

**THE CHILD AND ADOLESCENT  
PSYCHIATRIC ASSESSMENT  
(CAPA)**

**Parent Interview  
Short Version**

**ADRIAN ANGOLD, MRCPsych**

Developmental Epidemiology Program  
Department of Psychiatry and Behavioral Sciences, Duke University  
Durham, North Carolina 27710-3454

**ANTHONY COX, FRCPsych**  
**MICHAEL PRENDERGAST, MRCPsych**  
**MICHAEL RUTTER, MD, FRS**  
**EMILY SIMONOFF, MRCPsych**  
MRC Child Psychiatry Unit  
Institute of Psychiatry  
London SE5 8AF England

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A Angold, A Cox, M Prendergast, M Rutter, E Simonoff  
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Child and Adolescent Psychiatric Assessment

Definitions and questions

INTERVIEW #

INTERVIEWER

FIRST DAY OF PRIMARY PERIOD

TIME AT BEGINNING OF INTERVIEW

TIME AT END OF INTERVIEW

Codes

PAA3X01  
PVIEWER

PAP0X01  
PINTLOC

PAQ1D01

Definitions and questions

**QUALITY OF INTERVIEW**

Code your subjective impression as to the quality of the information collected during the interview. The subject may have refused to provide adequate descriptions of symptoms or been deliberately misleading on occasion.

0= Adequate

2= The interview is inadequate, in relation to the specified area, only in certain parts of the interview. Note the section where data is probably inadequate.

3= The whole interview is inadequate.

Quality of interview

Adequacy of Interview

Misleading Answers or Lies

Did Not Answer Many Questions Verbally

Guarded Informant

Refused to Continue

Impaired Consciousness

Intoxicated with Alcohol or Drugs

Unsuitable Interview Environment

Interviewer Comments

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Codes

PQA9X01

PQA9X02

PQA9X03

PQA9X04

PQA9X05

PQA9X06

PQA9X07

PQA9X08

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Definitions and questions

Coding rules

Codes

**SOMATIZATION**

**NOTE THAT THIS SECTION SERVES TO EXCLUDE BRIQUET'S SYNDROME, BUT THAT THE MOST COMMON CAUSE OF MULTIPLE PHYSICAL SYMPTOMS IS PHYSICAL ILLNESS.**

**SOMATIZATION**

*How has X felt physically over the last 3 months?*

*Has s/he had any illness?*

*How did the illness affect him/her?*

*Does s/he have anything else physically wrong with him/her?*



Definitions and questions

**HEADACHES**

*Does s/he get any headaches?*

*How long do the symptoms last?*

*How often over the last 3 months has s/he had a headache like that?*

*How ill has s/he been?*

*When did the "symptoms" start?*

*What have you done about them?*

*How much do they affect h's/her life?*

*Has s/he missed any school/work because of them?*

*Has s/he contacted the doctor?*

*What did the doctor say is wrong?*

*When was that?*

*What did "X" do about it?*

*What did you do?*

*Did s/he need any medication?*

*Do you think these "symptoms" are serious?*

*Do you sometimes think they're not real but imaginary?*

Coding rules

**HEADACHES**

0 = Absent

2 = Headaches lasting at least one hour at least once per week for each week of the primary period.

**HOURS : MINUTES**

**MISSED SCHOOL OR WORK**

0 = No school or work missed on account of symptom.

2 = At least 1 day of school or work missed.

**PHYSICIAN**

0 = No contact.

2 = Any medical contact related to symptoms.

**MEDICATION**

0 = No treatment.

2 = Any non-prescribed medical/surgical treatment related to symptoms.

3 = Any prescribed medical/surgical treatment related to symptoms.

**ALTERED LIFE PATTERN**

0 = No effect on functioning.

2 = Some reduction in functioning.

Codes

PEA0101  
Intensity

PEA0F01  
Frequency

PEA0D01  
Duration

PEA0102

PEA0103

PEA0104

PEA0105

PEA0001  
Onset

Definitions and questions

**ABDOMINAL PAINS**

Exclude menstrual cramps.

*Does s/he get any stomach aches?*

*How long do the symptoms last?*

*How often over the last 3 months has s/he had a stomach ache like that?*

*Has s/he missed any school/work because of these stomach aches?*

*Has s/he contacted the doctor?  
What did the doctor say is wrong?  
What did s/he do about it?  
What did you do?*

*Has s/he taken any medications for his/her stomach aches?*

*Do you think these symptoms are serious?  
Do you sometimes think they're not real but imaginary?*  
**INCLUDE HEADACHES AND STOMACH ACHES CODED UNDER PHYSICAL SYMPTOMS ON SEPARATION.**

*When did they start?*

Coding rules

**ABDOMINAL PAINS (AT LEAST 1 HOUR)**

0 = Absent

2 = Abdominal pains lasting at least one hour at least once per week for each week of the primary period.

**HOURS : MINUTES**

**MISSED SCHOOL OR WORK**

0 = No school or work missed on account of symptom.

2 = At least 1 day of school or work missed.

**PHYSICIAN**

0 = No contact.

2 = Any medical contact related to symptoms.

**MEDICATION**

0 = No treatment.

2 = Any non-prescribed medical/surgical treatment related to symptoms.

3 = Any prescribed medical/surgical treatment related to symptoms.

**ALTERED LIFE PATTERN**

0 = No effect on functioning.

2 = Some reduction in functioning.

Codes

PEA1101  
Intensity

PEA1F01  
Frequency

PEA1D01  
Duration

PEA1102

PEA1103

PEA1104

PEA1105

PEA1001  
Onset

Definitions and questions

**ACHES AND PAINS**

Aches and pains in muscles.

Do not include headaches or stomach aches, which are coded separately, or aches and pains resulting only from involvement in sports.

*Does s/he get a lot of aches and pains in his/her muscles or joints?*

*How often does this happen?*

*Has s/he given up any activities because of aches and pains?*

**FEELS UNWELL**

A generalized feeling of illness or unwellness.

*Has s/he felt physically unwell at all during the last 3 months?*

*Less well than usual?*

*How much of the time?*

Coding rules

**ACHES AND PAINS**

0 = Absent

2 = Describes aches and pains as occurring at least three times per week for each week of the primary period.

3 = Aches and pains almost constantly present.

**AVOIDANCE**

0 = Absent

2 = Subject has developed routines that allow him/her to adopt a relatively normal lifestyle while avoiding feared situation.

3 = Subject lives a highly restricted life because of feared situations.

**ACHES AND PAINS - AVOIDANCE ONSET**

**FEELS UNWELL**

0 = Absent

2 = Feeling physically less well than usual.

3 = Feels physically unwell almost all of the time.

Codes

PEE0101  
Intensity

PEE0001  
Onset

PEE1101

PEE1001

PEE2101  
Intensity

PEE2001  
Onset

Definitions and questions

**SICKLY**

The subject states that s/he has been sickly for a good part of their life, including the last 3 months.

*How would you describe his/her health in general?*

*Would you say s/he has been "ill" for most of his/her life? What does s/he think?*

*What has X's physical health been like in the last 3 months?*

*Has s/he had frequent health problems?*

*Is s/he a sickly child?*

**MENSTRUATION**

*If child is female, ask menstruation.*

*Has she ever had a period?*

*When was her first period?*

*Does she have regular periods every month?*

*Has she had at least three monthly periods in a row?*

**NEONATAL CARE UNIT**

*Was s/he in a neonatal intensive care unit (NICU)?*

*How many days was s/he in the NICU?*  
IF LESS THAN 24 HOURS CODE AS ONE DAY

Coding rules

**SICKLY**

0 = Absent

2 = Present

**SEX OF CHILD**

0 = Male

2 = Female

**MENSTRUATION**

0 = No

2 = Yes

**REGULAR ESTABLISHED CYCLE**

0 = No

2 = At least three months in a row.

**FIRST DAY OF LAST PERIOD**

**NEONATAL CARE UNIT**

0 = Absent

2 = Present

**DAYS**

Codes

PEA2101  
Intensity

PEE1203  
Intensity

Ever:PEE3E01  
Intensity

Ever:PEE3O01  
Onset

 //

Ever:PEE3E02

Ever:PEE3O02

 //

Ever:PEE5E01  
Intensity

Ever:PEE5D01  
Duration

Definitions and questions

Coding rules

Codes

**SCHOOL/WORK PERFORMANCE AND  
BEHAVIOR**  
**SCHOOL PERFORMANCE AND BEHAVIOR**



D24



Definitions and questions

**GENERAL SCHOOL INFORMATION**

**GET A GENERAL PICTURE OF THE CHILD'S LIFE IN THE SCHOOL.**

**TYPE OF SCHOOL**  
CHILD ATTENDS SCHOOL.

*Which school does X go to?*

*What grade is s/he in?*

*Has s/he ever repeated a grade?*

*Has s/he ever skipped a grade?*

*How many weeks was s/he in school in the last 3 months?*

*Did s/he attend each day?*

*Was s/he out for sickness?  
Vacation?  
Did s/he skip school?  
Or miss school because s/he was worried about going to school?*

*How does s/he like school?*

*How does s/he get along with the teachers?*

*Which teacher does s/he like best?  
Are there any teachers whom s/he really dislikes?  
How is s/he you getting along in school?  
What are his/her report cards like?*

*What sort of trouble does s/he get into at school?*

*Has s/he ever been sent home from school?  
Has s/he ever been expelled?  
Or suspended?  
Had in-school suspension?  
How does s/he get along with the kids at school?*

*How much does s/he get into fights?  
Are these friendly fights or real fights?*

**CURRENT GRADE OR GRADE LAST COMPLETED**

**EVER REPEATED GRADE.**

**EXCLUDE WEEKS OF VACATION OR EXTENDED ILLNESS. INCLUDE WEEKS WHEN ENROLLED BUT MISSED SCHOOL BECAUSE OF TRUANCY OR WORRY/ANXIETY.**

Coding rules

- TYPE OF SCHOOL**  
0 = Absent  
2 = Present
- TYPE OF SCHOOL**  
0 = Regular (non-treatment facility) school  
1 = Alternative school  
2 = Treatment facility school  
3 = More than 1 type of school  
4 = Home schooling
- EVER REPEATED GRADE**  
0 = No  
2 = Yes
- EVER SKIPPED A GRADE**  
0 = No  
2 = Yes
- WEEKS**
- PRIMARY PERIOD: NUMBER OF DAYS PRESENT**
- PRIMARY PERIOD: NUMBER OF WEEKS WHERE PRESENT AT LEAST 1 DAY PER WEEK**

Codes

PBA1XYZ 00  
Intensity

PBA0X01

PBA1X01  
Frequency

PBA2X01

PBA2X02


PBA3D01  
Duration

PBA4F01

PBA5F01

Definitions and questions

**IF CHILD IS STILL IN SCHOOL,  
COMPLETE. OTHERWISE , SKIP TO  
"SCHOOL INFORMATION FOR THOSE  
WHO HAVE LEFT SCHOOL", (PAGE 5).**



Coding rules

Codes



Definitions and questions

**SCHOOL INFORMATION FOR THOSE WHO HAVE LEFT SCHOOL**

Information about the school history of students who left school before the 3 month period. Do not include students who are on summer break.

*When did s/he leave school?*

*What was the last grade s/he completed?*

*Had s/he ever repeated a grade?*

*Did s/he graduate before leaving?*

IF NOT GRADUATE, ASK

*Has s/he gotten his/her GED?*

*Or attended night school?  
Or another alternative school?*

IF CHILD NOT PRESENT IN SCHOOL 1 DAY A WEEK FOR 4 WEEKS IN SECONDARY PERIOD, CODE BEGINNING DATE OF 4 WEEK PERIOD WHEN WAS IN SCHOOL 1 DAY PER WEEK.

Coding rules

**LEFT SCHOOL OFFICIALLY**

- 0 = No
- 2 = Yes

**PBB0001**

**SECONDARY PERIOD: NUMBER OF DAYS PRESENT**

**SECONDARY PERIOD: NUMBER OF WEEKS WHERE PRESENT AT LEAST 1 DAY PER WEEK**

**TERTIARY PERIOD: BEGINNING DATE OF LAST 4 WEEK PERIOD WHEN CHILD PRESENT IN SCHOOL 1 DAY PER WEEK**

**TERTIARY PERIOD: NUMBER OF DAYS PRESENT**

**LAST GRADE COMPLETED**

**EVER REPEATED GRADE**

- 0 = No
- 2 = Yes

**GRADUATED**

- 0 = Yes
- 2 = No

**EARNED GED**

- 0 = Yes
- 2 = No

**COMPLETE ALTERNATIVE SCHOOL PROGRAM**

- 0 = Yes
- 2 = No

Codes

PBA9I01  
Intensity

PBA9O01  
Onset

PBB0O01

PBB0F01

PBB0F02

PBB1O01

PBB1F01

PBB2X01

Ever:PBB3I01  
Intensity

PBB4I01

PBB5I01

PBB6I01

Definitions and questions

**NUMBER OF WEEKS ENROLLED IN SCHOOL - SECONDARY PERIOD**

Beginning date of last month period when enrolled in school.

ENROLLED DURING A SECONDARY PERIOD.

IF CHILD NOT ENROLLED IN SCHOOL 4 WEEKS IN LAST 3 MONTHS, CODE BEGINNING DATE OF LAST 4 WEEKS WHEN WAS IN SCHOOL

**NUMBER OF WEEKS ENROLLED IN SCHOOL - TERTIARY PERIOD**

Beginning date of last 4 week period when child present in school 1 day per week.

ENROLLED IN TERTIARY PERIOD.

IF CHILD NOT ENROLLED IN SCHOOL 4 WEEKS IN LAST 3 MONTHS, CODE BEGINNING DATE OF LAST 4 WEEKS WHEN WAS IN SCHOOL 1 DAY PER WEEK

Coding rules

**SECONDARY PERIOD**

- 0 = No
- 2 = Yes

**SECONDARY PERIOD: NUMBER OF DAYS PRESENT**

**SECONDARY PERIOD: NUMBER OF WEEKS WHERE PRESENT AT LEAST 1 DAY PER WEEK**

**ENROLLED IN TERTIARY PERIOD**

- 0 = No
- 2 = Yes

**TERTIARY PERIOD: NUMBER OF DAYS PRESENT**

Codes

abc0001  
Intensity

PBA6O01  
Onset

PBA6F01

PBA6F02

abc0002  
Intensity

PBA7O01  
Onset

PBA7F01

Vertical column of code boxes with some containing slashes (//) and others empty.

Definitions and questions

**FREE OR REDUCED PRICE MEAL PROGRAM**

Qualifies for participation in a federal or other program which offers meals free or at a reduced price to children whose family income does not meet a certain level. If qualifies, but does not utilize, code 2.

*Does s/he receive free or reduced price meals in school?*

*Did you fill in a form about your income?*

**NUMBER OF ARGUMENTS WITH TEACHERS**

An argument is defined as a disagreement, lasting at least 5 minutes, that results in a dispute involving raised voices, shouting, verbal abuse, or physical aggression or fights.

*Does s/he have arguments with teachers?*

*Who does s/he argue with?*

*Tell me about the last time.*

*How long do these arguments last?*

*Did the arguments ever get physical?*

*What happened?*

*Has s/he "hit" a teacher over the last three months?*

Coding rules

**FREE OR REDUCES PRICE MEAL PROGRAM**

0 = No

2 = Yes

**NUMBER OF ARGUMENTS WITH TEACHERS**

0 = Absent

2 = Present

**ARGUMENTS WITH PHYSICAL VIOLENCE BY CHILD**

0 = Absent

2 = Present

**ARGUMENTS WITH PHYSICAL VIOLENCE BY CHILD (FREQUENCY)**

**NUMBER OF ARGUMENTS WITH TEACHERS (WITH PHYSICAL VIOLENCE)**

**OTHER PHYSICAL VIOLENCE BY CHILD**

0 = No

2 = Yes

**OTHER PHYSICAL VIOLENCE BY CHILD -FREQUENCY**

**OTHER PHYSICAL VIOLENCE BY CHILD- ONSET**

Codes

PBG0101  
Intensity

BCAYXZ5 00  
Intensity

PBB7F01  
Frequency

PBB7O01  
Onset

PBB8101

PBB8F01

PBB8O01

PBB9101

PBB9F01

PBB9O01

Definitions and questions

Coding rules

Codes

**WORK PERFORMANCE AND BEHAVIOR**

**IF SUBJECT STILL IN SCHOOL,  
COMPLETE. OTHERWISE, SKIP TO  
"REGULAR EMPLOYMENT", (PAGE 8).**

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Definitions and questions

**AFTER SCHOOL WORK**  
 Include any paid employment, including weekend and vacation jobs, (apart from work required in order to qualify for an allowance from parents) in the past 3 months.

*Has s/he had a job in the last 3 months?*

*What does s/he do?*

*How many hours a week does s/he work?*  
*How long has s/he been working?*  
*Has s/he ever been dismissed from a job?*

*Why was that?*

**REGULAR EMPLOYMENT**  
 Paid employment for those who have left school officially.

*Has s/he ever had a job?*

*Has s/he had a job in the last 3 months?*

*What does s/he do?*

*How many hours a week does s/he work?*  
*Has s/he ever worked 20 or more hours a week?*  
*How many weeks has s/he worked in the last 3 months?*  
*When did s/he get his/her first job?*  
*How many jobs has s/he has in his/her life?*  
*Has s/he ever been dismissed from a job?*

*What is the longest s/he has been without a job?*

**CURRENTLY EMPLOYED**

Coding rules

**CURRENTLY WORK AFTER SCHOOL**

0 = Absent  
 2 = Present

**EVER DISMISSED FROM JOB**

0 = Absent  
 2 = Present

**REGULAR EMPLOYMENT**

0 = Absent  
 2 = Present

**CURRENTLY EMPLOYED**

0 = Absent  
 2 = Present

**CURRENTLY EMPLOYED >20 HR/WEEK**

0 = Absent  
 2 = Present

**NUMBER OF WEEKS WORKED IN PAST 3 MONTHS**

**DATE FIRST JOB BEGAN SINCE LEAVING SCHOOL**

**EVER: NUMBER OF JOBS HELD**

Codes

PBC1101  
 Intensity

PBC1F01  
 Frequency

PBC1O01  
 Onset

PBC2I01

Ever:PCB30XX  
 00  
 Intensity

PBC3I01  
 Intensity

PBC3I02

PBC3F01

PBC3O01

Ever:PBC3V01

[Empty boxes for coding values, including slashes for onset and date fields]

Definitions and questions

CODE ONLY IF OFFICIALLY LEFT SCHOOL  
CODE NUMBER OF WEEKS UNEMPLOYED

Coding rules

EVER: DISMISSED FROM JOB

0 = Absent

2 = Present

EVER: LONGEST PERIOD OF  
UNEMPLOYMENT

Codes

Ever:PBC4E01

Ever:PBC5V01



Definitions and questions

**PATTERN OF NON-ATTENDANCE (TRUANCY)**

**MISSING TIME AT SCHOOL (TRUANCY)**

The child fails to reach, or leaves school, without permission of school authorities, and without a normally acceptable excuse (such as illness), for reasons not associated with either separation anxiety or fear of school. The reason may be dislike of school or a wish to take part in other activities, with or without friends.

Non-attendance because of worry or anxiety may also occur, in which case both are rated as being present.

*Has X ever skipped school?*

*Has s/he ever skipped any classes while in school?*

*How often?*

*What about during the last 3 months?*

*Why was that?*

*Tell me about the last time.*

*What did s/he do?*

*What was s/he up to?*

*Was s/he on his/her own or with other children/people?*

*Has s/he ever skipped out of school during the day?*

*How often?*

*Why was that?*

*Has s/he ever pretended to be sick so that s/he will not have to go to school?*

**NUMBER OF 1/2 DAYS IN SCHOOL PERIOD WHEN ENROLLED IN SCHOOL**

**IF MISSED AT LEAST 1 HALF DAY, NO ACCEPTABLE REASON FOR SCHOOL ABSENCE, AND ABSENCE NOT DUE TO WORRY/ANXIETY, COMPLETE. OTHERWISE, SKIP TO "WORRY/ANXIETY OVER SCHOOL ATTENDANCE", (PAGE 14).**

Coding rules

**EVER: SKIPPED SCHOOL (TRUANCY)**

0 = Absent

2 = Present

**SKIPPED SCHOOL**

0 = Absent

2 = Present

**MISSING TIME AT SCHOOL**

Codes

Ever:PBC6E01  
Intensity

Ever:PBC6O01  
Onset

PBC6I01  
Intensity

PBC6F01

Definitions and questions

**STAYS AT HOME SOME MORNINGS (TRUANCY)**

*Does X ever stay at home sometimes when s/he should be at school?*

*How often?*  
*What do you do when s/he doesn't want to go to school?*  
*Do you try to make him/her go?*  
*What about your "partner"?*  
*What happens then?*  
*Tell me about the last time it happened.*  
*Is it like that every morning?*

**HAS TO BE TAKEN TO SCHOOL (TRUANCY)**

Parent or someone else has to take child to school to ensure arrival, for reason other than the child's anxiety or emotional disturbance.

*Do you have to take X to school sometimes to make sure that s/he will go?*

*How often?*  
*What happens?*

**PARENTAL COLLUSION (TRUANCY)**

The child is out of school, meeting criteria for truancy (above). The parents know the child is not attending school, and do not take measures to get the child to school.

*What do you do when X doesn't want to go to school?*

*Do you think s/he should be going to that school?*  
*Does X's not going to school bother you?*  
*What about your "partner"?*

Coding rules

**STAYS AT HOME SOME MORNINGS**

0 = Does not stay at home

2 = Stays at home at least one occasion in 3 months.

**HAS TO BE TAKEN TO SCHOOL**

0 = No

2 = Yes, on at least one occasion in last 3 months.

**PARENTAL COLLUSION**

0 = Child truant in last three months and parents have made repeated, consistent attempts to get child to attend school (irrespective of whether successful)

1 = Sporadic and inconsistent parental attempts

2 = Child truant in last 3 months, without parental attempts to enforce school attendance

3 = Child taken out of school by parents

Codes

PCBC7I0100  
Intensity

PCBC7F0100  
Frequency

PBC8I01  
Intensity

PBC8F01  
Frequency

PBC9I01  
Intensity

Definitions and questions

**RUNS OUT OF SCHOOL (TRUANCY)**

Child either fails to reach school, or leaves school before end of school day, without permission.

Do not code here if absence is due to anxiety related to going to school.

*What happens when s/he leaves school?*

*Where does s/he go?*

*What does s/he do?*

*Is that on his/her own or with someone else?*

*Who?*

Coding rules

**PRESENT 2**

0 = Absent

2 = Present

**CHILD FAILS TO REACH, OR LEAVES, SCHOOL AND RETURNS HOME (TRUANCY)**

0 = No

2 = Yes

**CHILD FAILS TO REACH, OR LEAVES, SCHOOL AND GOES OFF ALONE (TRUANCY)**

0 = No

2 = Yes

**CHILD FAILS TO REACH, OR LEAVES, SCHOOL AND GOES OFF ALONE (TRUANCY) - FREQUENCY**

**CHILD FAILS TO REACH, OR LEAVES, SCHOOL AND GOES OFF WITH PEERS (TRUANCY)**

0 = No

2 = Yes

**CHILD FAILS TO REACH, OR LEAVES, SCHOOL AND GOES OFF WITH PEERS (TRUANCY)-FREQUENCY**

Codes

zyxabc9 00  
Intensity

PBD0101

PBD0F01  
Frequency

PBD1101

PBD1F01

PBD2101

PBD2F01

Definitions and questions

**LEGAL ACTION OR TREATMENT FOR SCHOOL NON-ATTENDANCE**

*Has anybody else done anything about X's missing school?*

*Like a school counselor?*  
*Who?*

*What have they done?*

*Has anyone else tried to help you get X back to school?*

*What have they done?*

*Have they taken any legal action?*

Coding rules

**LEGAL ACTION OR TREATMENT FOR SCHOOL NON-ATTENDANCE**

0 = Absent

2 = Present

**SCHOOL-BASED RESPONSE TO NON-ATTENDANCE**

0 = None

2 = Any school-based disciplinary action

3 = Counselling or other therapeutic response

**PROFESSIONAL INVOLVEMENT FOR SCHOOL NON-ATTENDANCE**

0 = No

2 = Involvement of any professional from mental health services who would not normally be involved with child. Include psychologists, doctors, etc.

**LEGAL ACTION FOR SCHOOL NON-ATTENDANCE**

0 = No

2 = Code here only when legal action actually under way. Do not code threats of legal action.

Codes

xbayzc4200  
Intensity

PBD3101

PBD4101

PBD5101



Definitions and questions

**WORRY/ANXIETY OVER SCHOOL ATTENDANCE AND SEPARATION**

**WORRY/ANXIETY OVER SCHOOL ATTENDANCE**

*Has s/he been worried at all about going to school?*

*What happens when s/he's worried about school?  
Does s/he get anxious or upset on school morning?*

*Has s/he ever been unable to go to school because s/he was worried or upset?*

*What happened?  
Has s/he ever pretended to be sick so s/he won't have to go to school?*

**WORRY/ANXIETY OVER SEPARATION**

*Does s/he ever worry or get upset about being away from you?*

*Does s/he worry when you go out without him/her?*

*Or when s/he's at school?*

*What about if you go away without him/her?  
Such as because of work or on vacation?  
Would s/he worry about that?*

*How about in the last three months?*

**MISSING TIME AT SCHOOL (WORRY/ANXIETY)**

Time missed because of worry/anxiety related to school attendance. Do not include time missed for usually acceptable reasons, such as sickness.

IF THIS ITEM IS POSITIVE, REMEMBER TO CONSIDER EXCESSIVE NEED FOR REASSURANCE.

NUMBER OF 1/2 DAYS IN SCHOOL PERIOD WHEN ENROLLED IN SCHOOL

**IF MISSED TIME AT SCHOOL DUE TO WORRY/ANXIETY, CONTINUE. OTHERWISE, SKIP TO "EXCESSIVE NEED FOR REASSURANCE", (PAGE 3).**

Coding rules

**EVER: SCHOOL NON-ATTENDANCE (WORRYING/ANXIETY)**

0 = Absent  
2 = Present

**SCHOOL ATTENDANCE / SEPERATION SCREEN POSITIVE**

0 = Absent  
2 = Present

**SCHOOL NON-ATTENDANCE (WORRYING/ANXIETY)**

0 = No  
2 = Yes

**SCHOOL NON-ATTENDANCE (WORRYING/ANXIETY)**

0 = Absent  
2 = Present

**MISSING TIME AT SCHOOL**

Codes

Ever:PBD6I01  
Intensity

Ever:PBD7E01  
Intensity

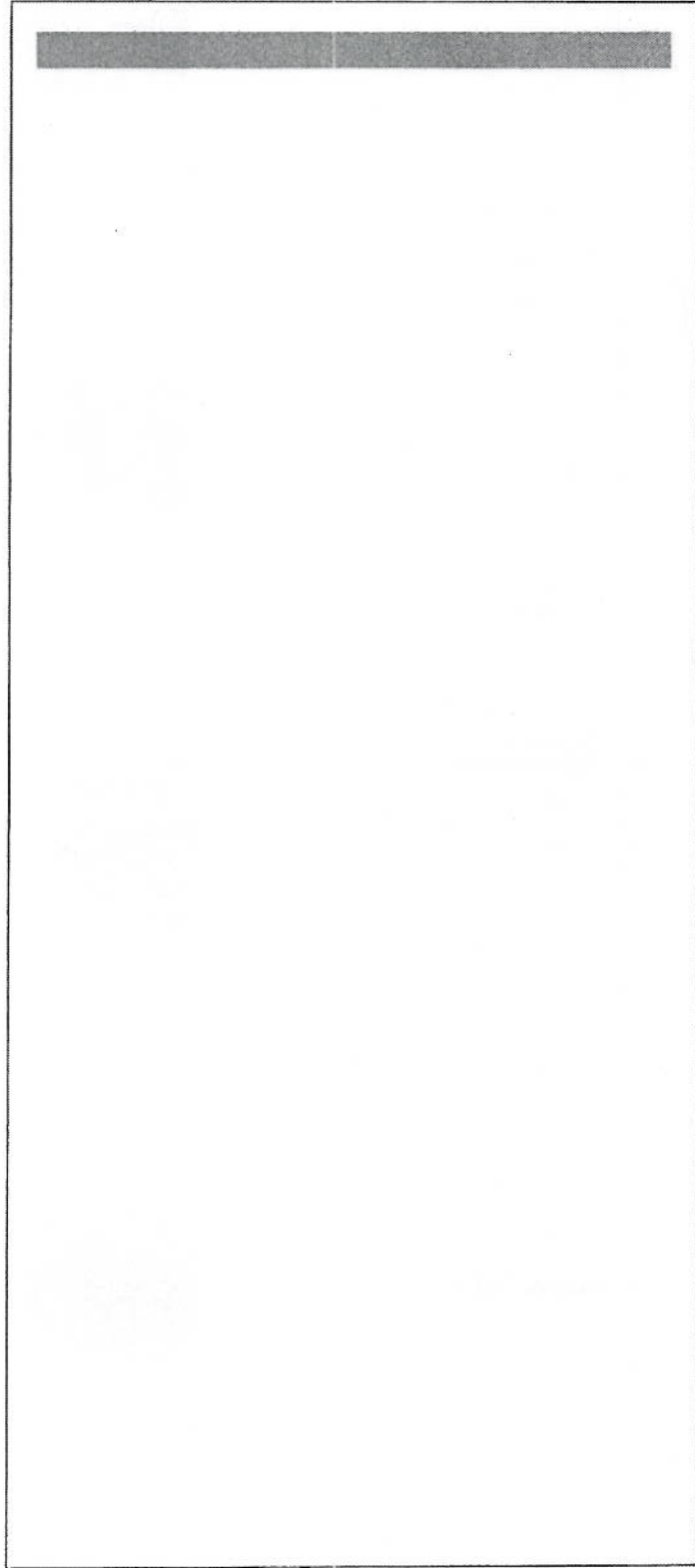
PBD7XYZ 00  
Intensity

PBD7O01  
Onset

PBD7I01  
Intensity

PBD7F01

Definitions and questions



Coding rules

Codes



Definitions and questions

**WORRIES/ANXIETY OVER GOING TO SCHOOL**  
**WORRIES/ANXIETY ABOUT LEAVING HOME**  
 Worry or subjective anxious affect related to leaving home for school.  
*Does s/he ever worry about leaving home to go to school?*  
*Is s/he frightened about having to leave home?*  
*Why?*  
*What does s/he say about it?*  
*What does s/he think might happen?*  
*Does s/he ever end up staying at home?*  
*Or leaving school early, before s/he should?*  
*How long does this last?*  
*Can you reassure him/her or distract him/her?*  
*How often does this happen?*  
*How long does s/he remain upset or worried?*  
*Once you actually leave the house (for example, are in the car), how long does it take for him/her to calm down?*  
*Can s/he say why s/he is afraid or worried?*  
*When did s/he start acting this way?*

**ANTICIPATORY FEAR OF SCHOOL**  
 Anticipatory worry or subjective anxious affect related to school situation.  
*Is s/he frightened or worried about anything at school?*  
*Such as particular classes, or teachers, or the behavior of other children?*  
*Why?*  
*Do you think that s/he worries about school when s/he's not there?*  
*How do you know that?*  
*What does s/he do about it?*  
*Can s/he stop being frightened?*  
*Can anyone manage to reassure him/her?*

Coding rules

**WORRIES/ANXIETY ABOUT LEAVING HOME**  
 0 = Absent  
 2 = Anticipatory worry or anticipatory anxiety intrusive into at least 2 activities that cannot be entirely controlled.  
 3 = Anticipatory worry or anticipatory anxiety occurring, almost entirely uncontrollable, in most activities.

HOURS : MINUTES

**ANTICIPATORY FEAR OF SCHOOL**  
 0 = Absent  
 2 = Anticipatory worry or anticipatory anxiety intrusive into at least 2 activities that cannot be entirely controlled.  
 3 = Anticipatory worry or anticipatory anxiety occurring, almost entirely uncontrollable, in most activities.

HOURS : MINUTES

Codes

PBD8I01  
Intensity

PBD8F01  
Frequency

PBD8D01  
Duration

PBD8O01  
Onset

PBD9I01  
Intensity

PBD9F01  
Frequency

PBD9D01  
Duration

PBD9O01  
Onset

Definitions and questions

**FEAR WHEN AWAY OF WHAT WILL HAPPEN AT HOME**

Worry or subjective anxious affect related to the possibility of bad things happening at home while the child is at school.

*Does s/he worry about what might happen at home when s/he's away at school?*

*What does s/he think might happen?*  
*What do you do about that?*  
*Does s/he worry about it even when s/he's at home?*  
*What does s/he say about it?*  
*Can you manage do reassure him/her?*

**PHYSICAL SYMPTOMS OF SEPARATION**

Complaints of physical symptoms, e.g. stomachaches, headaches, nausea, vomiting, on school days, or on other occasions when separation from major attachment figures occurs or is anticipated.

*Does s/he get any aches or pains on school days?*

*Or at other times when s/he's seperated from you or your "partner"?*

*Does s/he ever feel sick at these times?*

*Or get headaches?*  
*Or stomachaches?*

REMEMBER TO COMPLETE ANXIOUS AUTONOMIC SYMPTOMS.

Coding rules

**FEAR WHEN AWAY OF WHAT WILL HAPPEN AT HOME**

0 = Absent

2 = Anticipatory worry or anticipatory anxiety intrusive into at least 2 activities that cannot be entirely controlled.

3 = Anticipatory worry or anticipatory anxiety occurring, almost entirely uncontrollable, in most activities.

**HOURS : MINUTES**

**PHYSICAL SYMPTOMS ON SEPARATION**

0 = No

2 = Yes

Codes

PBE0101  
Intensity

PBE0F01  
Frequency

PBE0D01  
Duration

PBE0001  
Onset

PBE1101  
Intensity



Definitions and questions

NUMBER OF DAYS IN PRIMARY PERIOD

*When did it start?*

Coding rules

Codes

PBE1F01  
Frequency

PBE1O01  
Onset

Definitions and questions

**PATTERN OF NON-ATTENDANCE  
(WORRIES/ANXIETY)**

**STAYS AT HOME SOME MORNINGS  
(WORRY/ANXIETY)**

Child stays out of school because of fear/anxiety/emotional disturbance.

*Does s/he stay at home sometimes?*

*When is that?*  
*How often?*  
*How does s/he feel on these mornings?*  
*What do you do when s/he doesn't want to go to school?*  
*Do you make him/her go?*  
*Do you try to?*  
*What happens then?*  
*Tell me about the last time it happened.*  
*Is it like that every morning?*

QUESTION IN DETAIL TO DIFFERENTIATE STAYING AT HOME BECAUSE OF ANXIETY, OR OTHER EMOTIONAL DISTURBANCES, FROM STAYING AT HOME FOR OTHER REASONS.

*When was the first time this happened?*

**HAS TO BE TAKEN TO SCHOOL  
(WORRY/ANXIETY)**

Parent, or someone else, has to take child to school to ensure arrival because the child is anxious about leaving home or going to school.

*Do you have to take X to school sometimes?*

*Why is that?*  
*How often?*  
*What happens?*

Coding rules

**STAYS AT HOME SOME MORNINGS  
(WORRY/ANXIETY)**

- 0 = Absent
- 2 = Without marked parental attempts to get him/her to school.
- 3 = With marked parental attempts to get him/her to school.

**HAS TO BE TAKEN TO SCHOOL  
(WORRY/ANXIETY)**

- 0 = No
- 2 = Yes, on at least one occasion in last 3 months.

Codes

PBE2I01  
Intensity

PBE2O01  
Onset

PBE3I01  
Intensity

PBE3F01  
Frequency

Definitions and questions

**RUNS OUT OF SCHOOL (WORRY/ANXIETY)**

Child either fails to reach school because of worry/anxiety, or leaves before end of school day without permission because of worry/anxiety.

*Are there ever times when s/he just can't bear to go into school?*

*What is it that makes it difficult for him/her to go into school?*

*Or when s/he leaves school without permission*

*Why does s/he leave?*

*Where does s/he go?*

*Who with?*

*Do you know what s/he does then?*

*What have you done about that?*

*What has the school done?*

QUESTION IN DETAIL TO DIFFERENTIATE ANXIETY OVER SCHOOL ATTENDANCE FROM TRUANCY OR OTHER FORMS OF NON-ATTENDANCE.

IF SCHOOL NON-ATTENDANCE PRESENT, REMEMBER TO COMPLETE LEGAL ACTION OR TREATMENT SECTION AND AUTONOMIC SYMPTOMS.

**IF EVIDENCE OF WORRY/ANXIETY OVER SEPARATION, COMPLETE SEPARATION ANXIETY. OTHERWISE, SKIP TO "EXCESSIVE NEED FOR REASSURANCE", (PAGE 3).**

Coding rules

**RUNS OUT OF SCHOOL (WORRY/ANXIETY)**

0 = Absent

2 = Present

**CHILD FAILS TO REACH OR LEAVES SCHOOL AND RETURNS HOME (WORRY/ANXIETY)**

0 = Absent

2 = Present

**CHILD FAILS TO REACH OR LEAVES SCHOOL AND RETURNS HOME (WORRY/ANXIETY) - FREQUENCY**

**CHILD FAILS TO REACH OR LEAVES SCHOOL AND GOES OFF ALONE (WORRY/ANXIETY)**

0 = Absent

2 = Present

**CHILD FAILS TO REACH OR LEAVES SCHOOL AND GOES OFF ALONE (WORRY/ANXIETY) FREQUENCY**

**CHILD FAILS TO REACH OR LEAVES SCHOOL AND GOES OFF WITH PEERS (WORRY/ANXIETY)**

0 = Absent

2 = Present

**CHILD FAILS TO REACH OR LEAVES SCHOOL AND GOES OFF WITH PEERS (WORRY/ANXIETY)-FREQUENCY**

Codes

zyxabc4.00  
Intensity

PBE4I01

PBE4F01

PBE5I01

PBE5F01

PBE6I01

PBE6F01

Definitions and questions

**SEPARATION ANXIETY**

**SEPARATION WORRIES/ANXIETY**

Excessive worries or fear concerning separation from the persons to whom the affected child is attached.

There are 2 forms of Separations Worries/Anxiety:

Worries/Anxiety about Possible Harm, and Worries/Anxiety about calamitous Separation.

*Tell me how X reacts when s/he is separated from you or other household members.*

*Does s/he seem afraid of being away from you?*

*Does s/he worry when you are away?*

*Or when s/he has to leave you?*

**WORRIES/ANXIETY ABOUT POSSIBLE HARM**

Unrealistic and persistent worry or fear about possible harm befalling major attachment figures, or fear that they will leave and will not return.

*When s/he's away from you, does s/he worry that you might come to some harm?*

*Or that you might leave him/her?*

*What does she say?*

*What do you do about it?*

*Can you stop him/her worrying?*

*What do yo do?*

*How do these fears or worries affect him/her at home or at daycare/school?*

Coding rules

**SEPARATION WORRIES/ANXIETY**

0 = Absent

2 = Worrying or anxiety is intrusive into at least 2 activities and uncontrollable at least soem of the time.

3 = Worrying is intrusive into most activities and nearly always uncontrollable.

HOURS : MINUTES

**WORRIES ABOUT POSSIBLE HARM**

0 = Absent

2 = Worrying is intrusive into at least 2 activities and uncontrollable at least some of the time.

3 = Worry is intrusive into most activities and nearly always uncontrollable.

Codes

PBE7I01  
Intensity

PBE7F01  
Frequency

PBE7D01  
Duration

PBE7O01  
Onset

PBE8I01  
Intensity

Definitions and questions

**WORRIES/ANXIETY ABOUT CALAMITOUS SEPARATION**

Unrealistic and persistent worry or fear that an unexpected calamitous event will separate the child from a major attachment figure, e.g., the child will be lost, kidnapped, killed, or be the victim of an accident.

*Does s/he worry that s/he might come to some harm while s/he's away from the family?*

*What does s/he do about it?*

*What happens at school time?*

*What happens if a friend asks him/her to go out?*

*Can you stop X worrying about that?*

**RELUCTANCE TO SLEEP ALONE**

Persistent reluctance, or refusal to go to sleep without being near a major attachment figure.

*Can s/he go to sleep on his/her own?*

*What happens?*

*What do you do about it?*

*How long does that last?*

*Could s/he go to sleep on his/her own if s/he had to?*

Coding rules

**WORRIES ABOUT CALAMITOUS SEPARATION**

0 = Absent

2 = Worrying is intrusive into at least 2 activities and uncontrollable at least some of the time.

3 = Worry is intrusive into most activities and nearly always uncontrollable.

**RELUCTANCE TO GO TO SLEEP ALONE**

0 = Absent

2 = Sometimes reluctant to go to sleep alone.

3 = Almost always reluctant to go to sleep alone. Protest nearly every night unless allowed to sleep with family member.

**HOURS : MINUTES**

Codes

PBE9I01  
Intensity

PBF0I01  
Intensity

PBF0F01  
Frequency

PBF0D01  
Duration

PBF0O01  
Onset

Definitions and questions

**SLEEPS WITH FAMILY MEMBER**

Actually sleeps with a family member because of persistent refusal to sleep (through the night) without being near a major attachment figure.

*Can s/he sleep the night through on his/her own?*

*Does s/he ever have to sleep with "Mom" or "Dad"?*

*How often does s/he sleep with family member(s)?*

**RISING TO CHECK ON FAMILY MEMBERS**

Rising at night to check that attachment figures are still present and/or free from harm.

This does not include rising to check on subject's own child, if s/he has one.

*Does s/he ever get up to check that "family members" are OK?*

*How often does s/he do that?*

*How often does s/he do that?*

*Does s/he wake you up when s/he checks on you?*

*Is s/he able to go back to bed and fall asleep on his/her own after getting up to check on you?*

*When did s/he start getting up to check on the family?*

Coding rules

**SLEEPS WITH FAMILY MEMBER**

0 = Absent

2 = Sometimes reluctant to go to sleep alone.

3 = Almost always reluctant to go to sleep alone. Protests nearly every night unless allowed to sleep with family member.

**RISES TO CHECK ON FAMILY MEMBERS**

0 = Absent

2 = Sometimes rises to check on family members but without waking them.

3 = Wakes family members up when checks on them.

Codes

PBF8101  
Intensity

PBF8F01  
Frequency

PBF8001  
Onset

PBF1101  
Intensity

PBF1F01  
Frequency

PBF1001  
Onset

Definitions and questions

**AVOIDANCE OF SLEEPING AWAY FROM FAMILY**

Avoidance, or attempted avoidance, or sleeping away from family, as a result of worrying or anxiety about separation from home or family.

*Has s/he ever been on any overnight school trips?*

*Does s/he ever stay overnight with friends?*

*What about his/her grandmother's (or other relatives)?*

IF NO, ASK:

*Has s/he ever been asked to sleep over?*

*Does s/he get worried about sleeping away from home?*

**SEPARATION DREAMS**

Unpleasant dreams involving theme of separation.

*Has s/he had any nightmares about leaving you?*

*How often?*

*How often does s/he have these bad dreams?*

*Did they wake him/her from sleep?*

**AVOIDANCE OF BEING ALONE**

Persistent avoidance of being alone due to anxiety about being away from attachment figures.

*Does s/he try to avoid being on his/her own?*

*Why is that?*

*What does s/he do?*

*What do you do?*

*When did it start?*

*How do you respond?*

Coding rules

**AVOIDANCE OF SLEEPING AWAY FROM FAMILY**

0 = Absent

2 = Avoidance, or attempted avoidance, in last 3 months, but has slept away from the family at some time.

3 = Avoidance in last 3 months, and has never slept away from family.

**SEPARATION DREAMS**

0 = Absent

2 = Separation dreams recalled

3 = Separation nightmares wake child.

**AVOIDANCE OF BEING ALONE**

0 = Absent

2 = At least sometimes tries to avoid being alone because of at least sometimes uncontrollable worry or anxiety about being away from attachment figures.

3 = Almost always tries to avoid being alone because of nearly always uncontrollable worry or anxiety about being away from attachment figures.

Codes

PBF2101  
Intensity

PBF2001  
Onset

PBF3101  
Intensity

PBF3F01  
Frequency

PBF3001  
Onset

PBF4101  
Intensity

PBF4001  
Onset

Definitions and questions

**ANTICIPATORY DISTRESS**

Signs or complaints of excessive distress in anticipation of separation from major attachment figures; or crying, pleading with parents not to leave.

*What does s/he do when s/he thinks you might leave him/her?*

*Or when s/he has to leave you?*

**WITHDRAWAL WHEN ATTACHMENT FIGURE ABSENT**

Social withdrawal, apathy, sadness, or difficulty concentrating on work or play when not with a major attachment figure.

*Do you know what happens when s/he's left alone (or with a sitter)?*

*How does s/he feel?*

*Can s/he concentrate?*

*Does anything make him/her feel better?*

*What is s/he's with friends?*

**ACTUAL DISTRESS WHEN ATTACHMENT FIGURE ABSENT**

Signs or complaints of excessive distress, or extreme homesickness, when separated from major attachment figure.

*Does s/he get very upset sometimes when you're not with him/her?*

*Does s/he get homesick?*

*What's that like?*

*What does s/he do?*

Coding rules

**ANTICIPATORY DISTRESS**

0 = Absent

2 = At least sometimes uncontrollable distress related to potential separation from attachment figures. At least sometimes unresponsive to reassurance and occurring in at least 2 activities.

3 = Nearly always uncontrollable distress related to potential separation from attachment figures. Usually unresponsive to reassurance and occurring in most activities.

**WITHDRAWAL**

0 = Absent

2 = At least sometimes uncontrollable withdrawal etc., in at least 2 activities, when not with attachment figures.

3 = Nearly always uncontrollable withdrawal etc., in most activities, when not with attachment figures.

**DISTRESS**

0 = Absent

2 = At least sometimes uncontrollable distress etc., in at least 2 activities, when not with attachment figures.

3 = Nearly always uncontrollable distress etc., in most activities, when not with attachment figure.

Codes

PBF5101  
Intensity

PBF5001  
Onset

//

PBF6101  
Intensity

PBF6001  
Onset

//

PBF7101  
Intensity

PBF7001  
Onset

//



Definitions and questions

**WORRIES**

**GET EXAMPLES OF BEHAVIOR AND CONSIDER CODING FOR INCAPACITY. WORRIES**

A round of painful, unpleasant, or uncomfortable thoughts that cannot be stopped voluntarily and that occurs across more than one activity, with a total daily duration of at least 1 hour.

Do not include worries coded under School Non-Attendance, Separation Anxiety, or Hypochondriasis.

*Most people have got some worries. What does X worry about?*

*Does s/he ever have things on his/her mind that bother him/her?*

*Does s/he worry about what will happen in the future?*

*Does s/he worry about bad things happening in the future?*

*Does s/he worry about things s/he has done?*

*Does s/he worry about how well s/he does things?*

*Like school work?  
Or how good s/he is at sports?*

*Does s/he worry about what people think of her?*

*Does s/he get worried when other people are around?*

*Or worry about how s/he is with other people?*

*Does s/he get self-conscious?*

*Does s/he worry about how s/he looks?*

Coding rules

**WORRIES**

0 = Absent

2 = Worrying is intrusive into at least 2 activities and uncontrollable at least some of the time.

3 = Worrying is intrusive into most activities and nearly always uncontrollable.

**HOURS : MINUTES**

**WORRIES ABOUT FUTURE EVENTS**

0 = Absent

2 = Present

**WORRIES ABOUT PAST BEHAVIOR**

0 = Absent

2 = Present

**WORRIES ABOUT COMPETENCE OR PERFORMANCE**

0 = Absent

2 = Present

**SELF-CONSCIOUSNESS**

0 = Absent

2 = Present

**WORRIES ABOUT APPEARANCE**

0 = Absent

2 = Present

Codes

PCA0101  
Intensity

PCA0F01  
Frequency

PCA0D01  
Duration

PCA0001  
Onset

PCA0102

PCA0103

PCA0104

PCA0105

PCA0106

Definitions and questions

**Does s/he worry about whether your family will have enough money?**

- What is it like when s/he worries?*
- Can you give me an example?*
- When s/he worries about these things, how long does it last?*
- How often does s/he worry like that in a day?*
- Can s/he stop feeling like that?*
- Any times in the last three months s/he couldn't stop?*
- What is s/he doing when s/he is worrying like that?*
- Does it make any difference what s/he is doing?*
- How often has she worried in the last three months?*
- When did s/he start worrying like that?*
- How much does s/he worry?*
- Is it all the time or just now and then?*
- How worried does s/he get?*
- Can s/he stop worrying if s/he wants to?*
- Does anything make the worrying better?*
- Make it worse?*
- Can s/he turn his/her mind to other things?*
- How does s/he stop worrying?*
- Are there ever times that s/he can't stop worrying?*
- What about when s/he is doing other things?*
- Or what s/he wants to do?*
- Like T.V. or school work?*
- Does worrying affect his/her concentration?*
- Does worrying change how s/he is with others?*
- Does it make him/her irritable?*
- Does worrying keep him/her awake at night?*

**Does s/he have other worries?**

- What are they?*
- What is it like when s/he worries?*
- Does it make him/her irritable?*
- Or agitated?*
- Or quiet and constricted in his/her play or interactions?*
- Does worrying keep him/her awake at night?*
- Can you give me an example?*
- How often does s/he worry?*
- Can s/he stop worrying if s/he wants to?*
- Were there any times in the last three months s/he couldn't stop worrying?*
- How often has s/he worried in the last three months?*
- When did s/he start worrying like that?*

Coding rules

**WORRIES ABOUT MONEY**

- 0 = Absent
- 2 = Present

Codes

PCA0107

**OTHER WORRIES**

- 0 = Absent
- 2 = Present

PCA0108

Definitions and questions

**WORRIES ABOUT PHYSICAL ILLNESS  
(HYPOCHONDRIASIS)**

All characteristics of worrying are present including a total daily duration of at least 1 hour, but the worrying is specifically concentrated on the possibility of disease or malfunction in the subject.

**Does s/he worry at all about being physically ill?**

- That there may be something seriously wrong with him/her?*
- What does s/he worry about?*
- What does s/he think might happen?*
- How much does s/he worry about that?*
- Can s/he stop him/herself worrying?*
- What happens when you try to reassure him/her?*
- Has s/he been to a doctor?*
- What did the doctor say?*
- How long do the worries last?*
- When did those worries start?*

**EXCESSIVE NEED FOR REASSURANCE**

The subject seeks reassurance from others about at least two topics of worry, but the worries continue in spite of such reassurance. Include School-Related Worries/Anxiety, Separation Anxiety, Worries and Hypochondriasis.

**Does s/he tell people about his/her worries?**

- How often?*
- Do they ever get fed up with hearing about his/her worries?**
- What happens then?*
- Can s/he stop him/herself from talking about his/her worries?*

Coding rules

**HYPOCHONDRIASIS**

- 0 = Absent
- 2 = Worrying is intrusive into at least 2 activities and uncontrollable at least some of the time
- 3 = Worrying is intrusive into most activities and nearly always uncontrollable

**HOURS : MINUTES**

**EXCESSIVE NEED FOR REASSURANCE**

- 0 = Absent
- 2 = Seeks reassurance at least weekly (once a week for four consecutive weeks), but not to the extent of interfering with ordinary social discourse.
- 3 = Seeks reassurance to such an extent that ordinary social discourse with at least one person is interfered with, as evidenced by loss of patience, or avoidance of contact with subject, by that person.

Codes

PCA1101  
Intensity

PCA1F01  
Frequency

PCA1D01  
Duration

PCA1O01  
Onset

PCA2101  
Intensity

Definitions and questions

**ANXIOUS AFFECT  
NERVOUS TENSION**

An unpleasant feeling of "nervousness," "nervous tension," "being on edge," "being keyed-up."

*Is s/he sometimes tense, nervous, or on edge?*

*How bad is it?  
When does that happen?  
Does anything bring it on?  
Do you know why?  
What does s/he feel "nervous" about?  
Can you get him/her to calm down?  
If s/he concentrates on something, or is doing something s/he likes, does the nervousness go away?*

*How long does the feeling last?*

*When did it start?*

**SUBJECTIVE ANXIOUS AFFECT (FRIGHTENED AFFECT)**

*Feeling of fear and apprehension. Consider only the mood state itself here, and not its behavioral concomitants.*

*This overall item is not coded here but it is sub-classified into Free Floating and Situation Specific Anxious Affects at the end of the section.*

*All anxious affect situations refer to anxiety-provoking stressors that affect the child either in the presence of the stressor or just by thinking about it. Whether cued by the presence or by the anticipation of the stressor, the key concept is controllability of the anxiety.*

**IF ITEM CODES IN SECTION, COLLECT FREQUENCIES AND DURATIONS FOR SUMMATION CODING ON SITUATIONAL ANXIOUS AFFECT.**

Coding rules

**NERVOUS TENSION**

0 = Absent

2 = Nervous tension is intrusive into at least 2 activities and uncontrollable at least some of the time.

3 = Nervous tension is intrusive into most activities and nearly always uncontrollable.

HOURS : MINUTES

Codes

PCA3I01  
Intensity

PCA3F01  
Frequency

PCA3D01  
Duration

PCA3O01  
Onset