**Background:** There is no currently available measure of a child/adolescent’s exposure to possibly traumatic events which is simple, brief, and well validated. Several structured interviews have been developed, as well as a couple of rather cumbersome but thorough paper & pencil instruments. This is the only one-pager I know of. Note that although the language is simple and clear, the format can be a bit confusing for some people.

**What it measures:** History of exposure to the child/adolescent’s adverse life events; past and current distress level for each of the endorsed events.

**Time Estimate:** Administration - 5 minutes; Scoring - 1 minute

**Languages:** English, German, Spanish, Persian, Swedish

**Description:** The 16 items cover a broad range of potential trauma and loss events and ask for an estimate of emotional impact at both the time of occurrence and the present. Available in student and parent forms (LITE-S, LITE-P)

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**Psychometric Properties:** Similar measures of trauma history for adults have been found to have adequate reliability; however, items are occasionally reported on only the initial test or on the retest, but not both (Goodman, Corcoran, Turner, Yuan, & Green, 1998; Knight, Rierdan, Meschede, & Lasardo, 1997). Regarding this type of instrumentation, validation of reported incidents has not yet been studied.

The LITE-S and the LITE-P together formed the basis of a clinician rating which correlated with current post-traumatic symptoms CROPS r=.60; PROPS r=.56 (Greenwald & Rubin, 1999; note that the rating of current distress was not included in that version of the LITE). Correlations in other studies: LITE-S/CROPS r=.48-.57; LITE-S/TSCC r=.53-.56 (see Greenwald, Rubin, Russell, & O’Connor, 2002). The parent and student forms of the LITE sometimes show modest discrepancies (Greenwald & Rubin, 1999), possibly reflecting parent-child differences in forgetting, willingness to disclose, or access to information.
Instructions for Use

Population: Student form: children grades 3 and higher. Younger children and those with reading difficulty may require assistance in completing the form.

Parent form: for children of any age.

Suggested Uses: Screening for trauma/loss exposure in mental health, education, medical, or community settings, as a basis for a more detailed clinical interview on trauma and loss history. Can also be used in research to obtain an estimate of the child’s trauma/loss history.

Administration: Paper-and-pencil administration is typical, group or individual; however, some younger children and those with reading problems may need assistance. Interview administration is also acceptable, face-to-face or by telephone.

Scoring: There is no scoring system. However, in one study (Greenwald & Rubin, 1999) the LITE-S and LITE-P responses were converted to a ranking of exposure severity by using clinician ratings; these ratings did predict level of post-traumatic symptoms. In another study (Greenwald, Satin, Azubuike, Borgen, & Rubin, 2001) multiple scoring systems were used to predict level of post-traumatic symptoms. No one system was clearly superior; probably the simplest system would be to sum the number of endorsed items.

Institutional and Research Users: Major users are asked to either publish their own validation studies, or share their coded data (no identifying information) with the instrument’s developer for use in further validation studies. Of particular interest is use with community samples, special problem populations, different ages and ethnic/cultural samples, concurrent additional assessment, and repeated use. Authorship credit accorded as per APA standards. Would also appreciate copies of any articles published using one or more of these measures.

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References


