

# Manual Interview for Traumatic Events in Childhood (ITEC)

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## **Introduction**

### What is the ITEC?

The first step in therapy for dealing with childhood maltreatment is to map abusive experiences and assess their severity and impact. Since maltreatment is a sensitive topic that is not reported on easily, trauma interviews are promising assessment instruments. Compared to trauma questionnaires, trauma interviews can provide a richer and more detailed description of early traumatic experiences. Trauma interviews provide the opportunity to probe and clarify traumatic events. The interviewer can assess whether the experienced events can be labeled as abusive in light of an objective definition of trauma, reducing the variability caused by the interpretation of the interviewee. Interviews can include follow-up questions, for example, to fill in details about the identity of the perpetrator, age of onset and duration of the maltreatment, and specific characteristics of the abusive acts themselves. Thus, while interviews are more labor intensive than questionnaires, they provide some distinct advantages that questionnaires lack. The Interview for Traumatic Events in Childhood (ITEC) is such a trauma interview.

The ITEC is a retrospective trauma interview developed by our group that has already been used in several published studies examining the relationship between childhood trauma and psychopathology (Arntz, Dietzel, & Dreessen, 1999; Giesen-Bloo & Arntz, 2005; Kremers, Van Giezen, Van der Does, van Dyck, & Spinhoven, 2006; Lobbestael, Arntz, & Sieswerda, 2005). The ITEC is available in Dutch, English and German. On average, the administration time of the ITEC is about 30 minutes and it could take up to one hour in case of multiple abuses.

The ITEC has several advantages. First, the ITEC assesses 5 types of childhood traumatic events, including sexual abuse, physical abuse, emotional abuse, emotional neglect and physical neglect. Furthermore, the ITEC is designed in such a way that it is highly likely that it determines whether experienced events correspond to objective events; it does not label these events a priori as abusive (i.e., by using questions that include the term “abuse” or other similar terms). In this way, subjective appraisal of abuse is avoided, minimizing the chance of an interpretation bias by the respondent (Engelhard, van den Hout, & Schouten, 2009). A final innovation is that the ITEC utilizes an empirically based scoring system for determining the severity of traumatic events. Each subscale yields a composite score indicating the severity of maltreatment. Severity of trauma is based on ratings by a large group of therapists and by a sample from the open population, expecting to yield more objective estimates of severity than relying on a single rater or the interviewee’s judgment.

There is a computerized and a written form of the ITEC, the written form is preceded by an extra introduction.

### Comparison of the ITEC with other trauma interviews

Several retrospective interviews for childhood trauma have been reported in the literature (e.g., Bremner, Vermetten, & Mazure, 2000; Draijer, 1989; Gallagher, Flye, Hurt, Stone, & Hull, 1992), of which the Childhood Experience of Care and Abuse (CECA, Bifulco, Brown, & Harris, 1993) and the Childhood Trauma Interview (CTI, Fink, Bernstein, Handelsman, Foote, & Lovejoy, 1995) have received the most

empirical attention. Compared to many other trauma interviews, the CECA and the CTI assess a broader range of traumatic childhood events. The CECA has been extensively validated (Bifulco, Brown, & Harris, 1994; Bifulco, Brown, & Jarvis, 1997; Moran, Bifulco, Ball, Jacobs, & Benaim, 2002), while the validation of the CTI has been limited to a drug and alcohol dependent sample (Fink et al., 1995).

None withstanding the established psychometric properties of the CECA and CTI, their widespread use, and their comprehensive nature, the ITEC has several relative advantages compared to these interviews. First, the ITEC systematically gathers detailed information on each experienced maltreatment event based on a standard format which permits and facilitates objective scoring. Second, the ITEC inquires about witnessing maltreatment events and both the objective and subjective impact of the traumatic events on the respondent. Third, in administering the ITEC, the interviewers merely have to score detailed and objective parameters of the events (i.e., specifications of acts, perpetrators, age of onset, duration of maltreatment), while the raters of the CECA and the CTI have to decide whether respondents meet the criteria for neglect or abuse, and judge the severity of abuse, which requires extensive training of the raters, and increases the chance for subjective scoring. Fourth, all intra- and extra familiar maltreatment experiences are inquired for in the ITEC, while the CECA only does so for sexual abuse. Thus, the ITEC differs from other interviews by the addition of parameters of maltreatment it assesses, as well as the nature of the scoring system. Finally, at this moment, the ITEC is the only trauma assessment interview published and validated in Dutch.

### **Structure of the ITEC**

The ITEC starts with a short introduction that needs to be read aloud to the participant (see page 2). The items assessing sexual abuse are preceded by two screening questions "Were you ever sexually approached against your will?" and "Did you ever have a sexual relationship with someone who was at least 5 years older?". The other categories are not introduced by screening questions. The items use neutral, non-pejorative language to inquire about childhood maltreatment, to avoid biasing respondents' responses. For each category to which the interviewees responded positively, follow-up questions are used to gather detailed information about perpetrators (e.g., mother, uncle, teacher); age of onset (0-6 years, 6-12 years or 12 to 18 years) frequency (once or more often), and duration of trauma (less than 1 year, 1-3 years, 4-6 years, 7-9 years, or 10 years or longer); and the impact on the victims in the past (not at all, a little, considerably, severely, or very severely) and in the present (less distressful now and more distressful now). The first 4 follow-up questions are *objective* severity indices, the last 2 are the *subjective* severity indices.

In addition to the victimization scales, parallel scales have been created for witnessing the various forms of abuse and neglect. The ITEC witnessing items have the same answer format as the victim items, with an additional item to determine the primary victim of the abusive act.

### **Scoring**

As part of the validation study of the ITEC (Lobbestael et al., 2009), we asked 60 independent raters to score the severity of the events and the perpetrators on a range between 0 and 1. Other severity indices were scores between 0 and 1 based on empirical findings from previous studies. Eventually, a composite score representing the severity score of all 5 types of maltreatment can be obtained. These severity

scores are processed in an SPSS syntax file, which can be obtained from Jill Lobbestael. For an overview of the severity scores, see also figure 1.

### **Psychometric properties**

Psychometric properties of a previous version of the ITEC containing only 2 items for physical neglect were assessed in a sample of N=217 adults, including 178 patients and 39 non-patients (Lobbestael, Arntz, Harkema-Schouten, & Bernstein, 2009). The five-factor structure of the ITEC proved to have an excellent fit (CFI=.91, NNFI=.90, SRMR=.09), better than other factor solutions. Further factor analyses revealed that summing objective aspects of the abusive events (i.e., severity of the abusive event, closeness of the perpetrator, age of onset and duration) is the best way to express the severity of maltreatment. All five subscales of the ITEC demonstrated moderate to excellent internal consistencies, with the exception of the neglect subscales. Inter-correlations between the five ITEC factors were moderate, which shows that although different types of abuse often co-occur, these scales do represent sufficiently distinct entities. Furthermore, the ITEC showed good to excellent inter-rater reliabilities of the different subscales. Additionally, high correlations with the corresponding subscales of CTQ (Bernstein et al. 1997; Bernstein & Fink, 1998; Bernstein et al., 2003) were obtained, indicating good convergent validity. Finally, criterion validity was assessed by comparing the presence of maltreatment as mapped by the ITEC with patient file information. Data indicated that the ITEC's sensitivity was excellent, and sexual and physical abuse and neglect were uniquely predicted by their scores on their parallel ITEC subscales. This was not the case for emotional abuse.

Furthermore, the study of Lobbestael, Arntz, and Bernstein (2010) validated the ITEC against personality disorders. Good test-retest reliability of the ITEC has been demonstrated by Kremers et al. (2006) in patients with Borderline Personality Disorder who were assessed before and after treatment. Overall, these findings provide initial support for the reliability and validity of the ITEC.

In the current version of the ITEC, 13 new items were added to the physical neglect scale. We aim to evaluate the psychometric properties of this extended ITEC version in the near future.

Although the model fit of the subjective severity indices (past and present experienced impact of the trauma) were poorer than that of the objective indices, this does not diminish the value of these subjective indices for descriptive purposes. It can be informative to compare subjective with objective severity indices between pathological subgroups. For example, it could be possible that in patient groups high in denial (e.g., forensic patients) correspondence between objective and subjective severity parameters are low. Therefore, we suggest object severity scores should be interpreted separately from subjective scores, because summing objective and subjective severity indices increases the chance on tautological conclusions due to differences in appraisal between groups.

## FAQ

### *How to score the interview in general?*

This interview consists of four parts: 1) *sexual abuse*, 2) *physical abuse*, 3) *emotional abuse*, and 4) *neglect*. In each part a number of actions are described, which the participant might have been confronted with. The last question of every part is concerned with whether the participant witnessed one of the listed actions.

If the participant was directly involved in an action, all non-shaded fields must be filled out using the code indicated on page 3. If the participant witnessed one of the listed action, the complete row must be filled out. The items marked with an asterisk (\*) describe actions which the participant could have witnessed.

### **Example:**

Event 13	Action (1-12)	By whom? (coded)	To whom? if 13 = yes (coded)	How old were you? (starting age, coded)	Once or more often?	If more often, for how long? (total period, coded)	Degree of distress at that time? (0-4)	Has the negative impact changed later? (0-2)
	2	6	-	1	1	2	2	0
X	2	6	4	2	0	-	3	2
X	3	6	4	3	0	-	3	2

### **Explanation of example:**

1. Action 2 was committed by the *step- / foster father*. The participant was between 0 and 6 years old when it began. It happened *more than once* for a period of 1 to 3 years. The degree of distress at that time was *considerable* and *has not changed* later on.
2. The participant *witnessed* the second action, committed by the *step- / foster father to the sister*. At that time the participant was between 6 and 12 years old, and it happened *once*. The degree of distress was *severe* and has later changed to “*more distressful*”.
3. See 2., except for this time, the participant witnessed – and *was not the victim* of – a different action (*action 3*).

For the specific code list, see figure 1.

### *What to do when a perpetrator is not in de code list?*

In case a person is mentioned which is not included in the code list, the relationship the participant had with this person must be assessed. For instance, a classmate who maintains a good relationship with the participant will be classified as a friend, whereas a classmate who the participant does not have a good relationship with is coded as an acquaintance.

### *What if the act has happened more than once?*

If one act happened multiple times to a person, then you have to combine these multiple occasions and select those severity specifications that reflects the worse of both instances (check figure 1 for the highest severity codes). If needed, note down all instances separately on the scoring sheet while doing the interview (because it is easier to combine it afterwards). Eg, if a person was hit at age 5 during 1 year, and

then at age 12 during 3 years, select the specification of onset age 5 because this is the most severe. For the duration, add the total number of years, so 4 years in this case.

*What to do when there is more than one perpetrator?*

Check figure 1. In case there are several perpetrators, and all perpetrators belong to the scores 7 to 24 (exempt 9 and 10), than the option `25 –different persons` should be chosen (this has a severity score of .67). In case one or more of the multiple perpetrators belong to category 1 to 6, or 9 and 10, choose the option with the most severe score. For example, if an act is done by both father and brother, score father since he has the highest severity score. If an act is done by more than one strangers, choose option 25.

*How to enter the scores in SPSS?*

See the instructions for entering data and calculating composite scores, version 1.5

*If an interviewee had a sexual relationship with someone at least 5 years older, should all sexual acts of this relationship be scored in the ITEC?*

No, only if these sexual acts happened without consent of the interviewee.

*How deal with interviewees not wanting to give you certain information?*

Ask in an empathic way why (s)he doesn't want to give you that information. Stress that the goal of the interview is not for the interviewee to have to give you very elaborate information about things that happened to them in the past, but that it is important for the study that you collect certain basic information about the events. Ask the interviewee whether (s)he could agree for you to ask the questions and for him/her just to answer yes or no, or merely provide you with basic information. If the interviewee still doesn't want to give you the information, tell him/her that you find that a shame, since it is very important for the study. If the interviewee stays unwilling, tell him/her that you respect his/her choice not to tell you, and code this information as missing on the scoring sheet. If the interviewee continuous to refuse to give other parts of information, tell him/her that it would be better to stop the interview, since it would become unreliable.

*How deal with interviewees telling you more than necessary for the interview?*

Some interviewees are very relieved that they get the opportunity to tell about the horrible things that happened to them in their past, and tend to give you much more information than you actually need. This holds the danger that you will not get the interview done within the foreseen time, or that it would become too burdening for the interviewee (and for yourself) in the end. As the interviewer, you need to protect the interviewee against this, and if much more information is given, you should point out to the interviewee that you appreciate his/her openness, but that you would not want to keep more than necessary time for him/her, and you do not want it to become too burdening, at that therefore you suggest him/her keeping the answer a bit shorter.

*What to do when interviewees appear to tell you for the first time about severe abuse they experienced?*

It happens that it becomes clear that you are the first one that the interviewee tells about severe abusive acts (s)he experienced (e.g. because nobody ever asked the participant directly before, or the participant has not been in health care for long). Ask if the interviewee feels the need to discuss this more elaborate with his/her therapist,

and if so, stimulate the interviewee to bring this up in a next session with the therapist. Alternatively, refer the interviewee to specialized care for traumatic experiences.

*How should my interview attitude be like?*

Because of the emotive theme (i.e. traumatic events) of the ITEC, a correct interview attitude is probably the most important ingredient for you to succeed in getting the information necessary for the ITEC. Essential is a good balance between empathy and professionalism. Don't forget that you administer the ITEC in a role as a *researcher/diagnostician*, whose primary goal is to collect data, not as a therapist. At the same time, if you are too business-like, it is unlikely that interviewees will confide in you telling this sensitive information. Try to avoid saying that you feel sorry or that you emphasize with the interviewee. Instead, express your empathy more in a non-verbal way.

A good attitude is to present the interview as a common quest for information, and stress that you are in this together and that it is in your both interest to get is as correct as possible. To achieve this, it might be useful to use expressions such as `If *we* would have to pick a degree of distress, what would you choose?`. Involve the interviewee in scorings that you have to make, e.g. `Since we have to pick one of the answer options, which one do you think would describe this the best?`.

*What to do when interviewees claim to have forgotten certain information?*

Try to differentiate whether the interviewee really has forgotten it, or whether (s)he doesn't want to tell you. If really forgotten, for example age of the event, say: `Okay, so you don't remember the exact age, but was it more when you were very little, before age 6, before primary school, or was it between 6 and 12 say at primary school, or was in after 12 when you were already in high school?`.

*How to determine when an abusive acts has to be scored as present?*

This can be difficult for two reasons; if the interviewee tends to *exaggerate* or *minimize* the negative events (s)he experienced. The difficulty might be that you are not sure whether to code an event or not. In case of exaggeration, the interviewee might say (s)he was hit, when in fact it might not have concerned intended hitting. In case of minimization, the interviewee might say that the abuse doesn't have to be mentioned- keep in mind that this might have to do with the interviewee gotten so used to the abuse that (s)he considers it to be normal and therefore not worth mentioning. In other cases, minimizing might have to do with loyalty to e.g. parents. When scoring an event or not, it is essential that you, as an interviewer, represent the general social norms of what is acceptable and what is not. In light of this, also be aware of your own possible biases- e.g. you might be extremely `soft` or though. Despite, it stays very difficult to filter out these response biases, and you will probably not succeed in it a 100%. In part, these biases are filtered out by the severity indicators, e.g. if it was only a very small slap (in case of exaggeration) or the abuse did last for a long time (in case of minimization) the factual frequency questions will give less or more weight to this abusive act in the final composite severity score.

*Should I score an abusive act as present when the interviewee indicates that the act that was done to him/her were not severe?*

If it appears that the abusive act actually happened to the interviewee, than it should be scored. Also see the answer to question above.

*What if the interviewee starts to tell you about all of sexual activities he/she has experienced?*

Sometimes, interviewees did not understand that the section on sexual abuse only concerns sexual events that they experienced *against* their wishes- if necessary repeat this.

*When an interviewee has experienced many abusive acts within a certain category that appear to have mostly the same severity indicators (i.e. perpetrator, age, etc), should I continue to inquire for each of the severity indicators?*

It would be a bit too rigid to ask the same questions again and again if you already know the answer. On the other hand, it would be premature to assume that all events would have the same severity indicator scores. A solution can be to shorten your severity indicator questions: `Was this event also done by you by (your father) when you were (8 years) and for a period of (3 years) just as the previous event?`.

*What if the interviewee was exactly 6 years when the abusive acts occurred?*

Category 1 (0-6 years) refers to the period *before* age 6, category 2 (6-12 years) refers to the age *starting from* age 6.

*What if there were many different perpetrators of a certain act?*

Then the perpetrator category 25 (`several persons`) should be picked, and other severity indicators should be scored as if it concerned all of these perpetrators together—e.g. if mother hit the interviewee for 2 years, and father for the 3 following years, then the duration should be added, thus 5. Degree of distress now and later should be averaged (if not the same for all perpetrators).

#### **Other suggestions:**

- Try to do this interview as late as possible in the meetings you have with the interviewee. It is best that you already have established some kind of bond with the interviewee that makes it easier for the interviewee to confide in you and increases the chance of them answering truthfully.
- Although you might not have much time, it is essential that you try to form a good bond with the interviewee- definitely worth to invest in!
- Keep up the tempo: because it concerns a sensitive topic, and interviewees sometimes have experienced terrible abusive events, it might be tempting to lower your tempo, however, this takes all the energy away from the interview, so try to keep the tempo steady throughout the interview administration.
- Do not make it more difficult than it has to be!
- When asking the interviewee about the degree of distress, immediately offer the answer categories (e.g., not at all, a little, etc) so the interviewee can make a choice between these. We noticed that interviewees don't know well how to answer this question without directly have given answer options.

Perpetrator		
Score	Description	Severity score
1	Mother	0.97
2	Father	0.97
3	Brother(s)	0.75
4	Sister(s)	0.74
5	Step-/ foster mother	0.76
6	Step-/ foster father	0.77
7	Aunt	0.50
8	Uncle	0.51
9	Grand-mother	0.73
10	Grandfather	0.73
11	Cousin (female)	0.35
12	Cousin (male)	0.37
13	Neighbour (male)	0.27
14	Neighbour (female)	0.27
15	Brother-in-law	0.37
16	Sister-in-law	0.37
17	Acquaintance of parents	0.20
18	Social worker	0.47
19	Teacher	0.44
20	Confidant (e.g. babysitter, priest, pastor)	0.54
21	Partner	0.63
22	Friend	0.37
23	Acquaintance	0.16
24	Stranger	0.08
25	Several persons	0.67
Age		
1	10-6 years	1
2	6-12 years	0.66
3.	12-18 years	0.33
Frequency		
0	Once	.5
1	More often	1
Duration		
1.	less than 1 year	.2
2.	1-3 years	.4
3.	4-6 years	.6
4.	7-9 years	.8
5.	10 years or longer	1
Distress time		
0.	Not at all	0
1	A little	.25
2	Considerably	.5
3	Severely	.75
4	Very severely	1
Distress changed		
0	No	.5
1	Yes, less distressful later on	0
2	Yes, more distressful later on	1
Object act 10		
0	Objects designed for insertion (e.g. a vibrator)	n.a.
1	Blunt objects, not designed for insertion	n.a.
2	Sharp object, not designed for insertion or another type of damaging object	n.a.

Figure 1, scoring and severity scores



**Contact**

For any remarks or questions you might have on the ITEC, please contact Jill Lobbestael, Clinical Psychological Science, Faculty of Psychology and Neuroscience, Maastricht University, the Netherlands.

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