The Trauma History Questionnaire: A Tool for Investigating Traumatic Events Associated with Complex Trauma

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INTRODUCTION

The Trauma History Questionnaire - Revised (THQ-R; Green, 1996) is an instrument that assesses various characteristics of experienced traumatic events, including the number of traumas, ages at which they occur and the impact felt by the individual; these factors are not always evaluated when examining trauma, but are important for assessing complex trauma. However, the THQ-R is not widely used and a well-developed scoring system is not yet developed.

AIM: To explore possible subscales of the THQ-R that capture specific experiences of trauma and to investigate the influence of childhood trauma on symptoms of PTSD, depression, anxiety, and hostility in adulthood.

METHOD

PARTICIPANTS:
A community sample of pregnant women (N = 120) were recruited from public locations, programs, and agencies primarily serving low-income families. As part of a larger investigation, women participated in a 2 1/2-hour interview during their last trimester of pregnancy and received $25.00 compensation. During this interview, which often took place in the women's homes, participants completed a semi-structured interview about their feelings about pregnancy and motherhood and verbally completed numerous questionnaires about their history, current and past relationships, psychosocial experiences, and general health.

MEASURES:
1. Trauma History. The Trauma History Questionnaire - Revised (THQ-R; Green, 1996) is a 28-item self-report measure designed to assess history of exposure to traumatic events including crime, sexual assault/abuse, war, tragic death, and disaster. Respondents endorse the presence, number, and first and last time of events, as well as the maximum amount of fear, helplessness, and horror experiences from 1 (not at all) to 5 (extreme).
2. Symptoms of Post-Traumatic Stress. The PTSD Checklist (PCL; Weathers, Litz, Herman, Huska & Keane, 1993) is a widely used, 17-item questionnaire designed to assess specific symptoms of PTSD. Respondents indicate how much they have been bothered by various problems in the past month using a Likert-type scale from 1 (not at all) to 5 (extreme). There are 4 subscales: intrusion, avoidance, dysphoria and hyperarousal. It has excellent internal consistency in war veterans, victims of motor vehicle accidents, and sexual assault survivors, with coefficient alphas ranging from .94 to .97. Alpha in the present study was .87.
3. Depression. The Edinburgh Postpartum Depression Scale (EPDS; Cox, Holden, & Sagovsky, 1987) is another widely used measure consisting of 10 items designed to assess for prenatal and postnatal depressive symptoms in the past week. Item responses (0 – 3) are summed; a score of 10 or greater indicates possible depression (range 0 – 30). Previous studies have reported alphas around .87 and split-half reliability of .88. Alpha in the present study was .84.
4. Anxiety and Hostility. The Brief Symptom Inventory. (BSI; Derogatis, 1993) is a 53-item self-report designed to assess general psychological symptoms. The 11 anxiety and hostility items were chosen for the present study. Respondents indicate how much they have been bothered or distressed by various problems in the past week using a Likert-type scale from 0 (not at all) to 4 (extremely). The BSI has high internal consistency, with alphas ranging from .70 to .89 for inpatients and outpatients. Convergent validity has also been established. Alphas in the present study were .77 and .80 respectively.

RESULTS

The results indicate that the proposed subscales of the THQ-R were significantly correlated with PTSD symptoms, depression, anxiety and hostility with the exception of personal emotional trauma and hostility. In addition, childhood experiences of trauma were better predictors of current mental health symptoms than recent, adult traumatic experiences. Further investigation of these subscales would be valuable in understanding the effects of various types of trauma at various points across the lifespan. These results have important implications for future investigations of trauma across the lifespan, as well as those working with survivors traumatic events.

DISCUSSION

These results indicate that the proposed subscales of the THQ-R were significantly correlated with PTSD symptoms, depression, anxiety and hostility with the exception of personal emotional trauma and hostility. In addition, childhood experiences of trauma were better predictors of current mental health symptoms than more recent, adult traumatic experiences. Further investigation of these subscales would be valuable in understanding the effects of various types of trauma at various points across the lifespan. These results have important implications for future investigations of trauma across the lifespan, as well as those working with survivors traumatic events.