Ages 0–5
CTAC Trauma Screening Checklist: Identifying Children at Risk

Please check each area where the item is known or suspected. The screen can help determine whether a comprehensive assessment may be helpful in understanding the child’s functioning and needs.

Note: Endorsing exposure items does not necessarily mean substantiation of the child’s experience; it is for screening purposes only.

1. Are you aware of or do you suspect the child has experienced any of the following:
   - Physical abuse
   - Neglectful home environment
   - Emotional abuse
   - Exposure to domestic violence
   - Exposure to other chronic violence
   - Sexual abuse or exposure
   - Parental substance abuse
   - Impaired parenting (mental illness)
   - Exposure to drug activity aside from parental use
   - Pre-natal exposure to alcohol/drugs
   - Lengthy or multiple separations from parent
   - Placement outside of the home (foster care, kinship care, residential)
   - Loss of significant people, places etc.
   - Frequent/multiple moves; homelessness
   - Other __________________________

Even if no areas are checked above, but multiple concerns are present below, further assessment may still be indicated, as there is a strong relationship between the following areas and trauma exposure.

2. Does the child show any of these behaviors:
   - Aggression towards self; self-harm
   - Excessive aggression or violence towards others
   - Explosive behavior (Going from 0-100 instantly)
   - Hyperactivity, distractibility, inattention
   - Excessively shy
   - Oppositional and/or defiant behavior
   - Sexual behaviors not typical for age
   - Difficulty with sleeping, eating, or toileting
   - Social/developmental delays in comparison to peers
   - Repetitive violent and/or sexual play (or maltreatment themes)
   - Unpredictable/sudden changes in behavior (i.e., attention, play)
   - Other __________________________

3. Does the child exhibit any of the following emotions or moods:
   - Excessive mood swings
   - Frequent, intense anger
   - Chronic sadness, doesn’t seem to enjoy any activities, depressed mood
   - Flat affect, very withdrawn, seems emotionally numb or “zoned out”
   - Other __________________________

4. Does the child have any of the following relational/attachment difficulties:
   - Lack of eye contact, or avoids eye contact
   - Sad or empty eyed appearance
   - Overly friendly with strangers (lack of appropriate stranger anxiety)
   - Vacillation between clingingness and disengagement and/or aggression
   - Doesn’t reciprocate when hugged, smiled at, spoken to
   - Doesn’t seek comfort when hurt or frightened; shakes it off, or doesn’t seem to feel it
   - Has difficulty in preschool or daycare
   - Other __________________________

Child’s Identifier: __________________________ Age: ________ Sex: ________
County/Site: __________________________ Race: ________ Date: ________

Henry, Black-Pond, & Richardson (2010), rev: 9/14 Western Michigan University
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