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UNIVERSITY OF VIRGINIA  
INTERNATIONAL FAMILY MEDICINE CLINIC

## Emigration History and Symptom Survey

We would like to ask you questions about your past history and present symptoms. This information will be used to help us provide you with better medical care. The answers to the questions will be kept confidential

### Part I. HSCL-25

*Instructions:* Please read each symptom carefully and mark the *one* response that best describes how much each one has bothered you in the last 4 weeks.

*Example:*

Not at all (1)	A little (2)	Quite a bit (3)	Extremely (4)
	<b>X</b>		

Symptoms A		Not at all (1)	A little (2)	Quite a bit (3)	Extremely (4)
1	Suddenly scared for no reason				
2	Feeling fearful				
3	Faintness, dizziness or weakness				
4	Nervousness or shakiness inside				
5	Heart pounding or racing				
6	Trembling				
7	Feeling tense or keyed up				
8	Headaches				
9	Spells of terror or panic				
10	Feeling restless, can't sit still				
		<b>Sum of Item Scores:</b>			

<b>Symptoms D</b>		Not at all (1)	A little (2)	Quite a bit (3)	Extremely (4)
1	Feeling low in energy, slowed down				
2	Blaming yourself for things				
3	Crying easily				
4	Loss of sexual interest or pleasure				
5	Poor appetite				
6	Difficulty falling asleep, staying asleep				
7	Feeling hopeless about the future				
8	Feeling sad				
9	Feeling lonely				
10	Thoughts of ending your life				
11	Feeling of being trapped or caught				
12	Worrying too much about things				
13	Feeling no interest in things				
14	Feeling everything is an effort				
15	Feelings of worthlessness				
				<b>Sum of Item Scores:</b>	

## Part II. SCL-90

*Instructions:* Below is a list of problems and complaints that people sometimes have. Please read each one carefully and select *one* of the five choices that best describes how much that problem has bothered or distressed you during the past 4 weeks.

<b>Symptoms</b>		Not at all (0)	A little bit (1)	Moderately (2)	Quite a bit (3)	Extremely (4)
1	Soreness of your muscles					
2	Numbness or tingling in parts of your body					
3	Heavy feelings in your arms or legs					
4	Weakness in parts of your body					
5	Pains in heart or chest					
6	Hot or cold spells					
7	Pains in lower back					
8	Trouble getting your breath					
9	Faintness or dizziness					
10	A lump in your throat					
11	Headaches					
12	Nausea or upset stomach					
				<b>Sum of Item Scores:</b>		

### Part III. HTQ

*Instructions:* The following are symptoms that people have after experiencing hurtful or terrifying events in their lives. If you find a question upsetting, please feel free not to answer. Please read each one carefully and mark the *one* response that best describes how much the symptoms bothered you in the past 4 weeks.

Symptoms		Not at all (1)	A little (2)	Quite a bit (3)	Extremely (4)
1	Recurrent thoughts or memories of the most hurtful or terrifying events				
2	Feeling as though the hurtful or terrifying event is happening again				
3	Recurrent nightmares				
4	Feeling detached or withdrawn from people				
5	Unable to feel emotions				
6	Feeling jumpy, easily startled				
7	Difficulty concentrating				
8	Trouble sleeping				
9	Feeling on guard				
10	Feeling irritable or having outbursts of anger				
11	Avoiding activities that remind you of the traumatic or hurtful event				
12	Inability to remember parts of the most traumatic or hurtful events				
13	Less interest in daily activities				
14	Feeling as if you don't have a future				
15	Avoiding thoughts or feelings associated with the traumatic or hurtful events				
16	Sudden emotional or physical reaction when reminded of the most hurtful or traumatic events				
				<b>Sum of Item Scores:</b>	

## Part IV. Emigration History

*Instructions:* Below are some questions relating to your experiences prior to arriving in the U.S. Your responses will help your doctors to better understand you and to provide better care. Please mark *yes* or *no* in response to each question. If you find a question to be upsetting, feel free not to answer.

Questions		Yes	No
1.	A family member or close relative was left behind.		
2.	A family member or close relative died during relocation.		
3.	You felt that your life was threatened.		
4.	You felt that the life of a family member was threatened.		
5.	You saw others being hurt or killed.		
6.	You lost your home or property.		
7.	You stayed in a refugee camp before you came to the U.S.		
8.	You or your family were hungry much of the time.		
9.	You lost a lot of weight (more than 5 kilograms).		
10.	You felt as though other people governed or controlled most of your actions.		

## Part V. English Proficiency

*Instructions:* Please answer each question regarding your ability to communicate in English by marking either *Yes* or *No*.

IFMC Scale		Yes	No
1.	Are you able to understand a television news broadcast in English?		
2.	Are you able to have a conversation in English on the telephone?		
3.	Are you able to read a newspaper article in English?		
4.	Are you able to write a letter in English?		

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***\*For Physician Use Only\****

## Scoring

<b>Section</b>	<b>Total</b> (from shaded boxes above)	<b>Score</b> Total ÷ # of Questions answered	<b>Diagnostic score</b>
Part I-A. HSCL-25 Anxiety Subscale			<b>&gt;1.75</b>
Part I-D. HSCL-25 Depression Subscale			<b>&gt;1.75</b>
Part II. SCL-90 Somatization Subscale			<b>&gt;1.00</b>
Part III. HTQ PTSD Symptoms Subscale			<b>&gt;2.5</b>
Part IV. Emigration Stress		<b>N/A</b>	<b># Yes of 10</b>
Part V. English Proficiency		<b>N/A</b>	<b># No of 4</b>

# Scoring Instructions

## Part I. Hopkins Symptom Checklist-25

1. Assign the following numbers for each answered item:  
1 = *Not at all*  
2 = *A little*  
3 = *Quite a bit*  
4 = *Extremely*
2. Add up item scores and divide by the number of answered items for each subscale:

1. **Anxiety (Symptoms A)** =  $\frac{\text{Sum of Item Scores}}{10}$

2. **Depression (Symptoms D)** =  $\frac{\text{Sum of Item Scores}}{15}$

3. An average item score of **>1.75** on the depression subscale is indicative of major depression, while scores exceeding 1.75 on both subscales indicates clinically significant emotional distress.

\*Mollica et al., 1992, *The Harvard Trauma Questionnaire: validating a cross-cultural instrument for measuring torture, trauma and posttraumatic stress disorder in Indochinese refugees*. Journal of Nervous Mental Disease. 180:111-116.

## Part II. Symptoms Checklist-90 - Somatization Subscale

1. Assign the following numbers for each answered item:  
0 = *Not at all*  
1 = *A little bit*  
2 = *Moderately*  
3 = *Quite a bit*  
4 = *Extremely*
2. Add up item scores and divide by the number of answered items:

1. **Somatization** =  $\frac{\text{Sum of Item Scores}}{12}$

3. An average item score of **>1.00** indicates clinically significant somatization.

\*Derogatis, *Preliminary report of SCL-90*.

### Part III. Harvard Trauma Questionnaire - PTSD Subscale

1. Assign numbers 1-4 for items and calculate average item score as described for HSCL-25 above.

$$1. \text{ PTSD} = \frac{\text{Sum of Item Scores}}{16}$$

2. An average item score of **>2.5** is comparable to scores of patients clinically diagnosed with PTSD in psychiatric clinics.

\*Mollica et al., 1992, *The Harvard Trauma Questionnaire: validating a cross-cultural instrument for measuring torture, trauma and posttraumatic stress disorder in Indochinese refugees*. Journal of Nervous Mental Disease. **180**:111-116.

### Part IV. Emigration Stress

1. Sum Positive Responses:

### Part V. English Proficiency:

1. Sum Negative Responses: