

1. Introduction

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Post-traumatic stress disorder (PTSD) becomes a concern for researchers, seeking its causes, risk factors and symptoms (Cook-Cottone, 2004; Eth, 2001). Among adolescents, adverse situations and critical incidents can occur, frequently related with family problems, violence, drug abuse, bullying. Sometimes risk factors for trauma happened simultaneously, eliciting more severe consequences (Poletto et al., 2009). The study of this pathology in adolescence is scarce, with few instruments for its diagnosis and mental health evaluation specifically developed for adolescents (Hawkins & Radcliffe, 2006). The *Los Angeles Symptom Checklist* (LASC, Foy et al., 1997) was developed to assess PTSD among adolescents during community violence or war, being easily to use.

2. Objectives

To present an exploratory study focused on the adaptation of *Los Angeles Symptom Checklist* (LASC, Foy et al., 1997) among adolescents.

3. Material and Methods

A sociodemographic questionnaire, the *Los Angeles Symptom Checklist* (LASC, Foy et al., 1997) and the EADS (Lovibond & Lovibond, 1995; Pais-Ribeiro et al., 2004) were used to assess respectively trauma, anxiety/depression/stress.

They were applied on printed form to 695 students of Porto, who anonymously participated, after formal authorization from a school situated on an area considered as dangerous due to drug traffic, juvenile delinquency and family violence.

Age varies between 10-16 years (Mean= 12,9 years and SD=1,933) and 54% were female. 15 to 20% were from 5 to 8th grade, 13% were from 9th grade and 13% were from 10-11th grade. 63% didn't failed during school progression years and 95% lived with nuclear family (parents, sister/brothers and grandparents). Only 5% lived with other parents such sisters, uncles, grandparents due the fact that their parents are in prison from drug crimes.

4. Results and Discussion / Results

Low presence of severe PTSD(15%), partial PTSD (18%) and stress/anxiety/depression was found (Figure 1), with older students presenting more depression, stress and PTSD, and females presenting more anxiety, stress, depression and PTSD (Table 1 and 2).

A positive correlation between anxiety and depression among individuals revealing PTSD was found (Table 2).

LASC presents good alphas (Table 3) but exploratory factorial analysis shows, like the original version, a concentration on the first factor, not well discriminating the symptoms of intrusion, avoidance and hyperarousal (Table 4).

5. Conclusion

Despite adequate psychometric properties of LASC, more data are need to adapt this scale to Portuguese reality, since it can be useful to identify early symptoms of PTSD, that tend to increase due society tragic incidents such as violence scenarios, bullying, road accidents, drug crimes, etc.

Online LASC format will allow to better identify PTSD and regular evaluation using new health technologies. As soon as trauma symptoms are identified, a better intervention can be prepared, allowing victims to recover from trauma and it negative impact.

6. References

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4. Results and Discussion / Results (cont.)

Figure 1. Presence of trauma, anxiety, depression and stress

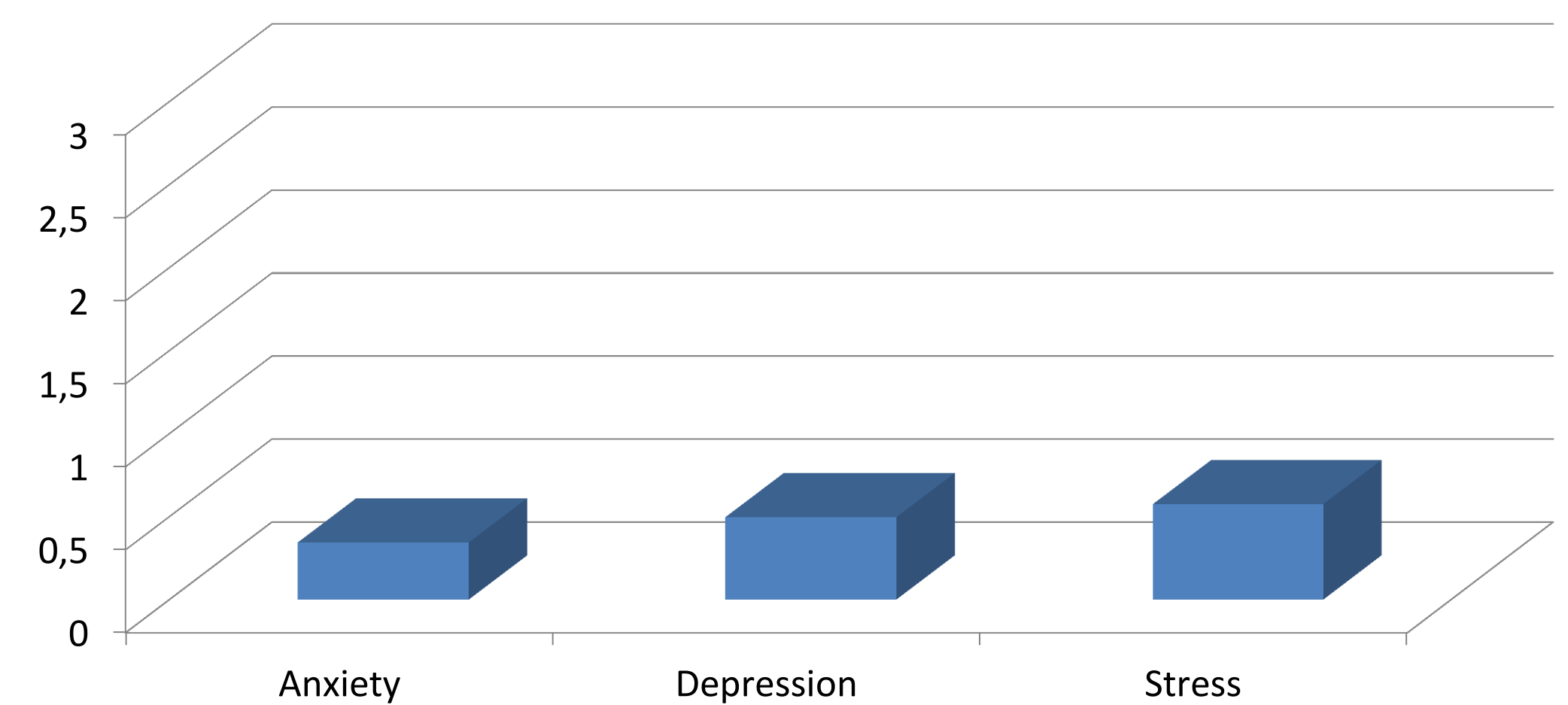
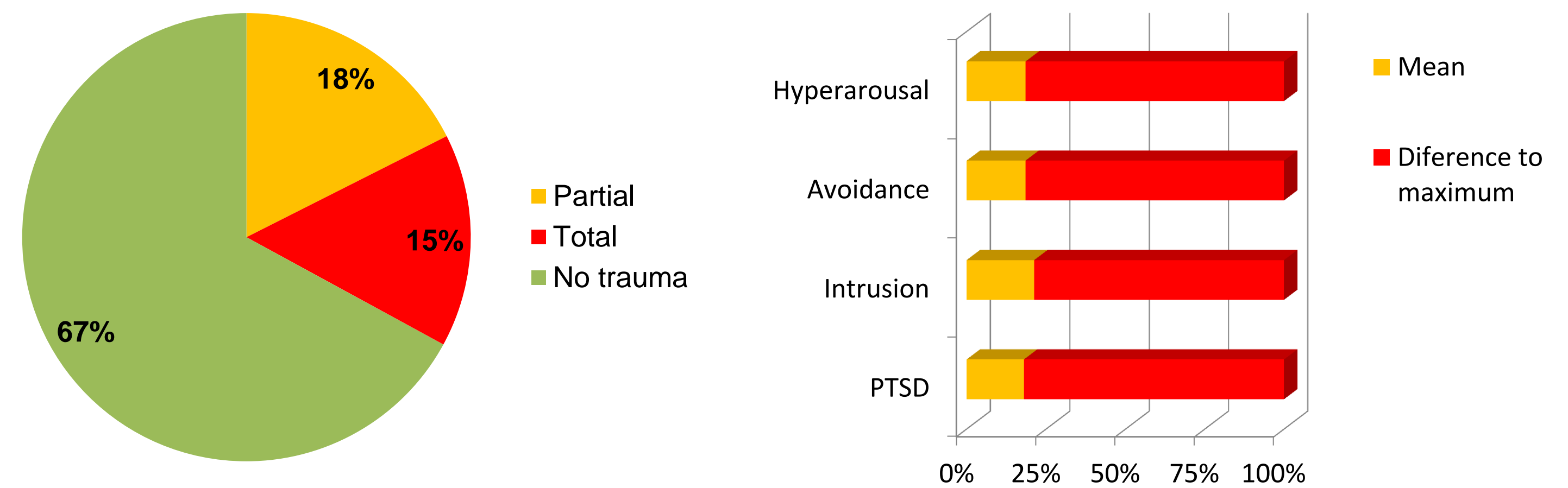


Table 1. Mean comparison by sex

	Male (N=322)	Female (N=373)	t student	Sig
Anxiety (0-3)	,3015	,3800	-2,684	,007
Depression (0-3)	,4257	,5564	-3,536	,000
Stress (0-3)	,5120	,6299	-3,126	,002
PTSD (0-172)	26,72	34,64	-3,014	,003
Intrusion (0-12)	2,14	2,68	-2,886	,004
Avoidance (0-24)	3,40	5,10	-4,219	,000
Hyperarousal (0-36)	5,70	7,42	-3,437	,001

Table 2. Correlations between age, trauma, anxiety, depression and stress

	Age	Anxiety	Depression	Stress	PTSD	Intrusion	Avoidance
Anxiety	,030						
Depression	,089*	,634**					
Stress	,147**	,670**	,687**				
PTSD	,173**	,292**	,300**	,299**			
Intrusion	,076*	,325**	,315**	,334**	,729**		
Avoidance	,186**	,300**	,355**	,335**	,888**	,651**	
Hyperarousal	,194**	,362**	,357**	,426**	,901**	,767**	,818**

*p < 0.050 ** p < 0.010

Table 3. Cronbach Alpha on original study and this study

	PTSD	Intrusion	Avoidance	Hyperarousal
Foy et al. (1997)	0,95	-	-	-
This study	0,98	0,62	0,87	0,86

Table 4. Variance percentage and extracted factors

Factor	Total	% Variance	% Accumulated
1	22,017	51,203	51,203
2	2,736	6,363	57,566
3	1,568	3,647	61,212
4	1,180	2,745	63,957
		KMO	,971
		Bartlett Sig	,000