaining social connections, reduced performance or attendance at school, and limitations in engaging in previously valued activities or hobbies. The degree of functional disruption suggests that these symptoms are actively interfering with quality of life. The items within this indicator were rated as follows:"*

**DSO Symptoms and Functioning**

For "Moderate", "Severe", or "Very Severe" scores on the Affective Dysregulation symptom cluster:

*"The respondent's **Affective Dysregulation** symptom cluster score is on the XXst/nd/rd/th percentile when compared to young people in a trauma-exposed normative sample, which is within the <"Minimal" | "Mild" | "Moderate" | "Severe" | "Very Severe"> range. This suggests difficulties in emotional regulation, with the respondent experiencing either heightened emotional reactivity with challenges calming down when upset, emotional numbing, or both. These difficulties can lead to interpersonal problems, impulsive behaviors, and maladaptive coping strategies as the respondent struggles to manage intense emotional states or to connect with their emotions. The items within this symptom cluster were rated as follows:"*

For "Moderate", "Severe", or "Very Severe" scores on the Negative Self-Concept symptom cluster:

*"The respondent's **Negative Self-Concept** symptom cluster score is on the XXst/nd/rd/th percentile when compared to young people in a trauma-exposed normative sample, which is within the <"Minimal" | "Mild" | "Moderate" | "Severe" | "Very Severe"> range. This indicates the respondent holds persistent negative beliefs about themselves, experiencing feelings of worthlessness and/or viewing themselves as a failure. These negative self-perceptions can undermine self-efficacy, contribute to depression and hopelessness, and influence how the respondent interacts with others and approaches challenges in their life. The items within this symptom cluster were rated as follows:"*

For "Moderate", "Severe", or "Very Severe" scores on the Disturbances in Relationships symptom cluster:

*"The respondent's **Disturbances in Relationships** symptom cluster score is on the XXst/nd/rd/th percentile when compared to young people in a trauma-exposed normative sample, which is within the <"Minimal" | "Mild" | "Moderate" | "Severe" | "Very Severe"> range. This reflects difficulties in forming and maintaining close relationships, with the respondent feeling distant or cut off from others and/or finding it challenging to stay emotionally close to people. These relationship difficulties can lead to social isolation, reduced access to support networks, and further reinforce negative beliefs about themselves and others, potentially creating a cycle of interpersonal problems. The items within this symptom cluster were rated as follows:"*

For "Moderate", "Severe", or "Very Severe" scores on the DSO related functional impairment indicator:

*"The respondent's **DSO related functional impairment** score is on the XXst/nd/rd/th percentile when compared to young people in a trauma-exposed normative sample, which is within the <"Minimal" | "Mild" | "Moderate" | "Severe" | "Very Severe"> range. This indicates that disturbances in self-organization (affective dysregulation, negative self-concept, and disturbances in relationships) are significantly impacting the respondent's daily life. These difficulties may manifest as problems in relationships, reduced performance or attendance at school, and limitations in engaging in previously valued activities or hobbies. The degree of functional disruption suggests that these symptoms are actively interfering with quality of life. The items within this indicator were rated as follows:"*

## Developer

Cloitre, M., Shevlin, M., Brewin, C. R., Bisson, J. I., Roberts, N. P., Maercker, A., Karatzias, T., & Hyland, P. (2018). The International Trauma Questionnaire: Development of a self-report measure of ICD-11 PTSD and Complex PTSD. *Acta Psychiatrica Scandinavica, 138*(6), 536–546. https://doi.org/10.1111/acps.12956

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## Assessment Questions

NovoPsych

# International Trauma Questionnaire – Child and Adolescent Version (ITQ-CA)

### Instructions:

Below are problems people can have after an upsetting or a stressful event. Thinking about that event, select how much the following things have bothered you in the PAST MONTH.

| | | Never | A little bit | Sometimes | A lot | Almost Always |
|---|---|---|---|---|---|---|
| 1 | Bad dreams reminding me of what happened. | 0 | 1 | 2 | 3 | 4 |
| 2 | Pictures in my head of what happened. Feels like it is happening right now. | 0 | 1 | 2 | 3 | 4 |
| 3 | Trying not to think about what happened. Or to not have feelings about it. | 0 | 1 | 2 | 3 | 4 |
| 4 | Staying away from anything that reminds me of what happened (people, places, things, situations, talks). | 0 | 1 | 2 | 3 | 4 |
| 5 | Being overly careful (checking to see who is around me). | 0 | 1 | 2 | 3 | 4 |
| 6 | Being jumpy. | 0 | 1 | 2 | 3 | 4 |

| | | Yes | No |
|---|---|---|---|
| 7 | Have any of the above problems interfered with getting along with friends? | 1 | 0 |
| 8 | Have they interfered with getting along with family? | 1 | 0 |
| 9 | Have they interfered with your school work? | 1 | 0 |
| 10 | Have they interfered with anything else that is important to you (hobbies, other relationships)? | 1 | 0 |
| 11 | Have they interfered with your general happiness? | 1 | 0 |

| | | Never | A little bit | Sometimes | A lot | Almost Always |
|---|---|---|---|---|---|---|
| 12 | Below are problems people report after traumatic or stressful events. They are about how you feel, what you believe about yourselves and others. Select how much the following things have bothered you in the past month.<br>Having trouble calming down when I am upset (angry, scared or sad). | 0 | 1 | 2 | 3 | 4 |
| 13 | Not being able to have any feelings or feeling empty inside. | 0 | 1 | 2 | 3 | 4 |
| 14 | Feeling like a failure. | 0 | 1 | 2 | 3 | 4 |

NovoPsych

| | | Never | A little bit | Sometimes | A lot | Almost Always |
|---|---|---|---|---|---|---|
| 15 | Thinking I am not a good person. | **0** | **1** | **2** | **3** | **4** |
| 16 | Not feeling close to other people. | **0** | **1** | **2** | **3** | **4** |
| 17 | Having a hard time staying close to other people. | **0** | **1** | **2** | **3** | **4** |

| | | Yes | No |
|---|---|---|---|
| 18 | Have any of the above problems interfered with getting along with friends? | **1** | **0** |
| 19 | Have they interfered with getting along with family? | **1** | **0** |
| 20 | Have they interfered with your schoolwork? | **1** | **0** |
| 21 | Have they interfered with anything else that is important to you (hobbies, other relationships)? | **1** | **0** |
| 22 | Have they interfered with your general happiness? | **1** | **0** |

## Developer Reference:

Cloitre, M., Shevlin, M., Brewin, C. R., Bisson, J. I., Roberts, N. P., Maercker, A., Karatzias, T., & Hyland, P. (2018). The International Trauma Questionnaire: Development of a self-report measure of ICD-11 PTSD and Complex PTSD. Acta Psychiatrica Scandinavica, 138(6), 536–546. https://doi.org/10.1111/acps.12956

Administer Now

## Sample Results

Assessment powered by NovoPsych

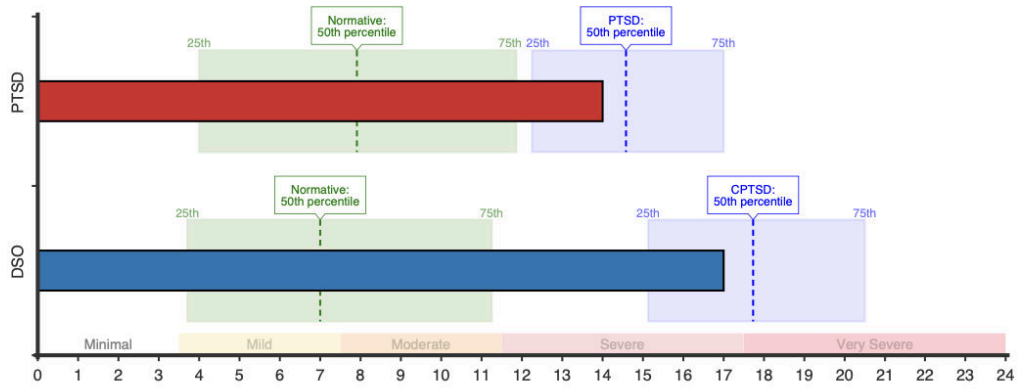
### International Trauma Questionnaire – Child and Adolescent Version (ITQ-CA)

| | | | |
|---|---|---|---|
| *Client Name* | Generic Client | *Date administered* | 15 Apr 2025 |
| *Date of birth (age)* | 1 Jan 2012 (13) | *Time taken* | 4 min 3s |
| *Assessor* | Dr Simon Baker | | |

### Results

| | Raw Score (0-24) | Percentile | Descriptor | Diagnostic Criteria |
|---|---|---|---|---|
| PTSD | 14 | 83 | Severe | Criteria met |
| DSO | 17 | 95 | Severe | Criteria met |

**ITQ-CA Subscale Scores Compared to Trauma-Exposed Normative and Diagnostic Samples**



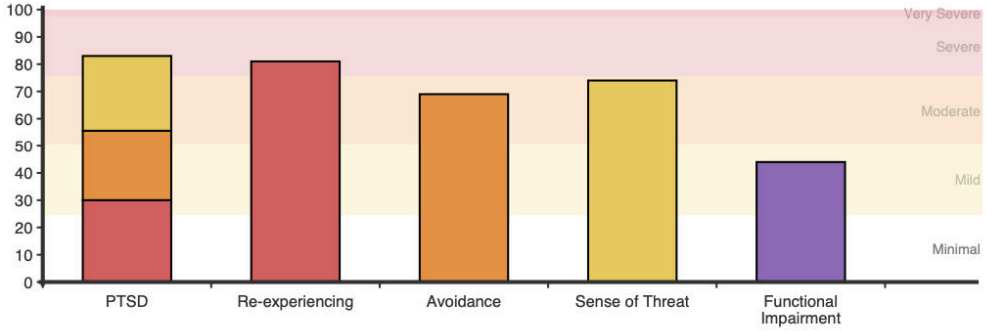
Assessment powered by
NovoPsych

| Client Name | Generic Client |
|---|---|

## PTSD Symptoms and Functioning

| | Raw Score | Percentile | Descriptor | Diagnostic Criteria |
|---|---|---|---|---|
| Re-experiencing (0-8) | 4 | 81 | Severe | Present |
| Avoidance (0-8) | 5 | 69 | Moderate | Present |
| Sense of threat (0-8) | 5 | 74 | Moderate | Present |
| Functional impairment (0-5) | 2 | 44 | Mild | Present |

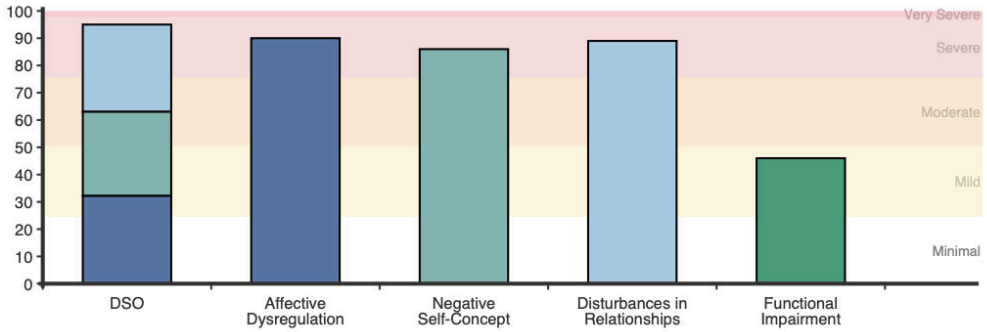
### ITQ-CA PTSD Normative Percentiles




## DSO Symptoms and Functioning

| | Raw Score | Percentile | Descriptor | Diagnostic Criteria |
|---|---|---|---|---|
| Affective dysregulation (0-8) | 6 | 90 | Severe | Present |
| Negative self-concept (0-8) | 5 | 86 | Severe | Present |
| Disturbances in relationships (0-8) | 6 | 89 | Severe | Present |
| Functional impairment (0-5) | 2 | 46 | Mild | Present |

### ITQ-CA DSO Normative Percentiles



Assessment powered by
NovoPsych

| Client Name | Generic Client |
|---|---|

## Interpretation

The responses on the International Trauma Questionnaire (ITQ) are consistent with a diagnosis of Complex PTSD (CPTSD) given that they meet the ITQ's diagnostic criteria for both PTSD and Disturbances in Self Organization (DSO).

The respondent's PTSD symptom severity score is on the 83rd percentile when compared to young people in a trauma-exposed normative sample, which is within the Severe range. When compared to young people meeting the ITQ's diagnostic criteria for PTSD, the respondent's PTSD symptom severity score is on the 43rd percentile.

The respondent's DSO symptom severity score is on the 95th percentile when compared to young people in a trauma-exposed normative sample, which is within the Severe range. When compared to young people meeting the ITQ's diagnostic criteria for CPTSD, the respondent's DSO symptom severity score is on the 42nd percentile.

**PTSD Symptoms and Functioning:**

The respondent's **Re-experiencing** symptom cluster score is on the 81st percentile when compared to young people in a trauma-exposed normative sample, which is within the Severe range. This suggests the respondent is experiencing intrusive memories, flashbacks, or nightmares where the traumatic event feels as though it is happening again in the present. These re-experiencing symptoms can be highly distressing, may occur unpredictably, and can interfere with daily functioning by disrupting concentration, sleep patterns, and emotional regulation. The items within this symptom cluster were rated as follows:
- *1. Bad dreams reminding me of what happened. (Sometimes)*
- *2. Pictures in my head of what happened. Feels like it is happening right now. (Sometimes)*

The respondent's **Sense of Threat** symptom cluster score is on the 74th percentile when compared to young people in a trauma-exposed normative sample, which is within the Moderate range. This reflects the respondent's heightened vigilance and physiological reactivity, manifesting as being constantly 'on guard' or easily startled. This persistent sense of threat can lead to chronic stress, exhaustion, sleep difficulties, irritability, and concentration problems. The hypervigilance may cause the respondent to misinterpret neutral situations as dangerous, affecting their ability to feel safe in everyday environments. The items within this symptom cluster were rated as follows:
- *6. Being jumpy. (A lot)*
- *5. Being overly careful (checking to see who is around me). (Sometimes)*

The respondent's **Avoidance** symptom cluster score is on the 69th percentile when compared to young people in a trauma-exposed normative sample, which is within the Moderate range. This indicates the respondent is actively avoiding internal reminders (thoughts, feelings) and/or external reminders (people, places, conversations) associated with the traumatic event. While avoidance may temporarily reduce distress, it can significantly limit engagement in meaningful activities, restrict access to social support, and prevent processing of the traumatic experience, potentially maintaining PTSD symptoms. The items within this symptom cluster were rated as follows:
- *3. Trying not to think about what happened. Or to not have feelings about it. (A lot)*
- *4. Staying away from anything that reminds me of what happened (people, places, things, situations, talks). (Sometimes)*

**DSO Symptoms and Functioning:**

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NovoPsych

| Client Name | Generic Client |
|---|---|

## Interpretation (cont.)

The respondent's **Affective Dysregulation** symptom cluster score is on the 90th percentile when compared to young people in a trauma-exposed normative sample, which is within the Severe range. This suggests difficulties in emotional regulation, with the respondent experiencing either heightened emotional reactivity with challenges calming down when upset, emotional numbing, or both. These difficulties can lead to interpersonal problems, impulsive behaviors, and maladaptive coping strategies as the respondent struggles to manage intense emotional states or to connect with their emotions. The items within this symptom cluster were rated as follows:
*- 12. Having trouble calming down when I am upset (angry, scared or sad). (A lot)*
*- 13. Not being able to have any feelings or feeling empty inside. (A lot)*

The respondent's **Disturbances in Relationships** symptom cluster score is on the 89th percentile when compared to young people in a trauma-exposed normative sample, which is within the Severe range. This reflects difficulties in forming and maintaining close relationships, with the respondent feeling distant or cut off from others and/or finding it challenging to stay emotionally close to people. These relationship difficulties can lead to social isolation, reduced access to support networks, and further reinforce negative beliefs about themselves and others, potentially creating a cycle of interpersonal problems. The items within this symptom cluster were rated as follows:
*- 16. Not feeling close to other people. (A lot)*
*- 17. Having a hard time staying close to other people. (A lot)*

The respondent's **Negative Self-Concept** symptom cluster score is on the 86th percentile when compared to young people in a trauma-exposed normative sample, which is within the Severe range. This indicates the respondent holds persistent negative beliefs about themselves, experiencing feelings of worthlessness and/or viewing themselves as a failure. These negative self-perceptions can undermine self-efficacy, contribute to depression and hopelessness, and influence how the respondent interacts with others and approaches challenges in their life. The items within this symptom cluster were rated as follows:
*- 15. Thinking I am not a good person. (A lot)*
*- 14. Feeling like a failure. (Sometimes)*

## Scoring and Interpretation Information

The International Trauma Questionnaire - Child and Adolescent Version (ITQ-CA) has two subscales:

- Post Traumatic Stress Disorder (PTSD) - assesses the core symptoms of PTSD according to the ICD-11, focusing on intrusive re-experiencing, deliberate avoidance, and persistent sense of threat.

- Disturbances in Self Organization (DSO) - assesses the additional symptom clusters that, together with PTSD symptoms, constitute Complex PTSD (CPTSD), and which reflect pervasive psychological disturbances that typically arise following prolonged or repeated traumatic experiences

It includes six items measuring PTSD symptoms from three symptom clusters:

- Re-experiencing (Items 1 and 2) - assesses intrusive memories, flashbacks, or nightmares where the traumatic event feels as though it is happening again in the present moment, rather

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| Client Name | Generic Client |
|---|---|

## Scoring and Interpretation Information (cont.)

than being remembered as a past event

- Avoidance (Items 3 and 4) - measures deliberate efforts to avoid internal reminders (thoughts, feelings, physical sensations) and external reminders (people, places, conversations, objects, activities, situations) that evoke memories of the traumatic event

- Sense of threat (Items 5 and 6) - evaluates persistent feelings of current danger, manifesting as hypervigilance (being "on guard" or watchful) and heightened startle response (being jumpy or easily startled)

It also includes six items measuring DSO symptoms from three symptom clusters:

- Affective dysregulation (Items 12 and 13) - measures difficulties managing emotions, including heightened emotional reactivity (difficulty calming down when upset) and emotional numbing (feeling emotionally shut down or disconnected from feelings)

- Negative self-concept (Items 14 and 15) - assesses persistent negative beliefs about oneself, including feelings of worthlessness and viewing oneself as a failure, reflecting a diminished sense of value or identity

- Disturbances in relationships (Items 16 and 17) - evaluates difficulties in forming and maintaining close relationships, feeling distant or cut off from others, and finding it challenging to stay emotionally close to people

The PTSD and DSO subscales are each accompanied by three items measuring associated functional impairments in relation to friends, family, school, other important areas (e.g., hobbies, other relationships), and general happiness.

- PTSD related functional impairment (Items 7, 8, 9, 10, and 11) - measures the impact of PTSD symptoms on relationships with friends and family, schoolwork, other important areas (e.g., hobbies, other relationships), and general happiness, indicating how significantly these symptoms disrupt daily functioning

- DSO related functional impairment (Items 18, 19, 20, 21, and 22) - measures the impact of DSO symptoms on relationships with friends and family, schoolwork, other important areas (e.g., hobbies, other relationships), and general happiness, indicating how significantly these disturbances disrupt daily functioning

Each symptom item is rated on a 5-point Likert-type scale from 0 to 4 and each functional impairment item is answered in a binary Yes (1) or No (0) format.

The scoring approach uses dichotomous scoring for diagnostic purposes and dimensional scoring for symptom severity.

*** Dichotomous Scoring ***

A score of 2 (Likert = "Moderately") or higher on a symptom item and a score of 1 ("Yes") on a functional impairment item indicates the presence (i.e., endorsement) of that symptom or impairment.

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| Client Name | Generic Client |
|---|---|

## Scoring and Interpretation Information (cont.)

PTSD is indicated if:
- at least one symptom is present from each PTSD symptom cluster, and
- there is at least one functional impairment associated with these PTSD symptoms.

Complex PTSD (CPTSD) is indicated if:
- at least one symptom is present from each PTSD symptom cluster,
there is at least one functional impairment associated with these PTSD symptoms,
- at least one symptom is present from each DSO symptom cluster, and
- there is at least one functional impairment associated with these DSO symptoms.

A person may receive a diagnosis of PTSD or CPTSD, but not both.

*** Dimensional Scoring ***

- The PTSD symptom severity score is the sum of items 1 to 6 and ranges from 0 to 24.

- The DSO symptom severity score is the sum of items 12 to 17 and ranges from 0 to 24.

The respondent's scores are presented as raw scores and as percentiles based on normative data for trauma-exposed children and adolescents, contextualising their scores relative to the typical scores of children and adolescents in this normative sample. For example, the 50th percentile represents the typical level of symptom severity for a child or adolescent who has been exposed to trauma (i.e., "Mild"), while scores on the 90th percentile fall within the top 10% and are considered "Severe".

Qualitative descriptors categorise the respondent's scores based on specific ranges of percentiles.

- "Minimal" - Below the 25th percentile (subscale score between 0 and 3)

- "Mild" - 25th to 50th percentile (subscale score between 4 and 7)

- "Moderate" - 51st to 75th percentile (subscale score between 8 and 11)

- "Severe" - 76th to 95th percentile (subscale score between 12 and 17)

- "Very Severe" - Above the 95th percentile (subscale score between 18 and 24)

A diagnostic criteria descriptor also accompanies each score, indicating whether diagnostic criteria for PTSD and DSO symptoms are met, and whether specific symptom clusters and functional impairments are present, according to the dichotomous scoring threshold. CPTSD is indicated if the diagnostic criteria descriptor says "Criteria met" for both the PTSD subscale and the DSO subscale.

On first administration, graphs are presented showing the respondent's scores as percentiles based on normative data for trauma-exposed children and adolescents (Baker et al., 2025). A graph is also presented comparing the respondent's PTSD and DSO symptom severity scores to two samples: (1) the normative sample of trauma-exposed children and adolescents; and (2) a diagnostic sample. For the PTSD symptom severity score, this diagnostic sample consists of children and adolescents meeting the ITQ-CA's criteria for PTSD. For DSO symptom severity

Assessment powered by NovoPsych

| Client Name | Generic Client |
|---|---|

## Scoring and Interpretation Information (cont.)

scores, the diagnostic sample consists of children and adolescents meeting the ITQ-CA's criteria for CPTSD. Shaded areas correspond to scores between the 25th and 75th percentile. This graph contextualises the respondent's scores relative to typical symptom severity levels in these samples.

If administered more than once, longitudinal graphs are presented for the respondent's raw PTSD and DSO symptom severity scores, which is useful for monitoring any changes in symptom severity over time and treatment progress and outcomes. A meaningful change in PTSD symptom severity is defined as a change of 7 or more points in the PTSD symptom severity score, and a meaningful change in DSO symptom severity is defined as a change of 6 or more points in the DSO symptom severity score, based on Reliable Change Index (RCI) calculations (i.e., a 6-7 or more point decrease indicates significant improvement; a 6-7 or more point increase indicates significant deterioration; and less than a 6-7 point change indicates no significant change).

## Client Responses

| | | Never | A little bit | Sometimes | A lot | Almost Always |
|---|---|---|---|---|---|---|
| 1 | Bad dreams reminding me of what happened. | 0 | 1 | **2** | 3 | 4 |
| 2 | Pictures in my head of what happened. Feels like it is happening right now. | 0 | 1 | **2** | 3 | 4 |
| 3 | Trying not to think about what happened. Or to not have feelings about it. | 0 | 1 | 2 | **3** | 4 |
| 4 | Staying away from anything that reminds me of what happened (people, places, things, situations, talks). | 0 | 1 | **2** | 3 | 4 |
| 5 | Being overly careful (checking to see who is around me). | 0 | 1 | **2** | 3 | 4 |
| 6 | Being jumpy. | 0 | 1 | 2 | **3** | 4 |

| | | Yes | No |
|---|---|---|---|
| 7 | Have any of the above problems interfered with getting along with friends? | 1 | **0** |
| 8 | Have they interfered with getting along with family? | **1** | 0 |
| 9 | Have they interfered with your school work? | 1 | **0** |
| 10 | Have they interfered with anything else that is important to you (hobbies, other relationships)? | 1 | **0** |
| 11 | Have they interfered with your general happiness? | **1** | 0 |

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**Client Name** Generic Client

| | | Never | A little bit | Sometimes | A lot | Almost Always |
|---|---|---|---|---|---|---|
| 12 | Below are problems people report after traumatic or stressful events. They are about how you feel, what you believe about yourselves and others. Select how much the following things have bothered you in the past month.<br>Having trouble calming down when I am upset (angry, scared or sad). | 0 | 1 | 2 | **3** | 4 |
| 13 | Not being able to have any feelings or feeling empty inside. | 0 | 1 | 2 | **3** | 4 |
| 14 | Feeling like a failure. | 0 | 1 | **2** | 3 | 4 |
| 15 | Thinking I am not a good person. | 0 | 1 | 2 | **3** | 4 |
| 16 | Not feeling close to other people. | 0 | 1 | 2 | **3** | 4 |
| 17 | Having a hard time staying close to other people. | 0 | 1 | 2 | **3** | 4 |

| | | Yes | No |
|---|---|---|---|
| 18 | Have any of the above problems interfered with getting along with friends? | 1 | **0** |
| 19 | Have they interfered with getting along with family? | **1** | 0 |
| 20 | Have they interfered with your schoolwork? | 1 | **0** |
| 21 | Have they interfered with anything else that is important to you (hobbies, other relationships)? | 1 | **0** |
| 22 | Have they interfered with your general happiness? | **1** | 0 |

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| Client Name | Generic Client |
|---|---|

## Full Results

| | Raw Score | Scaled Score (0-10) | Normative Percentile | Diagnostic Percentile | Descriptor | Diagnostic Criteria |
|---|---|---|---|---|---|---|
| PTSD (0-24) | 14 | 5.83 | 83 | 43 | Severe | Criteria met |
| Re-experiencing (0-8) | 4 | 5 | 81 | 44 | Severe | Present |
| Avoidance (0-8) | 5 | 6.25 | 69 | 35 | Moderate | Present |
| Sense of threat (0-8) | 5 | 6.25 | 74 | 43 | Moderate | Present |
| PTSD related functional impairment (0-5) | 2 | 4 | 44 | 13 | Mild | Present |
| DSO (0-24) | 17 | 7.08 | 95 | 42 | Severe | Criteria met |
| Affective dysregulation (0-8) | 6 | 7.5 | 90 | 43 | Severe | Present |
| Negative self-concept (0-8) | 5 | 6.25 | 86 | 25 | Severe | Present |
| Disturbances in relationships (0-8) | 6 | 7.5 | 89 | 42 | Severe | Present |
| DSO related functional impairment (0-5) | 2 | 4 | 46 | 2 | Mild | Present |