



james bell
associates

Measuring Child Welfare Outcomes: A Compendium of Standardized Instruments

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3033 WILSON BLVD
SUITE 650
ARLINGTON, VA 22201
PHONE: (703) 528-3230
FAX: (703) 243-3017

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Introduction

Purpose of the Document

Each year, the Children’s Bureau (CB) awards discretionary grants to encourage the development and implementation of innovative child welfare services and practices that improve permanency, safety, and well-being outcomes for children and families. Child welfare discretionary grantees include State and local human service agencies, tribal governments, universities, nonprofit organizations, and other eligible organizations. These grantees have focused on a broad range of child welfare issues, from diligent recruitment of foster parents to addressing trafficking within the child welfare population. Although the discretionary grantees target a variety of problems, they often work toward similar outcomes at the child, caregiver, family, and organization level.

All discretionary grantees conduct an evaluation of their project, typically with the assistance of a third-party evaluator, to identify effective service approaches that promote desired child welfare outcomes. This document serves as a compendium of common child-, caregiver-, family-, and organization-level instruments that have been used by discretionary grantees to measure changes in child welfare-related outcomes.

Limitations

This document is meant to serve as a useful resource for future CB discretionary grantees as well as for the evaluators of other public, nonprofit, and private child welfare initiatives. However, it is not designed to be an exhaustive inventory of all child welfare measurement tools. In addition, serving children and families involved with the child welfare system requires partnerships and involvement with many other child and family service systems, such as education, juvenile justice, and adult corrections. Depending on their project’s scope of work, evaluators may need to identify instruments from related fields that are not represented in this compendium.

Standardized Instruments for Measuring Common Child Welfare Outcomes

Public child welfare agencies are responsible for working toward the safety, permanency, and well-being of all children involved in the child welfare system. The tables in this compendium list instruments that assess various aspects of child and family safety and well-being¹ as well as organization-level factors that could influence child safety and well-being. These instruments were selected for three primary reasons. First, they are related to typical social issues that result in child removal, including neglect, physical abuse, sexual abuse, substance abuse, and domestic violence. Second, they are related to the child- and family-level domains that child welfare services attempt to improve, such as behavioral health, mental health, social support, and parenting behaviors. Third, these instruments have been commonly used by a wide range of CB discretionary grantees.

The compendium is organized by the subject of analysis. The first section presents instruments that ask questions about the child, with subsequent sections listing instruments about caregivers/parents, families, and then organizations. Within each section, the tables are organized by subcategory. Each table provides the following information about the instruments:

- **Respondent:** The person who answers the instrument's questions
- **Administration:** Method for administering the instrument (e.g., self-administered, administered by trained professional, completed based on observation, or structured interview completed by trained professional)
- **Number of Items:** The number of items in the instrument
- **Minutes To Complete:** The approximate number of minutes to complete the instrument
- **Topics Covered:** An overview of the topics covered by the instrument
- **Age Range:** The age range that the instrument is designed for, if applicable
- **Item Type:** Whether the items are scaled (e.g., Likert scale, interval), dichotomous (e.g., yes or no), or qualitative
- **References:** Associated references, including journal articles and links to the publisher or survey

¹Addressing well-being has been a priority of ACF and the Children's Bureau and has been supported legislatively through the Adoption and Safe Families Act of 1997, the Child Abuse Prevention and Treatment Reauthorization Act of 2010, and the Child and Family Services Improvement and Innovation Act of 2011. In April 2012, ACF released an Information Memorandum outlining the Federal priorities of promoting social and emotional well-being for children and youth receiving child welfare services and encouraging child welfare agencies to focus on improving the behavioral and social-emotional outcomes of children who have experienced abuse and/or neglect (Administration for Children and Families, 2012).

Many instruments are copyrighted, while others are in the public domain. Some instruments are available online and others need to be obtained from the publisher. Information on accessing these instruments is provided when possible. Cells in the tables are shaded in grey when information was not available.

Child-Level Instruments

The primary outcomes of interest in child welfare settings—improved safety, permanency, and well-being—are usually measured at the child level. Therefore, the majority of instruments used in child welfare settings collect data on the child. Instruments in tables 1 through 11 assess children’s strengths and needs, including physical, emotional, developmental, and social/relational functioning.²

Table 1. Child Level: Behavioral Domains
Instruments that identify/assess behavioral issues

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Behavior Rating Index for Children (BRIC)	Parent, caregiver, or teacher	Self-administered	13	<5	Assesses the presence and severity of children’s behavior problems.	Best suited to school-age and older children	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Stiffman, Orme, Evans, Feldman, & Keeney, 1984) https://cyfernetsearch.org/sites/default/files/PsychometricsFiles/Stiffman-Behavior%20Rating%20Index%20of%20Children%20%28Parents%29.pdf

²In addition to the child-level well-being instruments described here, the Children’s Bureau also developed an overview of early- and middle-childhood measures of well-being. They can be accessed at <http://www.acf.hhs.gov/programs/cb/resource/well-being-instruments-early-childhood> and <http://www.acf.hhs.gov/programs/cb/resource/well-being-instruments-adolescence>.

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Child and Adolescent Functional Assessment Scale (CAFAS)	Child	Administered by practitioner	315	10	Assesses the child's degree of impairment in functioning due to emotional, behavioral, or psychiatric problems. Constructs measured include aggression and conduct problems.	7-17 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Hodges, 1994) (Hodges & Gust, 1995)
Child Behavior Checklist (CBCL 6-18)	Parent or caregiver	Self-administered or administered through structured interview by practitioner	130	15	Assesses behavioral problems, disabilities, strengths, and social competencies of children. It can also be used to measure behavior change over time or after treatment. There are two versions of this scale to assess children ages 1-5 and 6-18.	1-5 years, 6-18 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.friedsnrc.org/download/outcomesources/toolkit/annot/cbcl.pdf
Eyberg Child Behavior Inventory (ECBI)	Parent or caregiver	Self-administered	36	5-10	Assesses the type of child behavior problems and the degree to which parents find them problematic. The Intensity Scale measures the frequency of each problem behavior. The Problem Scale reflects parents' tolerance of the behaviors and the distress caused.	2-16 years	<input checked="" type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www4.parrinc.com/Products/Product.aspx?ProductID=ECBI (Eyberg & Pincus, 1999) (Eisenstadt, McElreath, Eyberg, & McNeil, 1994) (Eyberg & Ross, 1978) (Funderburk, Eyberg, Rich, & Behar, 2003) (Rich & Eyberg, 2001)

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Revised Behavior Problem Checklist (PAR Edition)	Parent, caregiver, or teacher	Self-administered	89	20	Assesses conduct disorder, socialized aggression, attention problems-immaturity, anxiety-withdrawal, psychotic behavior, and motor tension-excess.	5-18 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Quay & Peterson, 1996)
Social Skills Rating System (SSRS)	Parent, caregiver, or teacher	Self-administered	37-52	10-25	Screens and classifies student social behavior in educational and family settings. Includes three subscales: social skills, problem behaviors, and academic competence.	3-18 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Salkind, 2007) (Gresham & Elliot, 1990)

Table 2. Child Level: Cognitive/Academic Aptitude
Intelligence tests or instruments that that assess academic skills

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Leiter-R	Clinician	Completed by trained examiner based on observation		25-40	Measures general intelligence/ cognitive ability. Domains include Global IQ, Visualization and Reasoning, and Attention and Memory. Also includes four social-emotional rating scales (Examiner, Parent, Self, and Teacher) that provide behavioral observation information about the examinee.	2-21 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://access.stoelting.co.com/stoelting/productlist13c.aspx?catid=1945&home=Psychological

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Peabody Individual Achievement Test	Child	Administered by trained examiner		60	Assesses academic achievement, including General Information, Reading Recognition, Reading Comprehension, Mathematics, and Spelling. Can be used to determine grade and age equivalents.	5-18 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.speechpathology.com/articles/validating-peabody-individual-achievement-test-1276 http://hsadventures.org/test/peabody
Peabody Picture Vocabulary Test (PPVT)³	Adults and children	Administered by trained examiner	204	10-15	Provides an estimate of receptive vocabulary achievement and verbal ability.	2-90 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://psychcorp.pearsonassessments.com/HALWEB/Cultures/en-us/Productdetail.htm?Pid=PAa12010
Wide Range Achievement Test⁴	Adults and children	Self-administered		15-45	Assesses basic academic skills of reading, spelling, and math computation. Two alternate forms can be used interchangeably with comparable results, which allows for retesting within short periods of time without practice effects.	5-94 years	<input type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input checked="" type="checkbox"/> Qualitative	http://www4.parinc.com/Products/Product.aspx?ProductID=WRAT4

³The PPVT can also be administered to adult caregivers, but is only listed once in this compendium in the child-level category.

⁴The Wide Range Achievement Test can also be administered to adult caregivers, but it is only listed once in this compendium in the child-level category.

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Woodcock-Johnson ⁵	Adults and children	Administered by trained examiner			Assesses students' strengths and weaknesses across a variety of domains, including comprehension-knowledge, long-term retrieval, visual-spatial thinking, auditory processing, fluid reasoning, processing speed, short-term memory, quantitative knowledge, and reading-writing.	2-90 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.riversidepublishing.com/products/wj-iv/?gclid=CjwKEAjw96aqBRDNhM6MtJfE-wYSJADiMfggFcqrTk0jvC1D9ReVNHIEWOghZqynVoPvZPAYT9yXJxoCLtTw

⁵The Woodcock-Johnson can also be administered to adult caregivers, but it is only listed once in this compendium in the child-level category.

**Table 3. Child Level: Developmental Domains
Instruments that assess development**

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Ages and Stages Questionnaire (ASQ)	Parent or caregiver	Completed by parent or caregiver based on observation	22-36	15	Screens infants and young children for delays in five developmental areas: communication, gross motor, fine motor, problem solving, and personal-social.	0-6 years	<input checked="" type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input checked="" type="checkbox"/> Qualitative	http://www.agesandstages.com/ (Bricker, Shoen Davis, & Squires, 2004) (Briggs et al., 2012) (Cooper, Masi, & Vick, 2009) (Printz, Borg, & Demaree, 2003) (Squires, Bricker, Heo, & Twombly, 2001) (Squires, Bricker, & Twombly, 2004) (Wright & Holm-Hansen, 2010)
Battelle Developmental Inventory, 2nd Edition (BDI-2)	Parent or caregiver	Completed by parent or caregiver based on observation	450	60-90	Screens and evaluates early childhood developmental milestones in five domains: Personal-Social, Adaptive, Motor, Communication, and Cognitive.	0-7 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.riverpub.com/products/bdi2/index.html (Bliss, 2007) (Newborg, 2005)

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Denver Developmental Screen II	Clinician	Completed by clinician based on observation	125	20	Covers four general functions: personal social, fine motor adaptive, language, and gross motor. This test is a revision and update of the Denver Developmental Screening Test, DDST (1967). It is designed for use by the clinician, teacher, or other early childhood professional to monitor the development of infants and preschool-aged children.	2 weeks-6 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Frankenburg & Dobbs, 1967) (Glascoe et al., 1992)
Devereux Early Childhood Assessment (DECA)	Parent or teacher	Completed by parent or caregiver based on observation	62	15	Evaluates children on 27 Protective Factor items and 11 Behavioral Concern items.	0-9+ years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	https://www.kaplanco.com/show/assessment-and-evaluation/devereux-assessments-deca-dessa
Test of Sensory Functions in Infants (TSFI)	Clinician	Completed by clinician based on observation	24	20	Helps identify infants with sensory integrative dysfunction, including those at risk for developing learning disabilities as they grow older. It provides objective criteria that determine whether, and to what extent, an infant has deficits in sensory functioning.	4-18 months	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.wpspublish.com/store/p/3068/test-of-sensory-functions-in-infants-tsfi (Campbell, 1999) (Jirikowic, Engel, & Deitz, 1997)

Table 4. Child Level: General Functioning

Instruments that assess multiple domains, such as physical and/or mental health, school performance, and social relationships

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Bayley Scales of Infant and Toddler Development, 3rd Edition (Bayley-III)	Parent or caregiver	Completed by clinician based on observation		10-20	Screens for cognitive, language, social-emotional, and motor developmental delays.	1-42 months	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.pearsonclinical.com/childhood/products/100000123/bayley-scales-of-infant-and-toddler-development-third-edition-bayley-iii.html
Behavior and Emotional Rating Scale (BERS)	Child	Administered by parents, teachers, counselors, and clinicians	60	10	Assesses children's emotional and behavioral strengths in five subscales: Interpersonal Strength, Family Involvement, Intrapersonal Strength, School Functioning, and Affective Strength.	5-18 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input checked="" type="checkbox"/> Qualitative	http://www.proedinc.com/customer/productView.aspx?ID=3430
Child and Adolescent Social and Adaptive Functioning Scale (CASAFS)	Child	Self-administered	24	5-10	Assesses school performance, peer relationships, family relationships, and home duties/self-care.	10-17 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Spence, Donovan, & Breechman-Toussaint, 2000)

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Child Functional Assessment Rating Scale (CFARS)	Child	Administered by a trained staff member	16		Assesses functioning in 16 domains: Depression, Hyperactivity, Cognitive Performance, Traumatic Stress, Interpersonal Relationships, ADL Functioning, Work or School, Danger to Others, Anxiety, Thought Process, Medical/Physical, Substance Abuse, Behavior in “Home” Setting, Socio-Legal, Danger to Self, and Security/ Management Needs.		<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://outcome.s.fmhi.usf.edu/cfars.cfm http://outcome.s.fmhi.usf.edu/assets/docs/cfarsmanual.pdf (Hodges & Wong, 1996) (Schwartz, 1999) (Ward & Dow, 1998)
MacArthur Health and Behavior Questionnaire	Parent, teacher, or child	Administered by parent or teacher, or self-administered	140	20-30	Contains 4 health domains and 18 preliminary subscales covering emotional and behavioral symptoms, physical health, social adaptation, and school adaptation.	4-18 years	<input checked="" type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Armstrong, Goldstein, & The MacArthur Working Group on Outcome Assessment, 2003) (Essex et al., 2002) (Lemery-Chalfant, et al., 2007)
Ohio Youth Problem, Functioning, and Satisfaction Scales—Short Form (Ohio Scales)	Parent, agency worker, and child	Self-administered	40		Assesses problem severity, functioning, hopefulness, and satisfaction with services.	5-18 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Turchik, Karpenko, & Ogles, 2007) (Dowell & Ogles, 2008) (Ogles, Melendez, Davis, & Lunnen, 2001)

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Pediatric Quality of Life Inventory (PedsQL)	Parent or child	Self-administered	23	5	Measures child well-being with subscales assessing physical functioning (eight items), emotional functioning (five items), social functioning (five items), and school functioning (five items). Parents use PedsQL to rate the quality of life for their children, and children use the form to rate their own quality of life.	2-18 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.pedsql.org/about_pedsql.html
Personality Inventory for Children (PIC)	Parent	Administered by school/clinical psychologist	275	40	Assesses cognitive impairment, family dysfunction, psychological discomfort, social withdrawal, impulsivity and distractibility, delinquency, reality distortion, somatic concern, and social skills deficit.	5-19 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://mhs.com/product.aspx?gr=edu&prod=pic2&id=overview
Preschool and Early Childhood Functional Assessment Scale (PECFAS)	Practitioner	Self-administered		10	Assesses a child's day-to-day function across critical life domains and determines whether a child's functioning improves over time. Domains include school, behavior toward others, moods/emotions, home, thinking problems, self-harm, substance use, and community.	3-7 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.mhs.com/product.aspx?gr=cli&prod=pecfas&id=overview
Preschool Behavior Checklist (PBCL)	Teacher	Self-administered	22	5-10	Assesses emotions, conduct, temper, activity level, concentration, social relations, speech, language, habits, wetting, and soiling.	2-5 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(McGuire & Richman, 1986)

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
SF-10 Health Survey for Children	Parent or caregiver	Self-administered	10	2-3	Assesses physical functioning, role/social emotional, role/social physical, bodily pain, general behavior, mental health, self-esteem, and general health perceptions.	5-8 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.qualitymetric.com/WhatWeDo/SFHHealthSurveys/SF12v2HealthSurvey/tabid/186/Default.aspx
Strengths & Difficulties Questionnaire for Children	Parent, teachers, or child	Self-administered	25		Each version includes between one and three of the following components: (1) 25 items on psychological attributes (the 5 scales include emotional symptoms, conduct problems, hyperactivity/ inattention, peer relationship problems, and prosocial behavior); (2) an impact supplement which asks whether the respondent thinks the young person has a problem, and if so, enquire further about chronicity, distress, social impairment, and burden to others; and (3) followup questions for use after an intervention, asking whether the intervention reduced problems or helped in other ways.	3-16 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input checked="" type="checkbox"/> Qualitative	http://www.sdqinfo.com/py/sdqinfo/f0.py (Goodman R. , 1997) (Goodman R. , 2001) (Goodman & Scott, 1999) (Goodman, Ford, Simmons, Gatward, & Meltzer, 2000) (Goodman R. , 1999)
Vineland Adaptive Behavior Scales	Parent, child	Structured interview conducted by clinician and self-administered		20-90	Assesses communication, daily living skills, and socialization.	0-90 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Sparrow, Ciccettim, & Balla, 2006)

Table 5. Child Level: Mental Health Symptoms and/or Diagnosis
Instruments that screen for Diagnostic and Statistical Manual of Mental Disorders (DSM)-related mental health disorders, such as depression, bipolar disorder, and anxiety

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Achenbach System of Empirically Based Assessment (ASEBA) Youth Self-Report (YSR)	Child	Self-administered	116	10	Measures youth's participation in social and academic realms. Assesses DSM-oriented scales measuring Affective Problems, Anxiety Problems, Somatic Problems, Attention Deficit/Hyperactivity Problems, Oppositional Defiant Problems, and Conduct Problems.	11-18 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input checked="" type="checkbox"/> Qualitative	http://www.aseba.org/ordering/ASEBA%20Reliability%20and%20Validity-School%20Age.pdf
Center for Epidemiologic Studies Depression Scale—Short Form (CES-D-SF) ⁶	Child or caregiver	Self-administered	7	5	Assesses symptoms of depression in the past week.	13 years and older	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Levine, 2013)
Child Depression Inventory	Child	Administered by clinician, examiner, parent, or teacher, or self-administered by child	27	5-15	Assesses major depressive disorder, dysthymic disorder, dissociative symptoms, and posttraumatic syndromes.	7-17 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Finch, Saylor, Edwards, & McIntosh, 1987) (Liss, Phares, & Liljequist, 2001) (Michael & Merrell, 1998)

⁶The Center for Epidemiologic Studies Depression Scale—Short Form (CES-D-SF) can also be administered to adult caregivers, but it is only listed once in this compendium in the child-level category.

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Diagnostic Infant and Preschool Assessment (DIPA)	Parent or caregiver	Structured interview conducted by clinician	517	30+	Assesses symptoms of posttraumatic stress disorder, major depression disorder, bipolar disorder, attention-deficit/hyperactivity disorder, oppositional defiant disorder, conduct disorder, separation anxiety disorder, specific phobia, social phobia, generalized anxiety disorder, obsessive compulsive disorder, reactive attachment disorder, and sleep disorders.	9 months -6 years	<input checked="" type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input checked="" type="checkbox"/> Qualitative	http://www.infant institute.org/measures-manuals/ (Scheeringa & Haslett, 2010) (DeYoung, Kenardy, Cobham, & Kimble, 2012) (DeYoung, Kenardy, & Cobham, 2011) (Salloum & Storch, 2011) (Gleason, Zeanah, & Dickstein, 2010)
Massachusetts Youth Screening Instrument (MAYSI-2)	Child	Self-administered	52	10-15	Identifies adolescents in juvenile justice facilities who may have special mental health needs.	12-17 years	<input type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Grisso et al., 2012)
Mood and Feelings Questionnaire ⁷	Child or adult	Self-administered	13-33	5-10	Assesses child and adult symptoms of depression and/or bipolar disorder.	8 years and older	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Angold et al., 1995) (Messer et al., 1995)

⁷The Moods and Feelings Questionnaire can also be administered to adult caregivers, but it is only listed once in this compendium in the child-level category.

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Pediatric Screen for Children (PSC-17)	Parent	Administered by clinician	17	3	Assesses ADHD, anxiety, depression, and externalizing/internalizing.	4-18 years	<input type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Gardner, Lucas, Kolko, & Campo, 2007) (Kostanecka et al., 2008)
Vanderbilt ADHD Diagnostic	Child	Administered by parent or teacher	43	10	Assesses ADHD, oppositional-defiant disorder, conduct disorder, anxiety, depression, mood, and classroom performance.		<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Wolraich, Feurer, Hannah, Baumgaertel, & Pinnock, 1998) (Bard, Wolraich, Neas, Doffing, & Beck, 2013)
Youth Outcome Questionnaire (YOQ) and Youth Outcome Questionnaire—Self-Report (YOQ-SR)	Child and parent	Administered by parent and self-administered by child	64	10	Measures treatment progress for children receiving mental health intervention. This tool tracks changes in functioning and consists of six scales: Intrapersonal Distress, Somatic, Interpersonal Relationships, Critical Items, Social Problems, and Behavioral Dysfunction.	4-17 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Goodman & Goodman, 2011) (Hill & Hughes, 2007) (Ridge, Warren, Burlingame, Wells, & Tumblin, 2009)
Youth's Inventory-4	Child	Self-administered	120	30	Assesses symptoms of a variety of adolescent psychiatric disorders based upon criteria identified in the DSM-IV.	12-18 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.ckmateplus.com/research/research_univ.htm

Table 6. Child Level: Relational/Social Domains

Instruments that assess access to social connections and/or ability to engage in meaningful relationships

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Emotional Regulation Checklist for Adolescents	Child	Self-administered	27		Assesses emotion modulation, situational responsiveness, and organization of behavior control. The instrument captures four of the five key areas of Relational Competency (social conduct, expression of emotion, impulse control, and insight).	9-16 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Shields & Cicchetti, 1997) (MacDermott, Gullone, Allen, King, & Tonge, 2010)
Index of Empathy for Children/Adolescents	Child	Self-administered	22		Assesses level of empathy for others.		<input checked="" type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://faculty.tu.ru.ca/wlroberts/bryant.pdf (Bryant, 1982) (Wied et al., 2007)
Preschool and Kindergarten Behavior Scales (PKBS-2)	Parent, caregiver, or teacher	Self-administered	76	12	Assesses social cooperation, social interaction, social independence, externalizing problems, and internalizing problems.	3-6 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Merrell, 1996)

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Youth Connections Scale (YCS)	Child	Administered by practitioners, supervisors, and evaluators	32	10-15	Measures number of meaningful connections or relationships the youth has with supportive adults; strength of those connections, including the frequency of contact and the consistency of the support the adult provides for the youth; the specific types of supports that have been identified as most important in the literature from feedback from former foster youth; and the overall level of connectedness of foster youth to caring and supportive adults.	15-21 years	<input checked="" type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input checked="" type="checkbox"/> Qualitative	http://z.umn.edu/YCS

Table 7. Child Level: Resilience and/or Protective Factors
Instruments that assess strengths, resilience, and protective factors

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Child and Youth Resilience Measure	Child	Administered by examiner	28	20	Assesses overall resilience, individual traits, relationship to caregiver, and contextual factors that facilitate a sense of belonging.	5-9 years, 10-23 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.resilienceproject.org/research/resources/tools/33-the-child-and-youth-resilience-measure-cyrm
Children's Hope Scale	Child	Self-administered	6	4	Measures dispositional hope (agency's ability to initiate and sustain action toward the goals) and pathways (capacity to find a means to carry out goals).	8-19 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Snyder et al., 1997)

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Developmental Assets Profile (DAP)	Child	Self-administered	58	15-20	Includes four external asset categories (support, empowerment, boundaries and expectations, and constructive use of time) and four internal asset categories (commitment to learning, positive values, social competencies, and positive identity).	11-18 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.sear.ch-institute.org/survey-services/surveys/developmental-assets-profile http://www.sear.ch-institute.org/system/files/DAPPressRelease.pdf
Resiliency Scales for Children and Adolescents	Child	Administered by examiner	74	15	Assesses three areas of resiliency: sense of mastery, sense of relatedness, and emotional reactivity.	9-18 years	<input type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input checked="" type="checkbox"/> Qualitative	http://www.personclinical.com/psychology/products/100000655/resiliency-scales-for-children-adolescents-a-profile-of-personal-strengths-rsca.html#tab-details
Survey of Protective Factors for Adolescents: Connection, Regulation, and Respect for Individuality	Child	Self-administered	44		Measures the constructs of connection and regulation. The instrument includes additional subscales measuring self-efficacy, social initiative, depression, antisocial behavior, interpersonal violence, alcohol use, and sexual behavior.	14-17 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Barber et al., 2007)

Table 8. Child Level: Self-Esteem/Self-Identity
Instruments that assess sense of self/self-esteem

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Piers-Harris Children's Self-Concept Scale, 2nd Edition (Piers-Harris 2) (PHCSCS-2)	Child	Administered by practitioner	60	10-15	Assesses across 6 subscales: physical appearance and attributes (11 items), freedom from anxiety (4 items), intellectual and school status (16 items), behavioral adjustment (14 items), happiness and satisfaction (10 items), and popularity (12 items). It is used in educational and clinical settings to identify specific problem areas and coping and defense mechanisms and to develop intervention techniques.	7-18 years	<input type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.mhs.com/product.aspx?gr=edu&prod=piersharris2&id=overview (Piers & Herzberg, 2002)
Rosenberg Self-Esteem Scale	Child or adult	Self-administered	10	5+	Gauges general self-esteem.	Adolescents, adults	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Rosenberg, 1989)
Self-Perception Profile for Children	Child	Administered by an adult	35		Assesses self-worth, scholastic competence, behavioral conduct, and sense of personal identity.	8-13 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	https://portfolio.edu/SusanHarter/page/44210 (Harter, 1982)

Table 9. Child Level: Service Needs

Instruments that assess strengths and needs and promote linking these needs to appropriate services

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Child and Adolescent Needs and Strengths (CANS)	Parent, caregiver, or child	Administered by a certified interviewer	41		Assesses problem presentation, risk behaviors, functioning, child safety, family and caregiver needs and strengths, and child strengths.		<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://praedfou ndation.org/tool s/the-child-and- adolescent- needs-and- strengths-cans/
Child and Adolescent Service Intensity Instrument (CASII)	Clinician	Self-administered		60-120	Assesses service intensity needs of children and adolescents presenting with psychiatric, substance use, and/or developmental concerns. It takes into account family factors, cultural considerations, community supports, environmental concerns, medical and behavioral health comorbidities, safety concerns, and responses to interventions. Considers three types of disorders: psychiatric disorders, substance abuse disorders, and developmental disorders.	6-18 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.aac ap.org/aacap/M ember_Resource s/Practice_Infor mation/CASII.as px

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Youth Level of Service/Case Management Inventory (YLS/CMI)	Child	Structured interview completed by clinician	42	30-40	Identifies youth's major needs, strengths, barriers, and incentives; selects the most appropriate goals for him/her; and produces an effective case management plan. Composed of seven sections: Assessment of Risk and Needs (prior and current offences, education, substance abuse, family, personality/behavior, peers, leisure/recreation, and attitudes/orientation); Summary of Risk and Needs Factors; Assessment of Other Needs/Special Considerations; Assessor's Assessment of the Juvenile's General Risk/Need Level; Contact Level; Case Management Plan; and Case Management Review.	12-17 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Schmidt, Hoge, & Gomes, 2005) (Hoge & Andrews, 2006)

Table 10. Child Level: Social-Emotional Domains

Instruments that assess social and emotional skills, including the management of feelings, prosocial behavior, and life satisfaction

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Baby Pediatric Symptom Checklist	Caregiver	Self-administered	25	2-12	Assesses the social/emotional areas of irritability, inflexibility, and difficulty with routines.	0-18 months	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Sheldrick et al., 2013)
Brief Infant Toddler Social Emotional Assessment (BITSEA)	Caregiver	Completed by caregiver or social worker based on observation	4 sub-scales	7-10	Measures social-emotional development and competencies.	1-3 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.pearsonassessments.com/HAIWEB/Cultures/en-us/Productdetail.htm?Pid=015-8007-352
Child's Inventory of Anger	Child	Self-administered	39	10	Assesses children's anger and their ability to cope with it: frustration, physical aggression, peer relationships, and authority relations.	6-16 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Nelson & Finch, 2000) (Shoemaker, Erickson, & Finch, 1986) (Nelson, Hart, & Finch, 1993)
Coping Scale for Children and Youth	Child	Self-administered	29		Measures assistance seeking, cognitive-behavioral problem solving, cognitive avoidance, and behavioral avoidance.	10-15 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.excellenceforchildand youth.ca/resource-hub/measure-profile?id=466

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Emotional Quotient Inventory: Youth Version (EQ-i:YV)	Child	Self-administered	133	30	Assesses self-regard, emotional self-awareness, assertiveness, independence, self-actualization, empathy, social responsibility, interpersonal relationship, stress tolerance, impulse control, reality testing, flexibility, problem solving, optimism, and happiness.	7-18 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Bar-On, 2004) (Butler & Chinowsky, 2006) (Dawda & Hart, 2000) (Plake, Impara, & Spies, 2003) (Shuler, 2004)
Emotionality, Activity, Sociability, and Impulsivity (EASI) Scale	Parent or caregiver	Self-administered	20		Evaluates subjects based on four temperaments: emotionality, activity, sociability, and impulsivity.		<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Buss & Plomin, 1989)
Pediatric Quality of Life Enjoyment and Satisfaction Questionnaire	Child	Administered by practitioner or self-administered	23	<4	Assesses quality of life enjoyment and life satisfaction.	6-17 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Endicott, Nee, Yang, & Wohlberg, 2006)
Pediatric Symptom Checklist (PSC)	Parent, caregiver, or child	Self-administered	37	<5	Screens for potential problems with a child's behavior, emotions, and learning.	11-18 years	<input checked="" type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.massgeneral.org/psychiatry/services/psc_home.aspx (Jellinek et al., 1999) (Jellinek et al., 1988) (Little, Murphy, Jellinek, Bishop, & Arnett, 1994) (Pagano, et al., 1996)

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Preschool Pediatric Symptom Checklist (PPSC)	Teacher	Self-administered	18	<5	Screens for social-emotional problems.	18-60 months	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Sheldrick et al., 2014)

Table 11. Child Level: Traumatic History/Trauma Impact
Instruments that identify trauma history and/or symptoms of exposure to trauma, including PTSD

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Acute Stress Checklist for Children (ASC-Kids)	Child	Self-administered	29	5	Assesses acute stress disorder reactions.	8-17 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Kassam-Adams, 2006)
Adolescent Self-Report Trauma Questionnaire	Child	Self-administered	72	20	Assesses violence/exposure to violent events/PTSD. Respondents are asked whether the violent events occurred before or after the age of 13 to see if their exposure to violent events changed from childhood to adolescence.	12-21 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Horowitz, Weine, & Jekel, 1995)
Adverse Childhood Experiences Survey (ACE)	Clinician	Self-administered	125	20	Covers four general functions: personal social, fine motor adaptive, language, and gross motor.	2 weeks-6 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Frankenburg & Dobbs, 1967) (Glascoe et al., 1992)
Child PTSD Symptom Scale (CPSS)	Child	Self-administered	24	15	Measures PTSD, daily functioning, and functional impairment.	8-18 years	<input checked="" type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Foa, Johnson, Feeny, & Treadwell, 2001)

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Child Reaction to Traumatic Events Scale—Revised (CRTES)	Child	Self-administered	23	10	Assesses feelings of intrusion, avoidance, and arousal.	6-18 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Jones, Fletcher, & Ribbe, 2002) (Cook-Cottone, 2004) (Gurwitch, Kees, & Becker, 2002)
Child Report of Post-Traumatic Symptoms (CROPS)	Child	Self-administered	26	5	Assesses posttraumatic stress symptoms.	7-17 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Greenwald & Rubin, 1999)
Child Stress Disorders Checklist	Child	Administered by caregiver	36	10	Measures immediate responses to traumatic events: re-experiencing, avoidance, numbing and dissociation, increased arousal, and impairment in functioning.	2-18 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Saxe et al., 2003)
Child Trauma Questionnaire	Child	Self-administered	28	5	Assesses traumatic experiences: death, divorce, violence, sexual abuse, illness, and other.	12+ years	<input checked="" type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Pennebaker & Sussman, 1988) (Bernstein et al., 1994)
Child Trauma Screening Questionnaire (CTSQ)	Child	Administered by clinician or self-administered	10	5-10	Measures re-experiencing and hyperarousal.	7-16 years	<input type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Kenardy, Spence, & Macleod, 2006) (Olsson, Kenardy, De Young, & Spence, 2008) (Charuvastr, Goldfarb, Petkova, & Cloitre, 2010)

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Child Trust Events Survey (CTES)	Child or parent	Self-administered	30		Screens for trauma exposure: physical, emotional, or sexual abuse; alcoholic or drug user in home; family member in prison; mentally ill caregiver; domestic violence; and loss/separated from caregiver.	0-13 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.cincinnatichildrens.org/service/c/childhood-trust/events-survey/
Child Welfare Trauma Referral Tool (CWT)	Child welfare case worker	Self-administered	36		CWT is designed to help child welfare workers make more trauma-informed decisions about the need for referral to trauma-specific and general mental health services. The worker obtains information through record review and key informant interviews (natural parent, foster parent, child therapist, and school-aged children or adolescents).	0-18 years	<input checked="" type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	www.nctsn.org/nctsn_assets/pdfs/CWT3_SHO_Referral.pdf
Childhood PTSD Inventory (CPTSDI)	Child	Administered by clinician	50	18	Screens for experience of traumatic event and measures presence and severity of PTSD.”	6-18 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Saigh, et al., 2000) (Ohan, Myers, & Collett, 2002)
Clinician-Administered PTSD Scale for Children & Adolescents (CAPS-CA)	Child	Administered by clinician	33	52	Measures frequency and intensity of symptoms associated with the 17 DSM-IV PTSD symptoms and aspects of functioning (overall distress, coping skills, and impairment).	8-18 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Nader et al., 1996) (Ohan, Myers, & Collett, 2002) (Nader K. , 2004)
Connecticut Trauma Screen	Parent, caregiver, or child	Administered by trained staff	10	<5	Screens for traumatic events and reactions to these events.	7-18 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.chdi.org/files/9514/2315/8164/Connecticut_Trauma_Screen.pdf

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Diagnostic Infant and Preschool Assessment (PTSD section)	Parent or caregiver	Administered by clinician	517	60-180	Screens for PTSD, MDD, bipolar disorder, ADHD, ODD, conduct disorder, separation anxiety disorder, specific phobia, social phobia, generalized anxiety disorder, obsessive-compulsive disorder, reactive attachment disorder, and sleep disorders.	0-6 years	<input type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Scheeringa & Haslett, 2010) (Scheeringa, Peebles, Cook, & Zeanah, 2001)
Los Angeles Symptom Checklist—Adolescent Version	Child	Self-administered	43	10	Measures PTSD and associated features; 17 items are trauma specific, and the balance assess more general psychological distress.	13-18 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(King, King, Leskin, & Foy, 1995)
NCTSN CANS Comprehensive—Trauma Version	Clinician	Self-administered	110	15-45	Addresses areas of Trauma Exposure/Reminders; Traumatic Stress; Grief/Loss; Anxiety/Mood (Internalizing Symptoms); Externalizing Symptoms; Relationships and Attachment; Psychosocial Functioning; Cognition and Development; Health; Parents; and Parent, Caregiver, and Family Mental Health and Functioning.	0-18 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.nctsn.org/content/nctsn-cans-comprehensive-trauma-version-cans-trauma

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Pediatric Emotional Distress Scale (PEDS)	Parent or caregiver	Self-administered	26	7	Rapidly assesses and screens for elevated symptomatology in children following exposure to a stressful and/or traumatic event. Includes behaviors that have been identified in the literature as associated with experiencing traumatic events and consists of 17 general behavior items and 4 trauma-specific items.		<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	www.nctsn.org/content/pediatric-emotional-distress-scale (Saylor, Swenson, Reynolds, & Taylor, 1999) (Spilsbury et al., 2005) (Strand, Sarmiento, & Pasquale, 2005)
Post Traumatic Symptom Inventory for Children (PT-SIC)	Child	Self-administered	30	30	Screens for PTSD symptoms including startled response, hypervigilance, difficulty concentrating, efforts to avoid associations with the event, repetitive play with themes of the event, intrusive recollections of the event, recurrent distressing dreams, inability to recall important aspects of the trauma, detachment, estrangement, restricted range of affect, irritability/outbursts of anger, sleep issues, and diminished interest in activities.	4-8 years	<input type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Eisen, 1997)
PTSD in Preschool Aged Children (PTSD-PAC)	Child	Administered by parent or caregiver	18	10	Screens for PTSD symptoms from DSM-IV criteria B, C, and D.	3-5 years	<input type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Levendosky, Huth-Bocks, Semel, & Shapiro, 2002)

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
PTSD Semi-Structured Interview and Observational Record	Child	Administered by parent or caregiver	29	45	Assesses 11 PTSD symptoms including re-experiencing, avoidance, hyperarousal, and alternate criteria.	0-7 years	<input type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Scheeringa & Zeanah, 1994)
Trauma and Attachment Beliefs Scale	Child	Self-administered	84	10-15	Addresses Safety, Trust, Esteem, Intimacy, and Control.	9+ years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.wpublish.com/store/p/3011/trauma-and-attachment-belief-scale-tabs
Trauma Symptom Checklist for Young Children (TSCYC)	Parent or caregiver	Self-administered	90	15-20	Evaluates posttraumatic stress symptoms and allows for a tentative PTSD diagnosis. It also provides information on other symptoms such as anxiety, depression, anger, and abnormal sexual behavior.	3-12 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Briere, 2005) (Briere et al., 2001)
Trauma Symptom Checklist for Children (TSCC)	Child	Self-administered	54	15-20	Addresses Anxiety, Depression, Anger, Posttraumatic Stress, Dissociation, and Sexual Concerns.	8-16 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Briere, Trauma Symptom Checklist for Children (TSCC) professional manual, 1996) (Ohan, Myers, & Collett, 2002) (Nader, 2004) http://www4.parrinc.com/products/product.aspx?Productid=TSCC

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Traumatic Events Screening Inventory	Child	Administered by clinician	15		Assesses a child's experience of a variety of potential traumatic events. Additional questions assess DSM PTSD criterion and other information about the specifics of the event(s).		<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Ribbe, 1996) (Ippen et al., 2002)
UCLA PTSD Index	Parent or child	Administered by clinician	20-217		Measures child's exposure to 26 types of traumatic events. The scale assesses DSM-IV PTSD diagnostic criteria, including 19 items to assess the 17 symptoms of PTSD and 2 associated symptoms (guilt and fear of events recurring).		<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input checked="" type="checkbox"/> Qualitative	(Pynoos, Rodriguez, Steinberg, & Frederick, 1999) (Steinberg, Bymer, Decker, & Pynoos, 2004) (Steinberg & Brymer, 2008)
Violence Exposure Scale for Children—Revised	Child	Administered by clinician or teacher	25	20	Measures total exposure to violence, witness to mild violence, victim of mild violence, witness to severe violence, and victim of severe violence.	4-10 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Fox & Leavitt, 1995) (Shahinfar, Fox, & Leavitt, 2000)
Young Child PTSD Checklist	Caregiver	Self-administered	42		Assesses PTSD and functional impairment.	1-6 years	<input checked="" type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Scheeringa & Haslett, 2010) (Cohen & Scheeringa, 2009) (Scheeringa, 2011)

Caregiver/Parent-Level Instruments

In addition to targeting outcomes for children, programs in child welfare also commonly focus on outcomes for caregivers and parents. Many community-based services exist to strengthen parental ability to care for their children. By strengthening parenting capacity or reducing negative behaviors, such as substance abuse, caregivers are better able to effectively care for their children and therefore avoid or reduce involvement with the child welfare system. Common outcomes of interest at the caregiver or parent level in child welfare include parenting skills, protective factors, mental health functioning, social supports, and substance abuse. Instruments that measure changes in these areas are presented in Tables 12 through 21.

Table 12. Caregiver Level: Domestic Violence
Instruments that assess attitudes and behaviors regarding domestic violence

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Domestic Violence Inventory—Short Form (DVI-SF)	Parent or caregiver	Administered by staff/social worker	76	20	Assesses attitudes and behaviors important in domestic violence offender profiling. Contains variations of the six scales found in the Domestic Violence Inventory (DVI).	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.online-testing.com/dvisf.htm
Hurt, Insult, Threaten, Scream (HITS)	Parent or caregiver	Self-administered	4		Screens for domestic violence.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Sherin, Sinacore, Li, Zitter, & Shakil, 1998)

Table 13. Caregiver Level: Employment
Instruments that assess efforts to seek, attain, and retain employment

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Job Search Attitudes Inventory	Parent or caregiver	Self-administered	40	20	Assesses attitudes in job searching and unemployment across five scales: Luck vs. Planning, Uninvolved vs. Involved, Help From Others vs. Self-Help, and Passive vs. Active.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://career-lifeskills.com/career-assessments-79/jist-assessments-150/job-search-attitude-inventory-jsai-5th-edition-11-533.html
Job Search Knowledge Scale	Parent or caregiver	Self-administered	60	20	Assesses identifying job leads, applying directly to employers, and writing resumes and cover letters.	N/A	<input type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://jist.emcp.com/job-search-knowledge-scale.html

Table 14. Caregiver Level: General Functioning

Instruments that assess multiple domains, such as physical health, mental health, social context, and economic factors

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Adult Needs and Strengths Assessment (ANSA), Version 2.0	Parent or caregiver	Administered by a certified interviewer	54		Assesses life functioning, strengths, acculturation, behavioral health needs, risk behaviors, and caregiver strengths and needs (optional).	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Anderson & Lyons, 2001) (Goodwin & Lyons, 2001) (Leon, Lyons, Christopher, & Miller, 1998) (Lyons, Colletta, Devens, & Finkel, 1995) (Lyons et al., Predicting readmission to the psychiatric hospital in a managed care environment: Implications for quality indicators, 1997) (Lyons et al., Predicting psychiatric emergency admission and hospital outcome, 1997) (Yohanna et al., 1998)

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Goal Attainment Scores (GAS)	Parent, caregiver, or child	Administered by program staff			Measures the symptoms, behaviors, feelings, skills, and achievements that the intervention is specifically designed to change.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Kiresuk, Smith, & Cardillo, 1994)

Table 15. Caregiver Level: Mental Health Symptoms and/or Diagnosis

Instruments that screen for DSM-related mental health disorders, such as depression, bipolar disorder, and anxiety

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Colorado Symptom Index	Parent or caregiver	Self-administered	14	5	Assesses psychiatric symptoms.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Conrad, et al., 2001)
Edinburgh Postnatal Depression Scale (EPDS)	Parent or caregiver	Self-administered	10	5	Identifies women who have postpartum depression. Scale items correspond to various clinical depression symptoms, such as guilt feeling, sleep disturbance, low energy, anhedonia, and suicidal ideation.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Cox, Holden, & Sagovsky, 1987) (Montazeri, Torkan, & Omidvari, 2007) (Wisner, Parry, & Piontek, 2002)
Patient Health Questionnaire Depression Scale (PHQ-9)	Parent or caregiver	Self-administered	9		Assesses symptoms and functional impairment to make a tentative depression diagnosis and derives a severity score to help select and monitor treatment.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Spitzer, Kroenke, & Williams, 1999) (Löwe, Unützer, Callahan, Perkins, & Kroenke, 2004) (Pinto-Meza, Serrano-Blanco, Penarrubia, Blanco, & Haro, 2005) (Pfizer, 1999)

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Primary Care Tool for Assessment of Depression During Pregnancy and Postpartum	Female parent or caregiver	Structured interview conducted by health care provider	34		Assesses pregnant and postpartum women for major depression in a primary care setting. It can be used for patients who score 10 or above on the Edinburgh Postnatal Depression Screening (EPDS), the cutoff point on other peripartum screening tools, and for patients for whom a health care provider suspects major depression on clinical grounds.	N/A	<input checked="" type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input checked="" type="checkbox"/> Qualitative	http://www.beyondblues.info/Docs/HRSAPriaryCareAssessTool.pdf (University of Illinois at Chicago, 2006)
Symptom Checklist-90-Revised (SCL-R-90)	Parent, caregiver, or child	Self-administered	90	12-15	Evaluates a broad range of psychological problems and symptoms of psychopathology. Measures the progress and outcome of psychiatric and psychological treatments or for research purposes. Assesses the following primary symptom dimensions: Somatization, Obsessive-Compulsive, Interpersonal Sensitivity, Depression, Anxiety, Hostility, Phobic Anxiety, Paranoid Ideation, and Psychoticism.	13 years and older	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input checked="" type="checkbox"/> Qualitative	(Derogatis & Savitz, 2000) (Derogatis & Melisaratos, 1983) (Bucklew, Burk, Brownlee-Duffeck, Frank, & DeGood, 1988)

Table 16. Caregiver Level: Parenting Skills/Attitudes
Instruments that assess parenting perceptions, beliefs, and behaviors

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
24/7 Dad Fathering Inventory and Fathering Skills Survey	Male parent or caregiver	Self-administered	50		Fathering Inventory assesses fathering and parenting attitudes. Determines whether a positive or negative shift in attitude occurs as a result of program participation. Fathering Skills Survey collects demographic information and measures fathering and parenting knowledge and skills.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.fatherhood.org http://www.fatherresource.org (National Fatherhood Initiative, 2006)
Adult-Adolescent Parenting Inventory (AAPI-2)	Parent or child	Self-administered	40	10-15	Assesses parenting and childrearing attitudes. Based on the known parenting and childrearing behaviors of abusive parents, the inventory provides an index of risk for parenting behaviors known to be associated with child abuse and neglect in five areas: Expectations of Children, Parental Empathy Toward Children's Needs, Use of Corporal Punishment, Parent-Child Family Roles, and Children's Power and Independence.	12 years and older	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.assessingparenting.com/assessment/aapi (Bavolek & Keene, 2001)
Brief Child Abuse Potential Inventory (BCAP)	Parent or caregiver	Administered by trained non-professional	25	5-10	Assesses abuse risk items, including child abuse/neglect risk cutoff scores.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Ondersma, Chaffin, Mullins, & LeBreton, 2005)

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Interpersonal Mindfulness in Parenting (IM-P)	Parent	Self-administered	10		Covers three domains: awareness and present-centered attention regarding one's internal experience and one's adolescent during parenting interactions, openness and nonjudgmental receptivity to adolescent's articulation of thoughts and emotions, and low reactivity to culturally accepted adolescent behavior.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Duncan, 2007)
Keys to Interactive Parenting Scale (KIPS)	Service provider or family service worker	Completed by service provider/family service worker based on observation	12	15	Assesses the following domains: building relationships, promoting the child's learning, and supporting the child's confidence.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.comfortconsults.com/ (Comfort et al., 2010) (Comfort, Gordon, & Unger, 2006) (Comfort & Gordon, 2006) (Comfort, Gordon, & Naples, 2011) (Gordon & Comfort, 2013)
Parent-Child Relationship Inventory (PCRI)	Parent	Self-administered	78	15	Covers seven distinct scales: Parental Support, Satisfaction With Parenting, Involvement, Communication, Limit Setting, Autonomy, and Role Orientation.	3-15 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Gerard, 1994)

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Parenting Sense of Competence Scale (PSCS)	Parent or caregiver	Self-administered	19	5	Contains three parenting scales: Parent Self-Efficacy, Parent Satisfaction, and Parent Competence.	0-17 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Johnston & Mash, 1989) (Rogers & Matthews, 2004) (Gilmore & Cuskelly, 2009) (Ohan, Leung, & Johnston, 2000)

Table 17. Caregiver Level: Physical Health
Instruments that assess physical health

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
RAND Medical Outcomes Study (MOS) 12-Item Health Survey	Parent or caregiver	Self-administered	12		Assesses eight health concepts: physical functioning, bodily pain, role limitations due to physical health problems, role limitations due to personal or emotional problems, general mental health, social functioning, energy/fatigue, and general health perceptions. It also includes a single item that provides an indication of perceived change in health.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.rand.org/health/surveys_tools/mos/mos_core_12item.html (Hays, Sherbourne, & Mazel, 1995) (Stewart & Ware, 1992)
SF-12 V2 Health Survey	Parent or caregiver	Self-administered	12	2-3	Assesses functional health and well-being from the patient's point of view.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Ware, Kosinski, & Keller, 1995) http://www.qualitymetric.com/WhatWeDo/SFHealthSurveys/SF12v2HealthSurvey/tabid/186/Default.aspx

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
SF-36 Health Survey	Parent or caregiver	Self-administered	36	10	Assesses functional health and well-being from the patient's point of view.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Ware, Kosinski, & Keller, 1994) http://www.qualitymetric.com/WhatWeDo/SFHHealthSurveys/SF12v2HealthSurvey/tabid/186/Default.aspx

Table 18. Caregiver Level: Self-Identity
Instruments that assess self-perception and sense of identity

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Multigroup Ethnic Identity Measure	Adults or adolescents		15		Assesses two major factors: (1) ethnic identity search (a developmental and cognitive component) and (2) affirmation, belonging, and commitment (an affective component).	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Roberts et al., 1999) (Phinney, 1992)

Table 19. Caregiver Level: Social Support and Connections

Instruments that assess access to social connections and/or ability to give and receive social support

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Maternal Social Support Index (MSSI)	Female parent or caregiver	Self-administered	21	10	Assesses qualitative and quantitative aspects of a mother's social support in seven areas: help with daily tasks, contacts with extended family, help with crisis and emergency childcare, quality of communication with partner and one other support person, and involvement in community activities.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input checked="" type="checkbox"/> Qualitative	(Pascoe, Ialongo, Horn, Reinhart, & Perradatto, 1987)
RAND Medical Outcomes Study (MOS) Social Support Survey	Parent or caregiver	Self-administered	19		Measures overall functional social support.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.rand.org/health/surveys_tools/mos/mos_socialsupport.html (Hays, Sherbourne, & Mazel, 1995) (Sherbourne & Stewart, 1991) (Stewart & Ware, 1992)
Social Support Questionnaire (SSQ)	Adolescents or adults	Self-administered	27	5	Quantifies the availability and satisfaction with social support. For each item, the respondent lists the individuals that are available to them for help in specific situational circumstances and then states how satisfied they are with the support available.		<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(McDowell & Newell, 1996) (Sarason, Levine, Basham, & Sarason, 1983) (Sarason, Sarason, Shearin, & Pierce, 1987)

Table 20. Caregiver Level: Substance Use
Instruments that screen and assess for use of substances

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Addiction Severity Index (ASI)	Parent or caregiver	Structured interview conducted by clinician	195		Assesses medical, employment/support, drug and alcohol use, legal status, family history, family/social relationships, and psychiatric problems.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input checked="" type="checkbox"/> Qualitative	http://www.encyclopedia.com/doc/1G2-3403100020.html
Michigan Alcoholism Screening Test (MAST)	Parent, caregiver, or older children	Self-administered or structured interview conducted by a practitioner	22	8	Screens for alcohol problems in the general population. Assesses social, vocational, and family problems frequently associated with heavy drinking. Problems include guilt about drinking; blackouts; delirium tremens; loss of control; family, social, employment, and legal problems following drinking bouts; and help-seeking behaviors, such as attending Alcohol Anonymous meetings or entering a hospital because of drinking. The test is useful for assessing the extent of lifetime alcohol-related consequences.	Older children	<input type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Easton, Swan, & Sinha, 2000) (Gibbs, 1983) (Kristenson & Trelle, 2006) (Maisto, Connors, & Allen, 1995) (Pokorny, Miller, & Kaplan, 1972) (Robins, Helzer, Croughan, & Ratcliff, 1981) (Ross, Gavin, & Skinner, 1990) (Selzer, 1971) (Selzer, Vinokur, & Van Rooijen, 1975) (Skinner, 1982) (Teitelbaum & Mullen, 2000)

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Simple Screening Instrument for Alcohol and Other Drugs (SSI-AOD)	Parent or caregiver	Self-administered	16		Assesses use of alcohol or other drugs within the past 6 months.	N/A	<input type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Center for Substance Abuse Treatment, 1994)
Substance Abuse and Mental Illness Symptoms Screener (SAMISS)	Parent or caregiver	Self-administered	13		Screens for a substance abuse problem or mental disorder. The instrument was developed to be used with HIV-positive populations.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Pence et al., 2005) (Whetten et al., 2005)
Substance Abuse Problem Checklist (SAPC)	Parent or caregiver	Self-administered			Items ask about personal and environmental (home, work, and neighborhood) problems that patients typically have when seeking/entering drug and/or alcohol treatment. The SAPC is designed to facilitate the counseling of drug- and/or alcohol-dependent patients.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Carroll, 1984)

Table 21. Caregiver Level: Traumatic History/Trauma Impact
Instruments that identify trauma history and/or symptoms of exposure to trauma, including PTSD

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Brief Trauma Questionnaire (BTQ)	Parent or caregiver	Self-administered			Provides a complete assessment of Criterion A according to the DSM-IV.	N/A	<input type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.ptsd.va.gov/professional/assessment/te-measures/brief-trauma-questionnaire_btq.asp
Trauma Assessment for Adults (TAA)	Parent or caregiver	Self-administered	17		Assesses 14 life events such as combat exposure during military service, physical or sexual assault, and a serious car accident.	N/A	<input type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Resnick, Falsetti, Kilpatrick, & Freedy, 1996) (Orsillo, 2001) (Gray, Elhai, Owen, & Monroe, 2009)
Trauma Symptom Checklist-40 (TSC-40)	Parent or caregiver	Self-administered	40	10-15	Evaluates symptomatology in adults associated with childhood or adult traumatic experiences. It measures aspects of posttraumatic stress and other symptom clusters found in some traumatized individuals. This measure is intended exclusively for research purposes. It does not measure all 17 criteria of PTSD and should not be used as a complete measure of that construct.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Briere & Runtz, 1989) (Briere, Psychometric review of the Trauma Symptom Checklist-40, 1996) (Elliot & Briere, 1992) (Norris & Hamblen, 2004)

Family-Level Instruments

Family systems that include both nuclear and extended family members, as well as fictive kin such as godparents and close family friends, contribute essential formal and informal supports to caregivers and their children and exert a significant impact on child safety and well-being. Common family-level outcomes of interest that are addressed by the instruments in Tables 22 and 23 include family functioning, family supports, family protective factors, family engagement, and relationships, including parent-child interactions.

Table 22. Family Level: Family Functioning, Strengths, and Needs
Instruments that assess a family unit's needs, strengths, and overall level of functioning

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Family Assessment Form (FAF)	Parents or caregivers	Administered by case worker	99		Covers six areas of family functioning: living conditions, financial conditions, social support, caregiver/child interactions, developmental stimulation, and caregiver interactions.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(McCroskey, Sladen, & Meezan, 1997)
Family Assessment of Needs and Strengths (FANS)	Parents or caregivers	Self-administered	16		Assesses emotional stability, parenting skills, substance abuse, sexual abuse, domestic relations, social support system, communication/interpersonal skills, housing, intellectual capacity, literacy, resource availability/ management, employment, physical health issues, and child characteristics.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.fans.umaryland.edu/register.aspx

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Family Empowerment Scale (FES)	Parents or caregivers	Self-administered	34		In the following three categories, measures personal attitudes, knowledge, and behaviors related to sense of empowerment: About Your Family (12 items), About Your Child's Services (12 items), and About Your Involvement in the Community (10 items).	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Koren, DeChillo, & Friesen, 1992) (Singh et al., 1995) (Whitley, Kelley, & Campos, 2011) (Yatchmenoff, Koren, Friesen, Gordon, & Kinney, 1998)
Family Environment Scale	Parents or caregivers	Self-administered	90		Assesses aspects of family relationships, family activities/interests, and level of organization and strictness in the family.	5+ years	<input type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.excellenceforchildandandyouth.ca/resource-hub/measure-profile?id=121 http://www.mindgarden.com/96-family-environment-scale
Family Needs Scale (FNS)	Parents or caregivers	Self-administered	78	15	Includes seven distinct scales: Parental Support, Satisfaction With Parenting, Involvement, Communication, Limit Setting, Autonomy, and Role Orientation.	3-13 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Cohon, Hines, Cooper, Packman, & Siggins, 2003) (Dunst, Trivette, & Deal, 1988) (Dunst, Cooper, Weeldreyer, Snyder, & Chase, 1986) (Gerard, 1994)

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Family Resource Scale	Parents or caregivers	Self-administered	30	10	Measures whether families have adequate resources (e.g., time, money, energy) to meet the needs of the family as a whole and the needs of individual family members. This scale complements the Family Needs Scale (FNS); instead of asking about the frequency of each need, it asks about the adequacy of resources to meet each need.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Leet & Dunst, 1988)
Family Support Scale	Parents or caregivers	Self-administered	18		Measures support from the immediate family; relatives; friends; and others in the family's social network, social organizations, and specialized and generic professional services. The scale also includes two open items for parents to assess other sources of support not included in the 18 items.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Dunst, Trivette, & Deal, 1988)
Protective Factors Survey	Parents or caregivers	Administered by program staff in individual or group setting and self-administered	41	10-15	Measures protective factors in five areas: family functioning/resiliency, social/emotional support, concrete support, nurturing and attachment, and knowledge of parenting/child developments. Survey results are intended to provide agencies with the following information: snapshot of the families they serve, changes in protective factors, and areas in which workers can increase individual family protective factors.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Counts, Buffington, Chang-Rios, Rasmussen, & Preacher, 2010)

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Structured Decision Making: Family Strengths and Needs Assessment	Parents or caregivers	Administered by case worker	20		Covers several domains of family life that affect the care of children (e.g., substance abuse, parenting skills, domestic violence). Families are rated on each domain along a continuum from strength to severe need. The scored assessment identifies a family's three most critical needs. The Family Strengths and Needs Assessment is one of the series of assessments in the Structured Decision Making Model. It is administered to families receiving ongoing child welfare services.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Wilson & Arvai, 2011) http://www.nccglobal.org/assessment/structured-decision-making-sdm-model

Table 23. Family Level: Parenting/Family Interactions

Instruments that assess interactions and relationships among family members, including parent-child interactions

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Child Wellbeing Scale	Service provider	Completed by service provider based on observation	43 sub-scales	25	The 43 scales cover 4 areas of parenting performance: parental role performance, familial capacities, child role performance, and child's capacities.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Magura & Moses, 1987) (Gaudin, Polansky, & Kilpatrick, 1992) (Trocme, 1996)
Emotional Availability (EA) Scales	Child and parents or caregivers	Administered by trained professional			Describes and assesses interactions between child and caregiver, measuring both adult dimensions (sensitivity, structuring, nonintrusiveness and nonhostility) and child dimensions (responsiveness to caregiver and interactions with caregiver).	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Easterbrooks & Biringen, 2005)
Family Advocacy and Support Tool (FAST)	Parents, caregivers, or older children	Administered by a certified interviewer	38		Examines the family system, caregiver status, child functioning, and caregiver advocacy. FAST is the family version of the Child and Adolescent Needs and Strengths (CANS).	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://praedfou ndation.org/tools/the-family-advocacy-and-support-tool-fast/

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Family Assessment Device (FAD)	Parents or caregivers	Self-administered	60		Measures family functioning across seven scales: Problem Solving, Communication, Roles, Affective Responsiveness, Affective Involvement, Behavior Control, and Spirituality. The survey also includes an overall General Functioning measure. While the instrument presently lacks normative data on child welfare populations, it may provide early identification of families who may benefit from therapy despite reluctance to seek services.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Akister & Stevenson-Hinde, 2003) (Byles, Byrne, Boyle, & Offord, 2004) (Epstein, Baldwin, & Bishop, 2007)
Family Outcomes Survey (FOS)	Parents or caregivers	Self-administered	24		Assesses five family outcomes: Families understand their child's strengths, abilities, and special needs; families know their rights and advocate effectively for their child; families help their child develop and learn; families have support systems; and families access desired services, programs, and activities in their community.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.fpg.unc.edu/~eco/pages/tools.cfm https://www.idedata.org/docs/ECO%20Family%20Outcomes%20Survey-Raspa-3.pdf (Early Childhood Outcomes Center, 2010)
Family Relationship Index	Parents or caregivers	Self-administered	27		Assesses family relationships through three subscales: Family Cohesion, Family Expressiveness, and Family Conflict.	N/A	<input type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.incarnaresearch.ca/content/family-relationship-index

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Home Observation for Measurement of the Environment (HOME) Inventory	Parent and child	Structured interview and observation conducted by caseworker		45-90	The HOME Inventory is completed by a caseworker during a home visit. The inventory includes observation of parent-child interaction and discussions with the parent about objects, events, and transactions that occur are probed and interpreted from the child's point of view. The goal is to understand what life is like for the child. There are seven versions of the inventory: infant/toddler, early childhood, middle childhood, early adolescence, short form (SF), child care (CC), and disability (DA).	N/A	<input type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://fhdri.clas.asu.edu/home/references.html (Caldwell & Bradley, 2003)
Modified Parenting Perception Inventory	Child	Self-administered	18		Assesses child's perspective on parenting environment. Consists of four subscales: Mother Positive, Father Positive, Mother Negative, and Father Negative.	5-13 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Corcoran, 2004)
North Carolina Family Assessment Scale for General Services and Reunification (NCFAS-G+R)	Service provider or family service worker	Completed by staff based on observation	80	30-40	Includes the following scales: Environment, Parental Capabilities, Family Interactions, Family Safety, Child Well-Being, Social/Community Life, Self-Sufficiency, Family Health, Caregiver/Child Ambivalence, and Readiness for Reunification.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Kirk, 2008)

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Family Adaptability and Cohesion Evaluation Scales (FACES)	Parents or caregivers	Self-administered	62		Assesses family cohesion, adaptability, communication, and degree to which family members are happy with their family system.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.excellenceforchildand youth.ca/resource-hub/measure-profile?id=373
Parenting Stress Index (PSI)	Parents or caregivers	Self-administered	120, 36 (short form)	10-30	Assesses level of parental distress by gathering information on parent-child dysfunctional interaction and difficult child characteristics. It identifies at an early stage parenting and family characteristics that fail to promote normal development and functioning in children, children with behavioral and emotional problems, and parents who are at risk for dysfunctional parenting. The PSI predicts the potential for parental behavior problems and child adjustment difficulties within the family system.	1 month-12 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Abidin, 1995) (Abidin, 1997) (Haskett, Ahern, Ward, & Allaire, 2006) (Loyd & Abiden, 1985) (McKelvey et al., 2009) (Reitman, Currier, & Stickle, 2002)
Piccolo: Parenting Interactions with Children	Parents or caregivers	Administered by trained staff	29		Assesses four domains of interaction: affection, responsiveness, encouragement of autonomy, and teaching.	1-3 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Cook & Roggman, 2009) (Roggman, Cook, Innocenti, Jump, & Christiansen, 2009) (Vogel et al., 2011)

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Stress Index for Parents of Adolescents	Parents or caregivers	Self-administered	112	20	Examines the relationship of parenting stress to adolescent characteristics, parent characteristics, the quality of the adolescent-parent interactions, and stressful life circumstances. Four subscales measure adolescent characteristics: Moodiness/Emotional Ability, Social Isolation/Withdrawal, Delinquency/Antisocial, and Failure to Achieve or Persevere. Four subscales measure parent characteristics: Life Restrictions, Relationship With Spouse/Partner, Social Alienation, and Incompetence/Guilt.	11-19 years	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Sheras, Abidin, & Konold, 1998)
Substance Abuse Prevention Family Scale	Parents or caregivers	Self-administered	10		Covers three domains: awareness and present-centered attention regarding one's internal experience and one's adolescent during parenting interactions, openness and nonjudgmental receptivity to adolescent's articulation of thoughts and emotions, and low reactivity to culturally accepted adolescent behavior.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Duncan, 2007)

Organizational/Program-Level Instruments

Child welfare systems are complex and require partnerships with multiple providers and other systems, including courts and school districts. In addition, a child welfare system must operate effectively in order to ensure the safety, permanency, and well-being of the children it serves. Organizational outcomes related to specific programs (e.g., fidelity measures for specific interventions) or to overall system functioning (e.g., a measure of organizational capacity or collaboration with other systems) are important to consider. Tables 24 through 28 provide an overview of instruments available for the measurement of inter- and intra-organizational collaboration, communication, workplace satisfaction, program fidelity, and other constructs.⁸

⁸In addition to the instruments in Tables 24 through 28, readers may also look to other resources for the measurement of organizational change. In 2012, JBA published *Interagency Partnerships: A Compendium of Measurement Instruments* (James Bell Associates, Inc., 2012). This compendium summarized 10 instruments and was designed to help readers select a measurement instrument or method that may best assess the functioning, strengths, and limitations of a partnership to which their agencies belong. Additionally, data contained in child welfare continuous quality improvement (CQI) systems may also serve as a resource for grantees when examining organizational operations.

Table 24. Organization Level: Collaboration
Instruments that assess collaboration between service providers

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Children and Family Futures (CFF) Collaborative Capacity Instrument (CCI)	Agency staff	Self-administered	106		Addresses 10 topic areas: Underlying Values and Principles of Collaborative Relationships, Daily Practice—Screening and Assessment, Client Engagement and Retention in Care, Services to Children, Joint Accountability and Shared Outcomes, Information Sharing and Data Systems, Training and Staff Development, Budgeting and Program Sustainability, Working with Related Agencies, and Working with the Community and Supporting Families.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	www.cffutures.org/resources/policy-tools (Drabble, 2007) (Drabble et al., 2006)
Cross Systems Collaboration Survey	Agency staff	Self-administered	19	5-10	Topics include values and beliefs about planning and outcomes, drug use and parenting, improving service and community systems, and parental success in services. Also addresses elements of system linkages including underlying values and principles of collaborative relationships, client screening and assessment, client engagement and retention in care, joint accountability and shared outcomes, information sharing and data systems, and training and staff development.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(National Center on Substance Abuse and Child Welfare, 2003) (Drabble, 2007)

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Frey's Levels of Collaboration Scale	Agency staff	Self-administered	Varies		Assesses the level of collaboration among agencies on a 6-point scale: no interaction, networking, cooperation, coordination, coalition, and collaboration.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Frey, Lohmeier, Lee, & Tollefson, 2006)
Index for Interdisciplinary Collaboration	Agency staff	Self-administered	49		Assesses interprofessional collaboration in an organization. The tool has four subscales: interdependence and flexibility, newly created professional activities, collective ownership of goals, and reflection on process.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Parker Oliver, Wittenberg-Lyles, & Day, 2007)
Partnership Self-Assessment Tool	Partnering agency staff	Self-administered	67		Addresses the following topics: synergy, leadership, efficiency, administration and management, nonfinancial resources, financial and other capital resources, decision-making, benefits of participation, drawbacks of participation, and satisfaction with participation.	N/A	<input checked="" type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.nccmt.ca/registry/vjew/eng/10.html#sthash.h1yDduMi.dpuf (Center for the Advancement of Collaborative Strategies in Health, 2002)
Wilder Collaboration Inventory	Partnering agency staff	Self-administered	40		Assesses quality of organizational interactions and collaboration.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Mattessich, Murray-Close, & Monsey, Collaboration: What makes it work (Second edition), 2001) (Mattessich, Murray-Close, & Monsey, Wilder Collaboration Factors Inventory, 2001)

Table 25. Organization Level: Organizational Change
Instruments that assess organizational change

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Creating Cultures of Trauma-Informed Care Self-Assessment Scale (CCTIC-SAS)	Agency staff	Self-administered			This scale is part of an approach to organizational change built on five core values: safety, trustworthiness, choice, collaboration, and empowerment. Designed for use in the development, implementation, evaluation, and ongoing monitoring of trauma-informed programs. Organizational change process incorporates several steps: initial planning, kickoff training event, and short- and long-term followup.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.communityconnectionsdc.org/web/page/672/interior.html http://www.healthcare.uiowa.edu/icmh/documents/CCTICSelf-AssessmentandPlanningProtocol0709.pdf (Harris & Fallot, 2001)

Table 26. Organization Level: Program Fidelity
Instruments that assess fidelity to program model

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Achievement of CFT Objectives	Caseworker				Measures fidelity to the key family group decision-making principles. Includes four subscales: cultural safety, family leadership, community partnerships, and inclusive planning.	N/A	<input type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input checked="" type="checkbox"/> Qualitative	(Pennell, 2004) (Burford, Pennell, & Edwards, 2011) (Rauktis, Huefner, & Cahalane, 2011) (Abramson-Madden, 2007)
Achievement of Family Group Conferencing Objectives	Parent or caregiver	Self-administered	17		Assesses fidelity to the Family Group Conferencing model.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Pennell, 2003)
Celebrating Families! Evaluation	Parent, caregiver, children, or program staff	Self-administered	41		Addresses fidelity, skills acquisition, satisfaction, and observations of families. Instruments are designed to improve effectiveness and provide evaluation results for funders.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input checked="" type="checkbox"/> Qualitative	http://www.celebratingfamilies.net (Tisch & Sibley, 2004)
Family-Centered Behavior Scale	Program staff	Self-administered	26	10	Describes family-centered behaviors that might be performed by professional or paraprofessional staff members. Staff responsiveness and the inclusiveness of family in a child's care is measured by how often a staff member performs each behavior. This tool allows organizations to identify their strengths and to target areas of improvement.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Allen, Petr, & Cay Brown, 1995)

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Family Team Decision Making Quality and Fidelity Index	Administrator, service provider, FTDM observer, FTDM facilitator, and parent/caregiver	Self-administered			Consists of Parts I-IV: Records Review, FTDM Observation Measure, Parent Survey/Interview, and Facilitator Form.	N/A	<input checked="" type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input checked="" type="checkbox"/> Qualitative	(Selby, 2011)
General Caseworker Survey (National Quality Improvement Center of Differential Response in Child Protective Services)	Child welfare caseworker or supervisor	Self-administered	23		Covers tenure and duties, professional skills and approach, job satisfaction, knowledge of the non-investigation pathway and attitudes toward the non-investigation pathway, differential response training, assessment of the availability of services in the community, and demographic characteristics of the caseworker/supervisor.	N/A	<input checked="" type="checkbox"/> Scaled <input checked="" type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://www.differentialresponseqic.org/evaluation/general-caseworker-survey.pdf
Wraparound Fidelity Index (WFI-EZ)	Caregivers, older youth, wraparound facilitators, and team members	Self-administered	37		Measures the nature of the wraparound process that an individual family receives. In addition to questions on the wraparound process, the WFI-EZ also contains questions about satisfaction and youth outcomes.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	http://depts.washington.edu/wrapeval/WFI.html

Table 27. Organization Level: Cultural Competence
Instruments that assess an organization's cultural competence

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Client Cultural Competence Inventory	Parent or caregiver	Structured interview	12		Measures cultural competence, with a focus on the client's perceptions of the care provided by therapists, agencies, and health plans. Three domains are Community and Family Involvement, Respect for Cultural Differences, and Easy Access to Care.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Switzer, Scholle, Johnson, & Kelleher, 1998)

Table 28. Organization Level: Service Satisfaction
Instruments that assess client satisfaction with service delivery

Name	Respondent	Administration	# of Items	Minutes To Complete	Topics Covered	Age Range	Item Type	References
Client Satisfaction Questionnaire (CSQ-8)	Service recipient	Self-administered	8	3-8	Measures general satisfaction and can be supplemented by open-ended questions.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Larsen, 1979) (Attkisson & Greenfield, 2004)
Family Group Survey	Youth and adult service recipients	Self-administered	19		Assesses stakeholder perceptions of the family group conferencing experience.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Pennell, 2005)
Youth Services Survey (YSS) and Youth Services Survey for Families (YSS-F)	Parents, caregivers, and older children	Self-administered	25		The YSS measures child service use and satisfaction with mental health services. The YSS-F assesses the parent's or caregiver's perceptions of child service use and satisfaction with mental health services. Each version measures five domains that have been identified as important indicators of quality of services for children. Five scores are based on good access to services, participation in treatment, cultural sensitivity of staff, appropriateness of services, and positive outcome of service.	N/A	<input checked="" type="checkbox"/> Scaled <input type="checkbox"/> Dichotomous <input type="checkbox"/> Qualitative	(Riley, Stromberg, & Clark, 2005)

References

- Abidin, R. R. (1995). *The Parenting Stress Index professional manual*. Odessa, FL: Psychological Assessment Resources.
- Abidin, R. R. (1997). The Parenting Stress Index: A measure of the parent-child system. In C. P. Zalaquett & R. J. Woods (Eds.), *Evaluating stress: A book of resources*. (pp. 277-291). Latham, MD: University Press of America.
- Abramson-Madden, A. (2007). Widening the circle: The practice and evaluation of family group conferencing with children, youths, and their families. (J. Pennell, & G. Anderson, Eds.) *Journal of Sociology & Social Welfare*, 34(1).
- Administration for Children and Families. (2012, April 17). *Information memorandum: Promoting social and emotional well-being for children and youth receiving child welfare services*. Available from <http://www.acf.hhs.gov/programs/cb/resource/im1204>
- Akister, J., & Stevenson-Hinde, J. (2003). Identifying families at risk: Exploring the potential of the McMaster Family Assessment Device. *Journal of Family Therapy*, 13, 411-421.
- Allen, R., Petr, C., & Cay Brown, B. (1995). *Family-Centered Behavior Scale and user's manual*. Lawrence, KS: Beach Center on Families and Disability, University of Kansas.
- Anderson, R., & Lyons, J. (2001). Needs-based planning for persons with serious mental illness residing in intermediate care facilities. *Journal of Behavioral Health Services and Research*, 28(1), 104-110.
- Angold, A., Costello, E., Messer, S., Pickles, A., Winder, F., & Silver, D. (1995). The development of a short questionnaire for use in epidemiological studies of depression in children and adolescents. *International Journal of Methods in Psychiatric Research*, 5, 237-249.
- Armstrong, J. M., Goldstein, L. H., & MacArthur Working Group on Outcome Assessment. (2003). *Manual for the MacArthur Health and Behavior Questionnaire (HBQ 1.0)*. Pittsburgh, PA: University of Pittsburgh.
- Attkisson, C., & Greenfield, T. (2004). The UCSF client satisfaction scales: I. The client satisfaction questionnaire-8. In M. Maruish (Ed.), *The use of psychological testing for treatment planning and outcome assessment* (3rd ed., Vol. 3, pp. 813-838). Mahwah, NJ: Lawrence Erlbaum Associates.
- Barber, B. K., Olsen, J., Higgins, W. B., Krauskopf, D., Ward, C., McNeely, C., & Bose, K. (2007). *Report to WHO of final quantitative analyses: Connection/regulation tool project—Stage 3: Filed test*. Geneva, Switzerland: World Health Organization.
- Bard, D., Wolraich, M., Neas, B., Doffing, M., & Beck, L. (2013). The psychometric properties of the Vanderbilt Attention-deficit Hyperactivity Disorder Diagnostic Parent Rating Scale in a community population. *Journal of Developmental Behavior Pediatrics*, 34(2), 83-93.
- Bar-On, R. (2004). The Bar-On Emotional Quotient Inventory (EQ-i): Rational, description and psychometric properties. In G. Geher (Ed.), *Measuring emotional intelligence: Common ground and controversy* (pp. 115-145). Hauppauge, NY: Novas Science.

- Bavolek, S., & Keene, R. (2001). *Adult-Adolescent Parenting Inventory AAPI-2: Administration and development handbook*. Park City, UT: Family Development Resources, Inc.
- Bernstein, D. P., Fink, L., Handelsman, L., Foote, J., Lovejoy, M., Wenzel, K., . . . Ruggiero, J. (1994). Initial reliability and validity of a new retrospective measure of child abuse and neglect. *American Journal of Psychiatry, 151*(8), 1132-1136.
- Bliss, S. (2007). Review of the Battelle Developmental Inventory—second edition. *Journal of Psychoeducational Assessment, 25*, 409-415.
- Bricker, D., Shoen Davis, M., & Squires, J. (2004). Mental health screening in young children. *Infants and Young Children, 17*(2), 129-144.
- Briere, J. (1996). Psychometric review of the Trauma Symptom Checklist-40. In B. Stamm (Ed.), *Measurement of stress, trauma, and adaptation* (pp. 373-376). Lutherville, MD: Sidran Press.
- Briere, J. (1996). *Trauma Symptom Checklist for Children (TSCC) professional manual*. Odessa, FL: Psychological Assessment Resources.
- Briere, J. (2005). *Trauma Symptom Checklist for Young Children: Professional manual*. Odessa, FL: Psychological Assessment Resources.
- Briere, J., Johnson, K., Bissada, A., Damon, L., Crouch, J., Gil, E., . . . Ernst, V. (2001). The Trauma Symptom Checklist for Young Children (TSCYC): Reliability and association with abuse exposure in a multi-site study. *Child Abuse & Neglect, 25*(8), 1001-1014.
- Briere, J., & Runtz, M. (1989). The Trauma Symptom Checklist (TSC-33): Early data on a new scale. *Journal of Interpersonal Violence, 4*(2), 151-163.
- Briggs, R., Stettler, E., Johnson Silver, E., Schrag, R., Nayak, M., Chinitz, S., & Racine, A. (2012). Social-emotional screening for infants and toddlers in primary care. *Pediatrics, 129*(2), 1-8.
- Bryant, B. (1982). An index of empathy for children and adolescents. *Child Development, 53*(2), 413-425.
- Bucklew, S., Burk, J., Brownlee-Duffeck, M., Frank, R., & DeGood, D. (1988). Cognitive and somatic aspects of depression among a rehabilitation sample: Reliability and validity of the SCL-90-R research subscales. *Rehabilitation Psychology, 33*(2), 67-75.
- Burford, G., Pennell, J., & Edwards, M. (2011). Family team meetings as principled advocacy. *Journal of Public Child Welfare, 5*(2-3), 318-344.
- Buss, A. H., & Plomin, R. (1989). *A temperament theory of personality development*. New York, NY: John Wiley.
- Butler, C., & Chinowsky, P. (2006). Emotional intelligence and leadership behavior in construction executives. *Journal of Management in Engineering, 22*(3), 119-125.
- Byles, J., Byrne, C., Boyle, M. H., & Offord, D. R. (2004). Ontario Child Health Study: Reliability and validity of the general functioning subscale of the McMaster Family Assessment Device. *Family Process, 27*(1), 97-104.
- Caldwell, B. M., & Bradley, R. H. (2003). *Home Observation for Measurement of the Environment: Administration manual*. Tempe, AZ: Family & Human Dynamics Research Institute, Arizona State University.

- Campbell, S. K. (1999). Test-retest reliability of the Test of Infant Motor Performance. *Pediatric Physical Therapy, 11*(2), 60-66.
- Carroll, J. (1984). The Substance Abuse Problem Checklist: A new clinical aid for drug and/or alcohol treatment dependency. *Journal of Substance Abuse Treatment, 1*(1), 31-36.
- Center for the Advancement of Collaborative Strategies in Health. (2002). *Partnership self-assessment tool questionnaire*. Retrieved from: <http://www.nccmt.ca/uploads/registry/tool%20questionnaire.pdf>
- Center for Substance Abuse Treatment. (1994). *Treatment Improvement Protocol (TIP) series 11. Simple screening instruments for outreach for alcohol and other drug abuse and infectious diseases*. DHHS Publication No. (SMA) 94-2094. Rockville, MD: Substance Abuse and Mental Health Services Administration.
- Charuvastr, A., Goldfarb, E., Petkova, E., & Cloitre, M. (2010). Implementation of a screen and treat program for child posttraumatic stress disorder in a school setting after a school suicide. *Journal of Traumatic Stress, 23*(4), 500-503.
- Cohen, J., & Scheeringa, M. (2009). Post-traumatic stress disorder diagnosis in children: Challenges and promises. *Dialogues in Clinical Neuroscience, 11*(1), 91-99.
- Cohon, D., Hines, L., Cooper, B., Packman, W., & Siggins, E. (2003). A preliminary study of an intervention with kin caregivers. *Journal of Intergenerational Relationships, 1*(3), 49-72.
- Comfort, M., & Gordon, P. (2006). The Keys to Interactive Parenting Scale (KIPS): A practical observational assessment of parenting behavior. *NHSA Dialog: A Research-To-Practice Journal for the Early Intervention Field, 9*(1), 22-48.
- Comfort, M., Gordon, P., English, B., Hacker, K., Hembree, R., Knight, R., & Miller, C. (2010). Keys to Interactive Parenting Scale: KIPS shows how parents grow. *Zero to Three Journal, 30*(4), 33-39.
- Comfort, M., Gordon, P., & Naples, D. (2011). KIPS: An evidence-based tool for assessing parenting strengths and needs in diverse families. *Infants & Young Children: An Interdisciplinary Journal of Early Childhood Intervention, 24*(1), 56-74.
- Comfort, M., Gordon, P., & Unger, D. (2006). Keys to Interactive Parenting Scale: A window into many facets of parenting. *Zero to Three Journal, 26*(5), 37-44.
- Conrad, K. J., Yagelka, J. R., Matters, M. D., Rich, A. R., Williams, V., & Buchanan, M. (2001). Reliability and validity of a modified Colorado Symptom Index in a national homeless sample. *Mental Health Services Research, 3*(3), 141-153.
- Cook, G., & Roggman, L. (2009). *PICCOLO (Parenting Interactions with Children: Checklist of Observations Linked to Outcomes) technical report*. Logan, UT: Utah State University.
- Cook-Cottone, C. (2004). Childhood posttraumatic stress disorder: Diagnosis, treatment, and school reintegration. *School Psychology Review, 33*(1), 127-139.
- Cooper, J., Masi, R., & Vick, J. (2009). *Social-emotional development in early childhood: What every policymaker should know*. Columbia University Academic Commons, <http://hdl.handle.net/10022/AC:P:8883>.
- Corcoran, J. (2004). *Building strengths and skills: A collaborative approach to working with clients*. New York, NY: Oxford University Press.

- Counts, J. M., Buffington, E. S., Chang-Rios, K., Rasmussen, H. N., & Preacher, K. J. (2010). The development and validation of the Protective Factors Survey: A self-report measure of protective factors against child maltreatment. *Child Abuse & Neglect, 34*(10), 762-772.
- Cox, J., Holden, J., & Sagovsky, R. (1987). Detection of postnatal depression: Development of the 10-item Edinburgh Postnatal Depression Scale. *British Journal of Psychiatry, 150*(6), 782-786.
- Dawda, D., & Hart, S. (2000). Assessing emotional intelligence: Reliability and validity of the Bar-On Emotional Quotient Inventory (1997; 2000) in university students. *Personality and Individual Differences, 28*(4), 797-812.
- Derogatis, L., & Melisaratos, N. (1983). The Brief Symptom Inventory: An introductory report. *Psychological Medicine, 13*(3), 595-605.
- Derogatis, L., & Savitz, K. (2000). The SCL-90-R and the Brief Symptom Inventory (BSI) in primary care. In M. Maruish (Ed.), *Handbook of psychological assessment in primary care settings* (pp. 297-334). Mahwah, NJ: Lawrence Erlbaum Associates.
- DeYoung, A., Kenardy, J., & Cobham, V. (2011). Diagnosis of posttraumatic stress disorder in preschool children. *Journal of Clinical Child and Adolescent Psychology, 40*(3), 375-384.
- DeYoung, A., Kenardy, J., Cobham, V., & Kimble, R. (2012). Prevalence, comorbidity, and course of trauma reactions in young burn-injured children. *Journal of Child Psychology and Psychiatry, 53*(1), 56-63.
- Dowell, K. A., & Ogles, B. M. (2008). The Ohio Scales Youth Form: Expansion and validation of a self-report outcome measure for young children. *Journal of Child and Family Studies, 17*(3), 291-305.
- Drabble, L. (2007). Pathways to collaboration: Exploring values and collaborative practice between child welfare and substance abuse treatment fields. *Child Maltreatment, 12*(1), 31-42.
- Drabble, L., Tweed, M., Osterling, K., Navarrette, L., Pearce, C., Riberio, P., & Twomey, E. (2006). Pathways to collaboration: Understanding the role of values and system-related factors in collaboration between child welfare and substance abuse treatment fields. Berkley, CA: California Social Work Education Center. Retrieved January 7, 2013, from California State University Long Beach website:
www.csulb.edu/projects/ccwrl/Drabble_module_powerpoint.pdf
- Duncan, L. (2007). *Assessment of mindful parenting among parents of early adolescents: Development and validation of the Interpersonal Mindfulness in Parenting scale*. (Doctoral dissertation, The Pennsylvania State University).
- Dunst, C. J., Cooper, C. S., Weeldreyer, J. C., Snyder, K. D., & Chase, J. H. (1986). *Family Needs Scale: Reliability and validity*. Asheville, NC: Winterberry Press.
- Dunst, C., Trivette, C., & Deal, A. (1988). *Enabling and empowering families: Principles and guidelines for practice*. Cambridge, MA: Brookline Books.
- Early Childhood Outcomes Center. (2010). *Family Outcomes Survey (FOS)*.

- Easterbrooks, M., & Biringen, Z. (2005). The Emotional Availability Scales: Methodological refinements of the construct and clinical implications related to gender and at-risk interactions. *Journal of Infant Mental Health*, 26(4), 291-291.
- Easton, C., Swan, S., & Sinha, R. (2000). Prevalence of family violence in clients entering substance abuse treatment. *Journal of Substance Abuse Treatment*, 18(1), 23-28.
- Eisen, M. (1997). *The development and validation of a new measure of PTSD for young children*. Unpublished manuscript.
- Eisenstadt, T., McElreath, L., Eyberg, S., & McNeil, C. (1994). Interparent agreement on the Eyberg Child Behavior Inventory. *Child and Family Behavior Therapy*, 16(1), 21-27.
- Elliot, D., & Briere, J. (1992). Sexual abuse trauma among professional women: Validating the Trauma Symptom Checklist—40 (TSC-40). *Child Abuse & Neglect*, 16(3), 391-398.
- Endicott, J., Nee, J., Yang, R., & Wohlberg, C. (2006). Pediatric Quality of Life Enjoyment and Satisfaction Questionnaire (PQ-LES-Q): Reliability and validity. *Journal of the American Academy of Child and Adolescent Psychiatry*, 45(4), 401-407.
- Epstein, N. B., Baldwin, L. M., & Bishop, D. S. (2007). The McMaster Family Assessment Device. *Journal of Marital and Family Therapy*, 9(2), 171-180.
- Essex, M. J., Boyce, W. T., Goldstein, L. H., Armstrong, J. M., Kraemer, H. C., Kupfer, D. J., & MacCarther Assessment Battery Working Group. (2002). The confluence of mental, physical, social, and academic difficulties in middle childhood. II: Developing the MacArthur Healthand Behavior Questionnaire. *Journal of the American Academy of Child and Adolescent Psychiatry*, 41(5), 588-603.
- Eyberg, S., & Pincus, D. (1999). *Eyberg Child Behavior Inventory and Sutter-Eyberg Student Behavior Inventory—Revised*. Odessa, FL: Psychological Assessment Resources.
- Eyberg, S. M., & Ross, A. W. (1978). Assessment of child behavior problems: The validation of a new inventory. *Journal of Clinical Child Psychology*, 7(2), 113-116.
- Finch, A., Saylor, C., Edwards, G., & McIntosk, J. (1987). Children's Depression Inventory: Reliability over repeated administrations. *Journal of Clinical Child Psychology*, 16(4), 339-341.
- Foa, E., Johnson, K., Feeny, N., & Treadwell, K. (2001). The Child PTSD Symptom Scale: A preliminary examination of its psychometric properties. *Journal of Clinical Child Psychology*, 30(3), 376-384.
- Fox, N., & Leavitt, L. (1995). *The Violence Exposure Scale for Children—VEX*. College Park, MD: Department of Human Development, University of Maryland.
- Frankenburg, W. K., & Dobbs, J. (1967). The Denver Developmental Screening Test. *The Journal of Pediatrics*, 71(2), 181-191.
- Frey, B., Lohmeier, J., Lee, S., & Tollefson, N. (2006). Measuring collaboration among grant partners. *American Journal of Evaluation*, 27(3), 383-392.

- Funderburk, B., Eyberg, S., Rich, B., & Behar, L. (2003). Further psychometric evaluation of the Eyberg and Behar rating scales for parents and teachers of preschoolers. *Early Education and Development, 14*(1), 67-81.
- Gardner, W., Lucas, A., Kolko, D., & Campo, J. (2007). Comparison of the PSC-17 and alternative mental health screens in an at-risk primary care sample. *Journal of the American Academy of Child and Adolescent Psychiatry, 46*(5), 611-618.
- Gaudin, J., Polansky, N., & Kilpatrick, A. (1992). The child well-being scales: A field trial. *Child Welfare, 71*(4), 318-319.
- Gerard, A. (1994). *Parent-Child Relationship Inventory (PCRI) manual*. Los Angeles, CA: WPS.
- Gibbs, L. (1983). Validity and reliability of the Michigan Alcoholism Screening Test: A review. *Drug and Alcohol Dependency, 12*(3), 279-285.
- Gilmore, L., & Cuskelly, M. (2009). Factor structure of the Parenting Sense of Competence Scale using a normative sample. *Child Care, Health, and Development, 35*(1), 48-55.
- Glascoc, F., Byrne, K., Ashford, L., Johnson, K., Chang, B., & Strickland, B. (1992). Accuracy of the Denver-II in developmental screening. *Pediatrics, 89*(6), 1221-1225.
- Gleason, M., Zeanah, C., & Dickstein, S. (2010). Recognizing young children in need of mental health assessment: Development and preliminary validity of the Early Childhood Screening Assessment. *Infant Mental Health Journal, 31*(3), 335-357.
- Goodman, A., & Goodman, R. (2011). Population mean scores predict child mental disorder rates: Validating SDQ prevalence estimators in Britain. *Journal of Child Psychology and Psychiatry, 52*(1), 100-108.
- Goodman, R. (1997). The Strengths and Difficulties Questionnaire: A research note. *Journal of Child Psychology and Psychiatry, 38*(5), 581-586.
- Goodman, R. (1999). The extended version of the Strengths and Difficulties Questionnaire as a guide to child psychiatric caseness and consequent burden. *Journal of Child Psychology and Psychiatry, 40*(5), 791-799.
- Goodman, R. (2001). Psychometric properties of the Strengths and Difficulties Questionnaire. *Journal of the American Academy of Child and Adolescent Psychiatry, 40*(11), 1337-1345.
- Goodman, R., Ford, T., Simmons, H., Gatward, R., & Meltzer, H. (2000). Using the Strengths and Difficulties Questionnaire (SDQ) to screen for child psychiatric disorders in a community sample. *British Journal of Psychiatry, 177*(6), 534-539.
- Goodwin, R., & Lyons, J. (2001). An emergency housing program as an alternative to inpatient treatment for persons with severe mental illness. *Psychiatric Services, 52*(1), 92-95.
- Goodman, R., & Scott, S. (1999). Comparing the Strengths and Difficulties Questionnaire and the Child Behavior Checklist: Is small beautiful? *Journal of Abnormal Child Psychology, 27*(1), 17-24.
- Gordon, P., & Comfort, M. (2013). How parenting assessment strengthens family services. *Journal of Health Visiting, 1*(11), 626-632.
- Gray, M., Elhai, J., Owen, J., & Monroe, R. (2009). Psychometric properties of the Trauma Assessment for Adults. *Depression and Anxiety, 26*(2), 190-195.

- Greenwald, R., & Rubin, A. (1999). Brief assessment of children's post-traumatic symptoms: Development and preliminary validation of parent and child scales. *Research on Social Work Practice, 9*(1), 61-75.
- Gresham, F., & Elliot, S. (1990). *Social Skills Rating System (SSRS)*. Circle Pines, MN: American Guidance Service.
- Grisso, T., Fusco, S., Paiva-Salisbury, M., Perraut, R., Williams, V., & Barunum, R. (2012). *The Massachusetts Youth Screening Instrument—Version 2 (MAYSI-2): Comprehensive research review*. Worcester, MA: University of Massachusetts Medical School.
- Gurwitch, R., Kees, M., & Becker, S. (2002). In the face of tragedy: Placing children's reactions to trauma in a new context. *Cognitive & Behavioral Practice, 9*(4), 286-295.
- Harris, M., & Fallot, R. (2001). *Using trauma theory to design service systems: New directions for mental health services*. San Francisco, CA: Jossey-Bass.
- Harter, S. (1982). The Perceived Competence Scale for Children. *Child Development, 53*(1), 87-97.
- Haskett, M., Ahern, L., Ward, C., & Allaire, J. (2006). Factor structure and validity of the Parenting Stress Index—Short Form. *Journal of Clinical and Child Adolescent Psychology, 35*(2), 302-312.
- Hays, R., Sherbourne, C., & Mazel, R. (1995). *User's manual for Medical Outcomes Study (MOS) core measures of health-related quality of life*. Santa Monica, CA: RAND Corporation.
- Hill, C., & Hughes, J. N. (2007). An examination of the convergent and discriminant validity of the Strengths and Difficulties Questionnaire. *School Psychology Quarterly, 22*(3), 380-406.
- Hodges, K. (1994). *Child and Adolescent Functional Assessment Scale*. Ypsilanti, MI: Eastern Michigan University, Department of Psychology.
- Hodges, K., & Gust, J. (1995). Measures of impairment for children and adolescents. *Journal of Mental Health Administration, 22*(4), 403-413.
- Hodges, K., & Wong, M. (1996). Psychometric characteristics of a multidimensional measure to assess impairment: The Child Adolescent Functional Assessment Scale. *Journal of Child and Family Studies, 5*(4), 445-467.
- Hoge, R., & Andrews, D. (2006). *Youth Level of Service/Case Management Inventory (YLS/CMI): User's manual*. North Tonawanda, NY: Multi-Health Systems.
- Horowitz, K., Weine, S., & Jekel, J. (1995). PTSD symptoms in urban adolescent girls: Compounded community violence. *Journal of the American Academy of Child and Adolescent Psychiatry, 34*(10), 1353-1361.
- Ippen, C., Ford, J., Racusin, R., Acker, M., Bosquet, M., Rogers, K., . . . Edwards, J. (2002). *Traumatic Events Screening Inventory—Parent Report Revised*. Unpublished manuscript.
- James Bell Associates, Inc. (2012). *Interagency partnerships: A compendium of measurement instruments*. Arlington, VA: Author. Available from http://www.jbassoc.com/ReportsPublications/Collaboration%20Compendium%20Final%2010_16_2012.pdf

- Jellinek, M., Murphy, J., Little, M., Pagano, M., Comer, D., & Kelleher, K. (1999). Use of the Pediatric Symptom Checklist (PSC) to screen for psychosocial problems in pediatric primary care: A national feasibility study. *Archives of Pediatric and Adolescent Medicine*, 153(3), 254-260.
- Jellinek, M., Murphy, J., Robinson, J., Feins, A., Lamb, S., & Fenton, T. (1988). Pediatric Symptom Checklist: Screening school-age children for psychosocial dysfunction. *Journal of Pediatrics*, 112(2), 201-209.
- Jirikowic, T. L., Engel, J., & Deitz, J. C. (1997). The test of sensory functions in infants: Test-retest reliability for infants with developmental delays. *American Journal of Occupational Therapy*, 51(9), 733-738.
- Johnston, C., & Mash, E. (1989). A measure of parenting satisfaction and efficacy. *Journal of Clinical Child Psychology*, 18(2), 167-175.
- Jones, R., Fletcher, K., & Ribbe, D. (2002). *Child's Reaction to Traumatic Events—Revised (CRTES-R): A self-report traumatic stress measure*. Available from the first author, Department of Psychology, Stress and Coping Lab, Virginia Tech University, Blacksburg, VA, 24060.
- Kassam-Adams, N. (2006). The Acute Stress Checklist for Children (ASC-Kids): Development of a child self-report measure. *Journal of Traumatic Stress*, 19(1), 129-139.
- Kenardy, J., Spence, S., & Macleod, A. (2006). Screening for posttraumatic stress disorder in children after accidental injury. *Pediatrics*, 118(3), 1002-1009.
- King, L., King, D., Leskin, G., & Foy, D. (1995). The Los Angeles Symptom Checklist: A self-report measure of posttraumatic stress disorder. *Assessment*, 2(1), 1-17.
- Kiresuk, T. J., Smith, A., & Cardillo, J. R. (1994). *Goal attainment scaling: Applications, theory, and measurement*. Hillsdale, NJ: Erlbaum.
- Kirk, R. (2008). Development and field testing of a family assessment scale for use in child welfare practice settings utilizing differential response. *Protecting Children*, 23(1&2), 71-87.
- Koren, P., DeChillo, N., & Friesen, B. (1992). Measuring empowerment in families whose children have emotional disabilities: A brief questionnaire. *Rehabilitation Psychology*, 37(4), 305-321.
- Kostanecka, A., Power, T., Clarke, A., Watkins, M., Hausman, C., & Blum, N. (2008). Behavioral health screening in urban primary care settings: Construct validity of the PSC-17. *Journal of Developmental and Behavioral Pediatrics*, 29(2), 124-128.
- Kristenson, H., & Trelle, E. (2006). Indicators of alcohol consumption: Comparisons between a questionnaire (Mm-MAST), interviews and serum γ -Glutamyl Transferase (GGT) in a health survey of middle-aged males. *British Journal of Addiction*, 77(3), 297-304.
- Larsen, D. A. (1979). Assessment of client/patient satisfaction: Development of a general scale. *Evaluation and Program Planning*, 2, 197-207.
- Leet, H., & Dunst, C. J. (1988). Family Resource Scale. In C. J. Dunst, C. M. Trivette, & A. G. Deal (Eds.), *Enabling and empowering families: Guidelines and principles for practice* (pp. 139-141). Cambridge, MA: Brookline Books.

- Lemery-Chalfant, K., Schreiber, J., Schmidt, N., Van Hulle, C., Essex, M., & Goldsmith, H. (2007). Assessing internalizing, externalizing, and attention problems in young children: Validation of the MacArthur HBQ. *Journal of the American Academy of Child and Adolescent Psychiatry, 46*(10), 1315-1323.
- Leon, S., Lyons, J., Christopher, N., & Miller, S. (1998). Psychiatric hospital outcomes of dual diagnosis patients under managed care. *American Journal of Addictions, 7*(1), 81-86.
- Levendosky, A., Huth-Bocks, A., Semel, M., & Shapiro, D. (2002). Trauma symptoms in preschool-age children exposed to violence. *Journal of Interpersonal Violence, 17*(2), 150-164.
- Levine, S. (2013). Evaluating the seven-item Center for Epidemiologic Studies Depression Scale Short-form: A longitudinal U.S. community study. *Social Psychiatry and Psychiatric Epidemiology, 48*(9), 1519-1526.
- Liss, H., Phares, V., & Liljequist, L. (2001). Symptom endorsement differences on the Children's Depression Inventory with children and adolescents on an inpatient unit. *Journal of Personality Assessment, 76*(3), 396-411.
- Little, M., Murphy, J., Jellinek, M., Bishop, S., & Arnett, H. (1994). Screening 4- and 5-year-old children for psychosocial dysfunction: A preliminary study with the Pediatric Symptom Checklist. *Journal of Developmental and Behavioral Pediatrics, 15*(3), 191-197.
- Löwe, B., Unützer, J., Callahan, C. M., Perkins, A. J., & Kroenke, K. (2004). Monitoring depression treatment outcomes with the Patient Health Questionnaire-9. *Medical Care, 42*(12), 1194-1201.
- Loyd, B., & Abiden, R. (1985). Revision of the Parenting Stress Index. *Journal of Pediatric Psychology, 10*(2), 169-177. Available from <http://jpepsy.oxfordjournals.org/cgi/content/abstract/10/2/169>
- Lyons, J., Colletta, J., Devens, M., & Finkel, S. (1995). Validity of the Severity of Psychiatric Illness rating scale in a sample of inpatients on a psychogeriatric unit. *International Psychogeriatrics, 7*(3), 407-416.
- Lyons, J., O'Mahoney, M., Miller, S., Neme, J., Kabat, J., & Miller, F. (1997). Predicting readmission to the psychiatric hospital in a managed care environment: Implications for quality indicators. *American Journal of Psychiatry, 154*(3), 337-340.
- Lyons, J., Stutesman, J., Neme, J., Vessey, J., O'Mahoney, M., & Camper, J. (1997). Predicting psychiatric emergency admission and hospital outcome. *Medical Care, 35*(8), 792-800.
- MacDermott, S. T., Gullone, E., Allen, J. S., King, N. J., & Tonge, B. (2010). The Emotion Regulation Index for Children and Adolescents (ERICA): A psychometric investigation. *Journal of Psychopathology & Behavioral Assessment, 32*(3), 301-314.
- Magura, S., & Moses, B. (1987). *Outcome measures for welfare services: Child well-being scales and rating form*. Washington, DC: Child Welfare League of America.
- Maisto, S., Connors, G., & Allen, J. (1995). Contrasting self-report screens for alcohol problems: A review. *Alcoholism: Clinical and Experimental Research, 19*(6), 1510-1516.

- Mattessich, P., Murray-Close, M., & Monsey, B. (2001). *Collaboration: What makes it work* (2nd ed.). St. Paul, MN: Fieldstone Alliance.
- Mattessich, P., Murray-Close, M., & Monsey, B. (2001). *Wilder Collaboration Factors Inventory*. St. Paul, MN: Wilder Research.
- McCroskey, J., Sladen, A., & Meezan, W. (1997). *Family Assessment Form: A practice-based approach to assessing family functioning*. Washington, DC: CWLA Press.
- McDowell, I., & Newell, C. (1996). *Measuring health: A guide to rating scales and questionnaires* (2nd ed.). New York, NY: Oxford University Press.
- McGuire, J., & Richman, N. (1986). Screening for behavior problems in nurseries: The reliability and validity of the Preschool Behavioral Checklist. *Journal of Child Psychology and Psychiatry*, 27(1), 7-32.
- McKelvey, L., Whiteside-Mansell, L., Faldowski, R., Shears, J., Ayoub, C., & Hart, A. (2009). Validity of the short form of the Parenting Stress Index for fathers of toddlers. *Journal of Child and Family Studies*, 18(1), 102-111.
- Merrell, K. (1996). Social-emotional assessment in early childhood: The Preschool and Kindergarten Behavior Scales. *Journal of Early Intervention*, 20(2), 132-145.
- Messer, S., Angold, A., Costello, E., Loeber, R., Van Kammen, W., & Stouthamer-Loeber, M. (1995). Development of a short questionnaire for use in epidemiological studies of depression in children and adolescents: Factor composition and structure across development. *International Journal of Methods in Psychiatric Research*, 5, 251-262.
- Michael, K. D., & Merrell, K. (1998). Reliability of children's self-reported internalizing symptoms over short- to medium-length time intervals. *Journal of the American Academy of Child and Adolescent Psychiatry*, 37(2), 194-201.
- Montazeri, A., Torkan, B., & Omidvari, S. (2007). The Edinburgh Postnatal Depression Scale (EPDS): Translation and validation study of the Iranian version. *BMC Psychiatry*, 7(11).
- Nader, K. (2004). Assessing traumatic experiences in children and adolescents: Self-reports of DSM PTSD Criteria B-D symptoms. In J. P. Wilson & T. M. Keane, *Assessing psychological trauma and PTSD* (2nd ed., pp. 513-537). New York, NY: Guilford Press.
- Nader, K., Kriegler, J., Blake, D., Pynoos, R., Newman, E., & Weathers, F. (1996). *Clinician-administered PTSD scale, child and adolescent version*. White River Junction, VT: National Center for PTSD.
- National Center on Substance Abuse and Child Welfare. (2003). *Framework and policy tools for improving linkages between alcohol and drug services, child welfare services and dependency courts*. Washington, D.C.: Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services.
- National Fatherhood Initiative. (2006). *24/7 Dad A.M. and 24/7 Dad P.M.: Outcome evaluation results, 2005-2006*. Germantown, MD: Author. Retrieved January 8, 2013, from <http://store.fatherhood.org/c-92-program-researchevaluation.aspx>
- Nelson, W., & Finch, A. (2000). *Children's Inventory of Anger (CHIA): Manual*. Los Angeles, CA: Western Psychological Services.

- Nelson, W., Hart, K., & Finch, A. (1993). Anger in children: A cognitive behavioral view of the assessment-therapy connection. *Journal of Rational Emotive and Cognitive Behavior Therapy*, 11(3), 135-150.
- Newborg, J. (2005). *Battelle Developmental Inventory* (2nd ed.). Itasca, IL: Riverside Publishing.
- Norris, F., & Hamblen, J. (2004). Standardized self-report measures of civilian trauma and PTSD. In J. K. Wilson (Ed.), *Assessing psychological trauma and PTSD* (pp. 63-102). New York, NY: Guilford Press.
- Ogles, B. M., Melendez, G., Davis, D. C., & Lunnen, K. M. (2001). The Ohio Scales: Practical outcome assessment. *Journal of Child and Family Studies*, 10(2), 199-212.
- Ohan, J., Leung, D., & Johnston, C. (2000). The Parenting Sense of Competence Scale: Evidence of a stable factor structure and validity. *Canadian Journal of Behavioural Science*, 32(4), 251-261.
- Ohan, J., Myers, K., & Collett, B. (2002). Ten-year review of rating scales. IV: Scales assessing trauma and its effects. *Journal of the American Academy of Child and Adolescent Psychiatry*, 41(12), 1401-1422.
- Olsson, K., Kenardy, J., De Young, A., & Spence, S. (2008). Predicting children's post-traumatic stress symptoms following hospitalization for accidental injury: Combining the Child Trauma Screening Questionnaire and heart rate. *Journal of Anxiety Disorders*, 22(8), 1447-1453.
- Undersma, S., Chaffin, M., Mullins, S., & LeBreton, J. (2005). A brief form of the Child Abuse Potential Inventory: Development and validation. *Journal of Clinical Child and Adolescent Psychology*, 34(2), 301-311.
- Orsillo, S. (2001). Measures for acute stress disorder and posttraumatic stress disorder. In M. M. Antony, S. M., Orsillo, & L. Roemer (Eds.), *Practitioner's guide to empirically based measures of anxiety* (pp. 255-307). New York, NY: Kluwer Academic/Plenum.
- Pagano, M., Murphy, J., Pedersen, M., Mosbacher, D., Crist-Whitzel, J., Jordan, P., . . . Jellinek, M. (1996). Screening for psychosocial problems in 4-5-year-olds during routine EPSDT examinations: Validity and reliability in a Mexican-American sample. *Clinical Pediatrics*, 35(3), 139-146.
- Parker Oliver, D., Wittenberg-Lyles, E. M., & Day, M. (2007). Measuring interdisciplinary perceptions of collaboration on hospice teams. *American Journal of Hospice and Palliative Medicine*, 24(1), 49-53.
- Pascoe, J., Jalongo, N., Horn, W., Reinhart, M., & Perradatto, D. (1987). The reliability and validity of the Maternal Social Support Index. *Family Medicine*, 20(4), 271-276.
- Pence, B., Gaynes, B., Whetten, K., Eron, J., Ryder, R., & Miller, W. (2005). Validation of a brief screening instrument for substance abuse and mental illness in HIV-positive patients. *Journal of Acquired Immune Deficiency Syndromes*, 40(4), 434-444.
- Pennebaker, J., & Sussman, J. (1988). Disclosure of traumas and psychosomatic processes. *Social Science and Medicine*, 26(3), 327-332.
- Pennell, J. (2003). *Achievement of objectives, pre and during conference*. Raleigh, NC: North Carolina State University, Department of Social Work.

- Pennell, J. (2004). Family group conferencing in child welfare: Responsive and regulatory interfaces. *Journal of Sociology and Social Welfare*, 31(1), 117-135.
- Pennell, J. (2005). Checking for model fidelity. In Pennell, J., & Anderson, G. (Eds.), *Widening the circle: The practice and evaluation of family group conferencing with children, youths, and their families* (pp. 107-121). Washington, DC: NASW Press.
- Pfizer. (1999). *Patient Health Questionnaire depression scale (PHQ-9)*.
- Phinney, J. S. (1992). The Multigroup Ethnic Identity Measure: A new scale for use with adolescents and young adults from diverse groups. *Journal of Adolescent Research*, 7(2), 156-176.
- Piers, E. V., & Herzberg, D. S. (2002). *Piers-Harris Children's Self-Concept Scale—Second edition manual*. Los Angeles, CA: Western Psychological Services.
- Pinto-Meza, A., Serrano-Blanco, A., Penarrubia, M. T., Blanco, E., & Haro, J. M. (2005). Assessing depression in primary care with the PHQ-9: Can it be carried out over the telephone? *Journal of General Internal Medicine*, 20(8), 738-742.
- Plake, B., Impara, J., & Spies, R. (2003). *The fifteenth mental measurements yearbook*. Lincoln, NE: Buros Institute of Mental Measurements.
- Pokorny, A., Miller, B., & Kaplan, H. (1972). The brief MAST: A shortened version of the Michigan Alcoholism Screening Test. *American Journal of Psychiatry*, 129(3), 118-121.
- Printz, P., Borg, A., & Demaree, A. (2003). *A look at social, emotional, and behavioral screening tools for Head Start and Early Head Start*. Washington, DC: Education Development Center. Retrieved from : <http://ccf.edc.org/PDF/screentools.pdf>
- Pynoos, R., Rodriguez, N., Steinberg, A., & Frederick, C. (1999). *UCLA PTSD Index for DSM-IV*. Los Angeles, CA: University of California at Los Angeles Trauma Psychiatry Service.
- Quay, H., & Peterson, D. (1996). *Revised Behavior Problem Checklist—PAR Edition (RBPC) professional manual*. Odessa, FL: Psychological Assessment Resources.
- Rauktis, M., Huefner, J., & Cahalane, H. (2011). Perceptions of fidelity to family group decision making principles: Examining the impact of race, gender, and relationship. *Child Welfare*, 90(4), 41-59.
- Reitman, D., Currier, R., & Stickle, T. (2002). A critical evaluation of the Parenting Stress Index-Short Form (PSI-SF) in a Head Start population. *Journal of Clinical Child and Adolescent Psychology*, 31(3), 384-392.
- Resnick, H., Falsetti, S., Kilpatrick, D., & Freedy, J. (1996). Assessment of rape and other civilian trauma-related post-traumatic stress disorder: Emphasis on assessment of potentially traumatic events. In T. W. Miller (Ed.), *Stressful life events* (pp. 231-266). Madison, WI: International Universities Press.
- Ribbe, D. (1996). Psychometric review of Traumatic Event Screening Instrument for Children (TESI-C). In B. Stamm (Ed.), *Measurement of stress, trauma, and adaptation* (pp. 386-387). Lutherville, MD: Sidran Press.
- Rich, B., & Eyberg, S. (2001). Accuracy of assessment: The discriminative and predictive power of the Eyberg Child Behavior Inventory. *Ambulatory Child Health*, 7(3-4), 249-257.

- Ridge, N., Warren, J., Burlingame, G., Wells, M., & Tumblin, K. (2009). Reliability and validity of the Youth Outcome Questionnaire Self-Report. *Journal of Clinical Psychology, 65*(10), 1115-1126.
- Riley, S. E., Stromberg, A. J., & Clark, J. D. (2005). Assessing parental satisfaction with children's mental health services with the Youth Services Survey for Families. *Journal of Child and Family Studies, 14*(1), 87-99.
- Roberts, R., Phinney, J., Masse, L., Chen, Y., Roberts, C., & Romero, A. (1999). The structure of ethnic identity in young adolescents from diverse ethno-cultural groups. *Journal of Early Adolescence, 19*(3), 301-322.
- Robins, L., Helzer, J., Croughan, J., & Ratcliff, K. (1981). National Institute of Mental Health Diagnostic Interview Schedule: History, characteristics, and validity. *Archives of General Psychiatry, 38*(4), 381-389.
- Rogers, H., & Matthews, J. (2004). The Parenting Sense of Competence Scale: Investigation of the factor structure, reliability, and validity for an Australian sample. *Australian Psychologist, 39*(1), 88-96.
- Roggman, L., Cook, G., Innocenti, M., Jump, V., & Christiansen, K. (2009). *PICCOLO (Parenting Interactions with Children: Checklist of Observations Linked to Outcomes) user's guide*. Logan, UT: Utah State University.
- Rosenberg, M. (1989). *Society and the adolescent self-image* (rev. ed.). Middletown, CT: Wesleyan University Press.
- Ross, H., Gavin, D., & Skinner, H. (1990). Diagnostic validity of the MAST and the Alcohol Dependence Scale in the assessment of DSM-III alcohol disorders. *Journal of Studies on Alcohol, 51*(6), 506-513.
- Saigh, P., Yaski, A., Oberfiled, R., Green, B., Halamandaris, P., Rubenstein, H., . . . McHugh, M. (2000). The Children's PTSD Inventory: Development and reliability. *Journal of Traumatic Stress, 30*(3), 369-380.
- Salkind, N. (2007). *Encyclopedia of measurement and statistics*. Thousand Oaks, CA: Sage.
- Salloum, A., & Storch, E. (2011). Parent-led, therapist-assisted, first-line treatment for young children after trauma: A case study. *Child Maltreatment, 16*(3), 227-232.
- Sarason, I., Levine, H. M., Basham, R., & Sarason, B. (1983). Assessing social support: The Social Support Questionnaire. *Journal of Personality and Social Psychology, 44*(1), 127-139.
- Sarason, I., Sarason, B., Shearin, E., & Pierce, G. (1987). A brief measure of social support: Practical and theoretical implications. *Journal of Social and Personal Relationships, 4*(4), 497-510.
- Saxe, G., Chawla, N., Stoddard, F., Kassam-Adams, N., Courtney, D., Cunningham, K., . . . Kind, L. (2003). Child Stress Disorders Checklist: A measure of ASD and PTSD in children. *Journal of the American Academy of Child and Adolescent Psychiatry, 42*(8), 972-978.
- Saylor, C., Swenson, C., Reynolds, S., & Taylor, M. (1999). The Pediatric Emotional Distress Scale: A brief screening measure for young children exposed to traumatic events. *Journal of Clinical Child Psychology, 28*(1), 70-81.

- Scheeringa, M. (2011). PTSD in children younger than the age of 13: Toward a developmentally sensitive assessment and management. *Journal of Child and Adolescent Trauma*, 4(3), 181-197.
- Scheeringa, M., & Haslett, N. (2010). The reliability and criterion validity of the diagnostic Infant and Preschool Assessment: A new diagnostic instrument for young children. *Child Psychiatry & Human Development*, 41(3), 299-312.
- Scheeringa, M., Peebles, C., Cook, C., & Zeanah, C. (2001). Toward establishing procedural, criterion, and discriminant validity for PTSD in early childhood. *Journal of the American Academy of Child and Adolescent Psychiatry*, 34(2), 191-200.
- Scheeringa, M., & Zeanah, C. (1994). *PTSD semi-structured interview and observation record for infants and young children*. New Orleans, LA: Department of Psychiatry and Neurology, Tulane University Health Sciences Center.
- Schmidt, F., Hoge, R., & Gomes, L. (2005). Reliability and validity analyses of the Youth Level of Service/Case Management Inventory. *Criminal Justice and Behavior*, 32(3), 329-344.
- Schwartz, R. (1999). Reliability and validity of the Functional Assessment Rating Scale. *Psychological Reports*, 84(2), 389-391.
- Selby, P. (2011). *Family Team Decision Making Quality and Fidelity Index*. Boulder, CO: TriWest Group.
- Selzer, M. (1971). The Michigan Alcoholism Screening Test: The quest for a new diagnostic instrument. *American Journal of Psychiatry*, 127(12), 1653-1658.
- Selzer, M., Vinokur, A., & Van Rooijen, L. (1975). A self-administered short version of the Michigan Alcoholism Screening Test (SMAST). *Journal of Studies on Alcohol*, 36(1), 117-126.
- Shahinfar, A., Fox, N., & Leavitt, L. (2000). Preschool children's exposure to violence: Relation of behavior problems to parent and child reports. *American Journal of Orthopsychiatry*, 70(1), 115-125.
- Sheldrick, R., Henson, B. S., Neger, E., Merchant, S., Murphy, M. J., & Perrin, E. C. (2013). The Baby Pediatric Symptom Checklist: Development and initial validation of a new social/emotional screening instrument for very young children. *Academic Pediatrics*, 13(1), 72-80.
- Sheldrick, R., Henson, B., Merchant, S., Neger, E., Murphy, J., & Perrin, E. C. (2014). The Preschool Pediatric Symptom Checklist (PPSC): Development and initial validation of a new social/emotional screening instrument. *Academic Pediatrics*, 12(5), 456-467.
- Sheras, P. L., Abidin, R. R., & Konold, T. R. (1998). *Stress Index for Parents of Adolescents: Professional manual*. Lutz, FL: Psychological Assessment Resources.
- Sherbourne, C., & Stewart, A. (1991). The MOS Social Support Survey. *Social Science and Medicine*, 32(6), 705-714.
- Sherin, K. M., Sinacore, J. M., Li, X., Zitter, R. E., & Shakil, A. (1998). HITS: A short domestic violence screening tool for use in a family practice setting. *Clinical Research and Methods*, 30(7), 508-512.

- Shields, A., & Cicchetti, D. (1997). Emotion regulation among school-age children: The development and validation of a new criterion Q-sort scale. *Developmental Psychology, 33*(6), 906-916.
- Shoemaker, O., Erickson, M., & Finch, A. (1986). Depression and anger in third- and fourth-grade boys: A multimethod assessment approach. *Journal of Clinical Child Psychology, 15*(4), 290-296.
- Shuler, C. (2004). *An analysis of the Emotional Quotient Inventory: Youth Version as a measure of emotional intelligence in children and adolescents*. Electronic Theses, Treatises and Dissertations.
- Singh, N., Curtis, J., Ellis, C., Nicholson, M., Villani, T., & Wechsler, H. (1995). Psychometric analysis of the Family Empowerment Scale. *Journal of Emotional and Behavioral Disorders, 3*(2), 85-91.
- Skinner, H. (1982). *Guidelines for using the Michigan Alcoholism Screening Test*. Toronto, Canada: Addiction Research Foundation.
- Snyder, C., Hoza, B., Pelham, W., Rapoff, M., Ware, L., Danovsky, M., . . . Stahl, K. (1997). The development and validation of the Children's Hope Scale. *Journal of Pediatric Psychology, 22*(3), 399-421.
- Sparrow, S., Ciccettim, D. V., & Balla, D. A. (2006). *Vineland Adaptive Behavior Scales—Second edition (Vineland-II)*. Bloomington, MN: Pearson Assessments.
- Spence, S., Donovan, C., & Breechman-Toussaint, M. (2000). The treatment of childhood social phobia: The effectiveness of a social skills training-based, cognitive-behavioural intervention, with and without parental involvement. *Journal of Child Psychology and Psychiatry, and Allied Disciplines, 41*(6), 713-726.
- Spilsbury, J., Drotar, D., Burant, C., Flannery, D., Creeden, R., & Friedman, S. (2005). Psychometric properties of the Pediatric Emotional Distress Scale in a diverse sample of children exposed to interpersonal violence. *Journal of Clinical Child and Adolescent Psychology, 34*(4), 758-764.
- Spitzer, R., Kroenke, K., & Williams, J. (1999). Validation and utility of a self-report version of PRIME-MD: The PHQ primary care study. *Journal of the American Medical Association, 282*(18), 1737-1744.
- Squires, J., Bricker, D., & Twombly, E. (2004). Parent-completed screening for social emotional problems in young children: Effects of risk/disability status and gender on performance. *Infant Mental Health, 25*(1), 62-73.
- Squires, J., Bricker, D., Heo, K., & Twombly, E. (2001). Identification of social-emotional problems in young children using a parent-completed screening measure. *Early Childhood Research Quarterly, 16*(4), 405-419.
- Steinberg, A., & Brymer, M. (2008). The UCLA Reaction Index. In G. Reyes, J. Elhai, & J. Ford (Eds.), *Encyclopedia of Psychological Trauma* (pp. 673-674). Hoboken, NJ: John Wiley & Sons.
- Steinberg, A., M., Brymer, M. J., Decker, K. B., & Pynoos, R. S. (2004). The University of California at Los Angeles Post-Traumatic Stress Disorder Reaction Index. *Current Psychiatry Reports, 6*(2), 96-100.
- Stewart, A., & Ware, J. (1992). *Measuring function and well-being: The medical outcomes study approach*. Durham, NC: Duke University Press.

- Stiffman, A. R., Orme, J., Evans, D. A., Feldman, R. A., & Keeney, P. A. (1984). A brief measure of children's behavior problems: The Behavior Rating Index for Children. *Measurement and Evaluation in Counseling and Development*, 16, 83-90.
- Strand, V., Sarmiento, T., & Pasquale, L. (2005). Assessment and screening tools for trauma in children and adolescents: A review. *Trauma, Violence, & Abuse*, 6(1), 55-78.
- Switzer, G., Scholle, S., Johnson, B., & Kelleher, K. (1998). The Client Cultural Competence Inventory: An instrument for assessing cultural competence in behavioral managed care organizations. *Journal of Child and Family Studies*, 7(4), 483-491.
- Teitelbaum, L., & Mullen, B. (2000). Validity of the MAST in psychiatric settings: A meta-analytic integration. *Journal of Studies on Alcohol*, 61(2), 254-261.
- Tisch, R., & Sibley, L. (2004). *Celebrating Families!*. Santa Maria, CA: Prevention Partnership International.
- Trocme, N. (1996). Development and preliminary evaluation of the Ontario Child Neglect Index. *Child Maltreatment*, 1(2), 145-155.
- Turchik, J. A., Karpenko, V., & Ogles, B. M. (2007). Further evidence of the utility and validity of a measure of outcome for children and adolescents. *Journal of Emotional and Behavioral Disorders*, 15(2), 119-128.
- University of Illinois at Chicago. (2006). *Primary care tool for assessment of depression during pregnancy and postpartum*.
- Vogel, C., Boller, K., Xue, Y., Blair, R., Aikens, N., Burwick, A., . . . Stein, J. (2011). *Learning as we go: A first snapshot of early head start programs, staff, families, and children*. Administration for Children and Families. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.
- Ward, J., & Dow, M. (1998). *Child Functional Assessment Rating Scale (CFARS)*. Tampa, FL: Department of Mental Health Law and Policy, Florida Mental Health Institute, University of South Florida.
- Ware, J. E., Kosinski, M., & Keller, S. (1994). *SF-36 Physical and Mental Health Summary Scales: A user's manual*. Boston, MA: The Health Institute.
- Ware, J. E., Kosinski, M., & Keller, S. (1995). *How to score the SF-12 Physical and Mental Health Summary Scales. Second edition*. Boston, MA: The Health Institute, New England Medical Center.
- Whetten, K., Reif, S., Swartz, M., Stevens, R., Ostermann, J., Hanisch, L., & Eron, J. (2005). A brief mental health and substance abuse screener for persons with HIV. *AIDS Patient Care & STDs*, 19(2), 89-99.
- Whitley, D., Kelley, S., & Campos, P. (2011). Perceptions of family empowerment in african american custodial grandmothers raising grandchildren: Thoughts for research and practice. *Families in Society: The Journal of Contemporary Social Services*, 92(4), 383-389.
- Wied, M., Maas, C., Goozen, S., Vermande, M., Engels, R., Meeus, W., . . . Goudena, P. (2007). Bryant's Empathy Index. *European Journal of Psychological Assessment*, 23(2), 99-104.

- Wilson, R., & Arvai, J. (2011). Structured decision making: Using decision research to improve stakeholder participation and results. From <http://seagrants.oregonstate.edu/files/sgpubs/onlinepubs/h11001.pdf>
- Wisner, K., Parry, B., & Piontek, C. (2002). Postpartum depression. *New England Journal of Medicine*, 347(3), 194-199.
- Wolraich, M., Feurer, I., Hannah, J., Baumgaertel, A., & Pinnock, T. (1998). Obtaining systematic teacher reports of disruptive behaviors utilizing DSM-IV. *Journal of Abnormal Child Psychology*, 26(2), 141-152.
- Wright, C., & Holm-Hansen, C. (2010). Mental health concerns in young children: Developing a comprehensive early identification and referral system. *Zero to Three*, 30(5), 48-53.
- Yatchmenoff, D., Koren, P., Friesen, B., Gordon, L., & Kinney, R. (1998). Enrichment and stress in families caring for a child with a serious emotional disorder. *Journal of Child and Family Studies*, 7(2), 129-145.
- Yohanna, D., Christopher, N., Lyons, J., Miller, S., Slomowitz, M., & Bultema, J. (1998). Characteristics of short-stay admissions to a psychiatric inpatient service. *Journal of Behavioral Health Services and Research*, 25(3), 337-345.