

Acute Stress Questions for ECHO COVID-19 Survey: Background and scoring

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Background

The stress-related questions are based on the DSM5 criteria for Acute Stress Disorder.

The DSM is designed to elicit information about how many symptoms someone experiences across 5 *symptom categories*. To make a diagnosis a patient would need to have 9 symptoms out of 14 total from any of the 5 symptom categories that begin or worsen after the trauma. Given space limitations for the COVID-19 Survey, we query only 10 symptoms that query all 5 symptom categories. We also add one item assessing impairment.

For research purposes we think it will be useful to examine the total number of *endorsed symptoms* a person has, regardless of symptom area. It may also be useful to look at which symptom categories are endorsed (or the number of endorsed categories).

Similar to how ADHD symptom rating scales are coded and analyzed, the stress questions are designed to assess likelihood of meeting criteria for a diagnosis. A survey cannot ever replace an in-person interview and formal assessment by a trained clinician, but it can help generate important information about severity of response to the pandemic. We suggest the following scoring system:

Scores

Categorical score: (yes/no meets DSM5 threshold for Acute Stress).

- How many *symptoms* does a person endorse at a significant level? An endorsement of 3 (sometimes), 4 (often), or 5 (very often) is considered significant. If a person endorses 9 or more symptoms at a significant level, then this item is coded YES (range 0-10).

Dimensional scores: In this system, dimensional scores can be coded based on symptom counts (the number of symptoms endorsed as 3, 4 or 5 (regardless of symptom area), or summary scores (*sum of all points endorsed*, 0-5, regardless of severity level).

- **Total Symptoms**: how many symptoms endorsed at a significant level (endorse at level 3, 4, or 5; range 0-10).
- **Total Sum**: Sum of all points, regardless of area or level (range: 9-45)
- **Symptom Categories**: Number of symptom categories endorsed at a significant (3,4,5) level (range: 1 -5 symptom areas)

Interpreting scores

Categorical Score – likelihood of DSM diagnosis

Total Symptoms – dimensional measure of stress

Total Sum – general severity of effects of stress

Symptom Categories – extent of effects of stress

Notes

The 5 DSM symptom areas are:

1. Intrusion symptoms -

Had distressing dreams about (related to) COVID-19

Been distressed when I see something that reminds me of COVID-19

2. Negative mood-

Felt happy and satisfied with your life (requires reverse scoring)

3. Dissociative symptoms

Seemed to have a sense of time slowing down

Seemed spaced out or in a daze

4. Avoidance

Tried to avoid thoughts and feelings about COVID-19

Tried to avoid talking, reading, and/or watching information related to COVID-19

5. Arousal symptoms

Startled easily

Had angry outbursts

Had difficulty sleeping

Additional Item not to be included in scoring, but for investigation of impairment in functioning, as described within the section on “Development and Course” section of the DSM chapter:

Did things that he/she had outgrown or acted younger than current age (e.g., thumb sucking, bedwetting, requesting to sleep with parents)