

Polyvictimization & Biopsychosocial Health Profiles among Sex Trafficking Survivors & Associated Differences in Help-Seeking

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Background

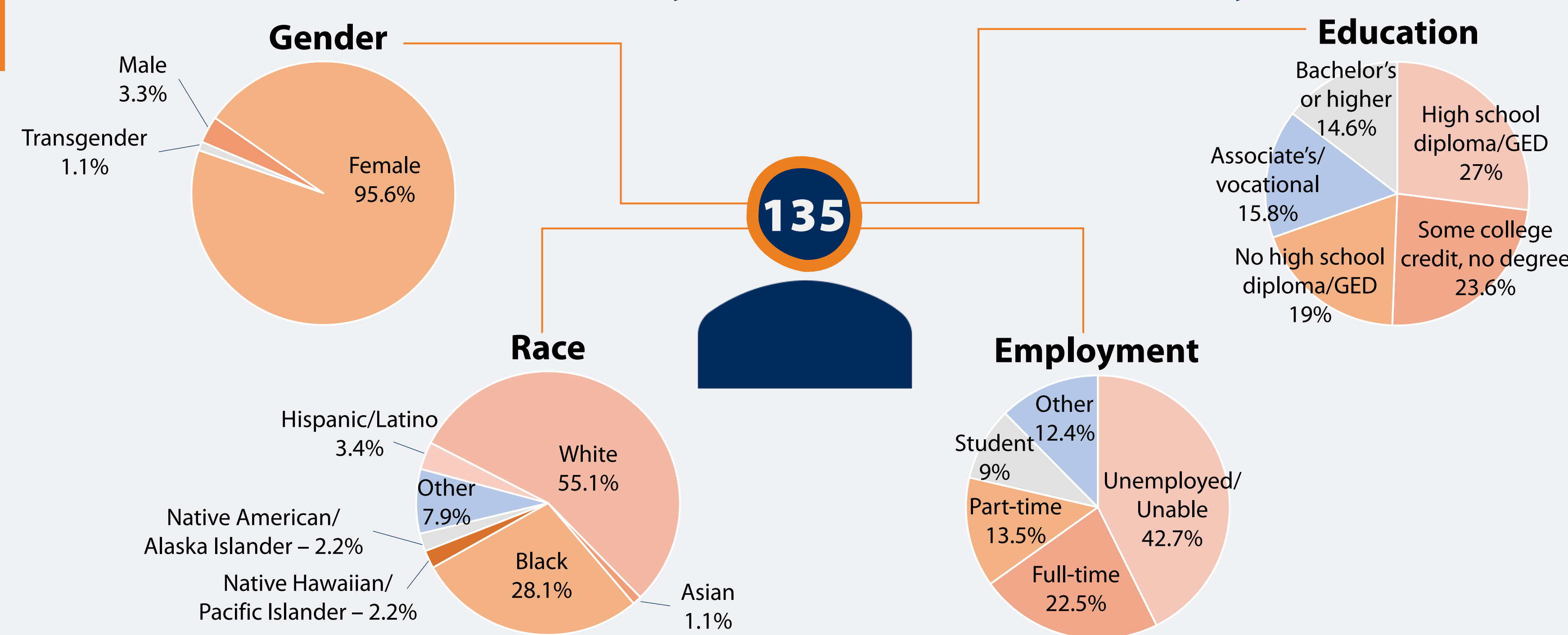
- Survivors of sex trafficking often experience protracted polyvictimization (i.e., multiple types of victimization).¹
- This victimization is linked with a complex sequela of adverse biological, psychological, and social (i.e., biopsychosocial) health outcomes.²
- Intervention and recovery services for survivors are sparse and often inadequate.³
- The **purpose** of this study was to explore heterogeneity in polyvictimization and biopsychosocial health, as well as associated variability in help-seeking attitudes and intentions among sex trafficking survivors in the U.S.

Research Questions

- Are there distinct polyvictim and biopsychosocial health profiles in a sample of adult sex trafficking survivors?
- Are there differences in help-seeking attitudes and intentions between latent profiles identified from RQ 1?
- What were the class-specific survivor reports of services believed to be most important across three time periods following escape from trafficking victimization?

Method

- Cross-sectional data were gathered from 135 adult [ages 18-64 ($M=34.78$)] sex trafficking survivors in a nationwide study within the United States.
- Participants were recruited via professional referral sampling by way of partnerships between a community-based participatory research program and 29 community organizations that provide services to sex trafficking survivors across 19 different states.
- Participants had the option to claim a \$30 remuneration.
- Inclusion criteria: (1) 18+ years of age; (2) sex trafficked at some point in life; and, (3) currently receiving or received professional support services sometime in the past from an organization that provides resources to survivors of sex trafficking. Individuals being actively trafficked were not included in this study.



Predictor Variables

Adverse Childhood Experiences ⁶	Alcohol Use ⁷	Anxiety ⁸
Attachment ⁹	Depression ¹⁰	Drug Use ¹¹
Physical & Mental Health Problems	Personality Traits ¹²	Polyvictimization ¹³
PTSD ¹⁴	Self-Harm ¹⁵	Sex Trafficking Experiences
Suicidality ¹⁶		

Outcome Variables

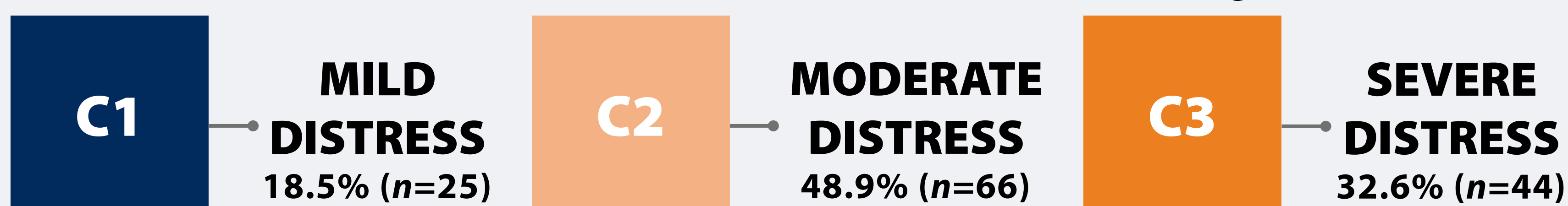
Help-Seeking Attitudes ¹⁷	Help-Seeking Intentions ¹⁸
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Analysis

- Step 1:** We ran a series of latent profile analyses⁴ (LPA) where classes were iteratively added to identify which solution best fit the data.
- Step 2:** We applied the BCH procedure⁵ to examine items from the help-seeking attitudes and intentions scales as distal outcomes in the LPA.
- Step 3:** We ran a descriptive analysis of class-specific survivor reports of services believed to be most important across three time periods following escape from trafficking victimization.

Results

- We identified the 3-class model as the optimal solution based on the dual consideration of statistical fit indices and theoretical congruence.*



- Mild:** Lowest polyvictimization; trafficked avg. of 7.5 yrs.; no clinically sig. distress symptoms
- Moderate:** Polyvictimization similar to mild group; trafficked avg. of 10 yrs.; clinically sig. re-experiencing, avoidance, anxiety, depression, and alcohol use symptoms
- Severe:** Highest polyvictimization; trafficked avg. of 16 years. clinically sig. PTSD, anxiety, depression, alcohol use, drug use, and suicidality

Professional Psychological Help

Greater overall value and need regarding professional psychological help

MILD > SEVERE

Seeking Help in Crisis

"Would not seek help from anyone if having a personal/emotional problem"

SEVERE > MILD & MOD

Talking About Psychological Problems

"Talking about psychological problems is a poor way to solve emotional problems"

SEVERE > MILD & MOD

Future Counseling

"Might want counseling in the future"

MOD & SEVERE > MILD

Value of Therapy

"Therapy would not have value for me"

MOD & SEVERE > MILD

Coping Without Professional Resources

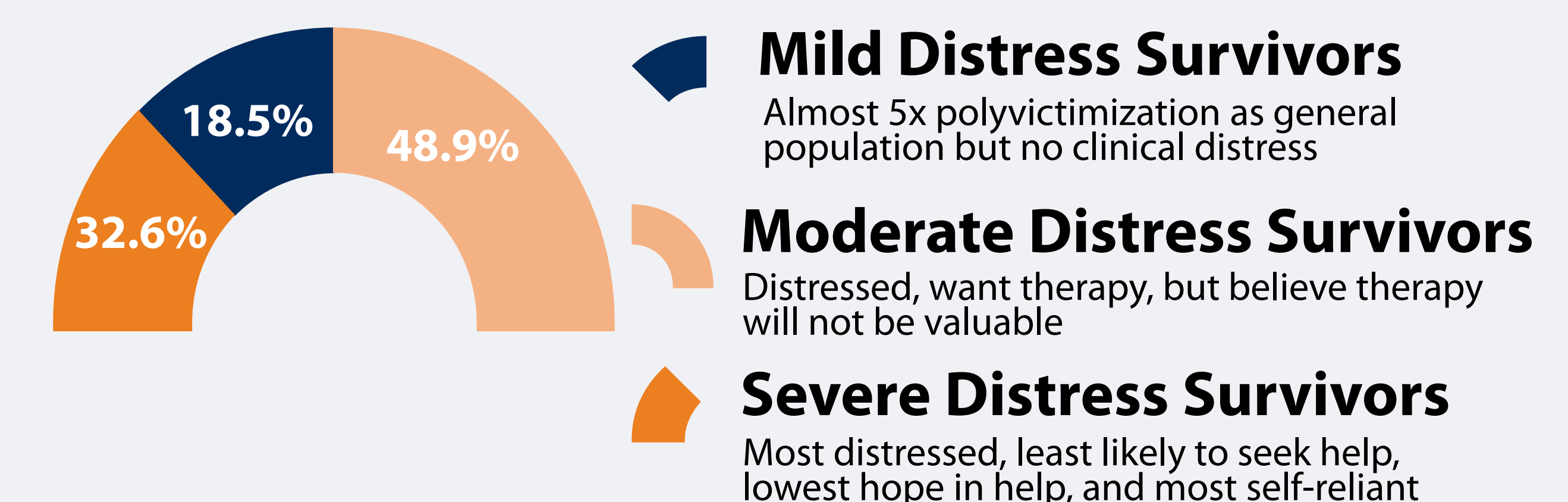
"Coping without professional help is admirable"

SEVERE > MILD & MOD

- Mild class reported sig. greater "value and need" for seeking psychological help than severe class
- Severe class endorsed "talking about psychological problems is a poor way to solve emotional problems" and "coping without professional help is admirable" sig. more than mild or mod. classes
- The severe class indicated that they "would not seek help from anyone if having a personal/emotional problem. sig. more than the other classes

What Does This Mean?

Among the survivors in this sample, **increased** distress was associated with a **decrease** in favorable attitudes and intentions toward help-seeking.



Implications

- Adopt person-centered care models that focus on survivors' self-defined needs
- Address survivor-professional support gap

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Table 1 – *Indicator and Distal Outcome Variables Used in the Latent Profile Analysis of Polyvictimization and Biopsychosocial Health with a Sample of Adult Sex Trafficking Survivors (N = 135)*

Variable	Scale
Polyvictimization	Trauma History Questionnaire (THQ; Hooper, Stockton, Krupnick, & Green, 2011)
Adverse Childhood Experiences	Adverse Childhood Experiences International Questionnaire (ACE-IQ; World Health Organization, 2017)
Sex Trafficking Experiences	Researcher-Designed Assessment
Posttraumatic Stress Disorder	PTSD Checklist for DSM-5 (PCL-5; Blevins et al., 2015)
Anxiety	GAD-7 (Spitzer et al., 2006)
Depression	The Patient Health Questionnaire (PHQ-9; Kroenke et al., 2001)
Alcohol Use	Alcohol Use Disorders Identification Test (AUDIT; Saunders et al., 1993)
Drug Use	Drug Abuse Screening Test (DAST-10; Skinner, 1982)
Self-Harm	Non-Suicidal Self-Injury-Assessment Tool (NSSI-AT; Whitlock, Exner-Cortens, & Purington, 2014)
Suicidality	The Suicidal Behaviors Questionnaire-Revised (SBQ-R; Osman et al., 2001)
Personality Dysfunction	The Personality Inventory for DSM-5-Brief Form (PID-5-BF; Krueger et al., 2013)
Physical & Mental Health Problems	General Health Assessment
Attachment	Revised Adult Attachment Scale (RAAS; Collins, 1996)
Help-Seeking Attitudes	Attitudes Toward Seeking Professional Psychological Help Scale-Short Form (ATSPPH-SF; Elhai, Schweinle, & Anderson, 2008)
Help-Seeking Intentions	General Help-Seeking Questionnaire (GHSQ; Wilson et al., 2005)

Table 2 – *Adult Sex Trafficking Survivor Reports of Polyvictimization, Biopsychosocial Health, Help-Seeking Attitudes, Help-Seeking Intentions, and Demographic Variables: Total Sample and Latent Class Descriptive Statistics (N = 135)*

Variables	Total sample			Latent classes		
	<i>M</i>	<i>SD</i>	Range	Mild distress (<i>n</i> = 25, 18.5%) <i>M</i> (<i>SE</i>)	Moderate distress (<i>n</i> = 66, 48.9%) <i>M</i> (<i>SE</i>)	Severe distress (<i>n</i> = 44, 32.6%) <i>M</i> (<i>SE</i>)
Polyvictimization	10.79	6.50	0 – 16	9.29(1.28)	9.60(.85)	13.09(1.29)
Adverse childhood experiences score	7.31	1.77	3 – 10	6.79(.37)	7.12(.29)	7.88(.26)
Sex trafficking duration (in years)	11.54	8.83	.50 – 42	7.50(2.02)	9.81(1.14)	16.09(2.18)
Last experience of sex trafficking ^a	3.45	1.33	1 – 5	4.02(.28)	3.66(.20)	2.92(.24)
Length of current support services ^b	2.54	3.92	0 – 20	1.71(.48)	1.84(.40)	3.50(1.05)
Length of past support services ^b	3.17	4.34	0 – 20	2.40(.58)	4.19(1.02)	2.38(1.02)
PTSD symptoms	34.32	26.45	0 – 79	8.42(2.02)	28.21(2.94)	56.29(4.62)
Re-experiencing	2.29	1.33	0 – 4	.49(.11)	2.04(.15)	3.48(.11)
Avoidance	2.32	1.32	0 – 4	.61(.16)	2.12(.16)	3.41(.14)
Negative thoughts/feelings	2.18	1.22	0 – 4	.70(.17)	1.84(.13)	3.30(.12)
Arousal	2.05	1.19	0 – 4	.44(.13)	1.78(.11)	3.16(.11)
Anxiety symptoms	11.58	6.44	0 – 21	3.72(.75)	10.68(.71)	17.06(.67)
Depression symptoms	12.50	6.92	0 – 27	3.58(.65)	11.84(.62)	18.25(.96)
Alcohol use	8.77	9.97	0 – 40	3.87(.74)	8.62(1.32)	11.74(1.81)
Drug use	5.45	3.43	0 – 10	4.08(.84)	5.23(.46)	6.51(.48)
Number of times self-harmed	2.71	2.86	0 – 7	1.69(.59)	1.96(.40)	4.12(.44)
Suicidality	7.66	2.95	3 – 16	5.96(.48)	6.74(.31)	9.70(.52)
Personality traits	35.19	14.60	2 – 66	18.95(2.69)	32.62(1.76)	47.74(1.89)
Negative affect	1.93	0.77	0 – 3	.98(.19)	1.87(.08)	2.55(.05)
Detachment	1.56	.69	0 – 3	1.03(.12)	1.36(.08)	2.11(.08)
Antagonism	1.15	.75	0 – 3	.67(.08)	1.09(.12)	1.51(.14)
Disinhibition	1.24	.76	0 – 3	.70(.17)	1.23(.11)	1.56(.13)
Psychoticism	1.37	.87	0 – 3	.63(.12)	1.19(.11)	2.03(.14)
Diagnosed mental health conditions	4.06	2.54	0 – 11	2.51(.30)	3.44(.28)	5.84(.46)
Diagnosed physical health conditions	2.92	2.27	0 – 13	2.93(.45)	2.71(.28)	3.19(.39)

Table 2 – *Continued*

Variables	Latent classes						
	Total sample			Mild distress	Moderate distress	Severe distress	
	<i>M</i>	<i>SD</i>	Range	<i>M(SE)</i>	<i>M(SE)</i>	<i>M(SE)</i>	
Comfort with emotional closeness ^c	2.76	.68	1 – 5	3.08(.14)	2.81(.11)	2.53(.12)	
Comfort depending on others ^c	2.54	.83	1 – 5	2.73(.16)	2.67(.13)	2.29(.15)	
Anxious concern about being abandoned or unloved ^c	3.31	1.19	1 – 5	2.68(.24)	3.33(.16)	3.64(.25)	
Help-seeking attitudes	21.86	5.11	10 – 30	22.15(1.25)	22.42(.89)	21.18(.87)	
Openness	2.32	.64	0 – 3	2.14(.19)	2.36(.10)	2.40(.10)	
Value and need	2.07	.75	0 – 3	2.29(.14)	2.14(.13)	1.88(.14)	
1. Would obtain professional help if having a mental breakdown ^d	2.35	.87	0 – 3	2.56(.21)	2.22(.15)	2.33(.15)	
2. Talking about psychological problems is a poor way to solve emotional problems ^d	.87	1.09	0 – 3	.55(.22)	.74(.18)	1.20(.20)	
3. Would find relief in therapy if having an emotional crisis ^d	2.13	.93	0 – 3	1.85(.26)	2.18(.15)	2.25(.15)	
4. Coping without professional help is admirable ^d	1.39	1.19	0 – 3	1.05 (.27)	1.22(.21)	1.76(.20)	
5. Would obtain psychological help if upset for a long time ^d	2.39	.86	0 – 3	2.35(.24)	2.24(.16)	2.55(.13)	
6. Might want counseling in the future ^d	2.48	.84	0 – 3	1.94(.25)	2.74(.11)	2.58(.13)	
7. A person with an emotional problem is likely to solve it with professional help ^d	2.26	.85	0 – 3	1.99(.23)	2.40(.13)	2.29(.15)	
8. Therapy would not have value for me ^d	.94	.99	0 – 3	.59(.15)	1.16(.21)	.94(.16)	
9. A person should work out their problems without counseling ^d	.69	.92	0 – 3	.70(.18)	.50(.16)	.86(.17)	
10. Emotional problems resolve by themselves ^d	.75	.98	0 – 3	.65(.21)	.69(.18)	.86(.17)	
Likely to seek help from... ^e							
Intimate partner	4.49	2.21	1 – 7	4.79(.59)	4.29(.38)	4.47(.44)	
Friend	4.89	1.84	1 – 7	5.11(.47)	4.64(.31)	5.00(.32)	
Parent/caregiver	3.09	2.19	1 – 7	2.94(.50)	3.64(.41)	2.68(.36)	
Other family member	3.02	2.16	1 – 7	2.79(.46)	3.39(.38)	2.83(.39)	
Mental health professional	5.51	1.66	1 – 7	5.60(.41)	5.56(.29)	5.42(.28)	

Table 2 – *Continued*

Variables	Latent classes					
	Total sample			Mild distress	Moderate distress	Severe distress
	<i>M</i>	<i>SD</i>	Range	<i>M(SE)</i>	<i>M(SE)</i>	<i>M(SE)</i>
Phone helpline	3.65	2.31	1 – 7	3.08(.49)	4.27(.42)	3.44(.39)
Internet	3.53	2.16	1 – 7	3.45(.49)	3.39(.38)	3.70(.38)
Doctor/nurse	4.30	2.15	1 – 7	3.63(.56)	4.82(.35)	4.25(.37)
Community agency	4.72	2.00	1 – 7	4.45(.51)	4.76(.33)	4.86(.36)
Religious leader	4.24	2.30	1 – 7	4.40(.55)	4.45(.41)	3.94(.40)
Would not seek help from anyone	2.46	1.90	1 – 7	1.84(.34)	2.28(.33)	3.01(.35)
Age	34.78	9.86	18 – 64	36.56(11.90)	34.79(9.22)	33.75(9.61)
Variables	Total sample		Mild distress	Moderate distress	Severe distress	
	%	%	%	%	%	
Gender						
Male	3.3	0	5.4	2.9		
Female	95.6	100	94.6	94.2		
Transgender	1.1	0	0	2.9		
Primary racial identity						
American Indian/Alaska Native	2.2	0	0	5.7		
Asian	1.1	5.6	0	0		
Black	28.1	27.8	41.6	14.3		
Hispanic/Latino	3.4	0	5.6	2.9		
Native Hawaiian/Pacific Islander	2.2	5.6	0	2.9		
White	55.1	55.4	50.0	60.0		
Other	7.9	5.6	2.8	14.2		
Education						
No schooling completed	6.7	5.6	0	14.3		
Elementary/middle/high school, no diploma	12.3	0	16.7	14.3		
High school diploma/GED	27.0	16.7	27.8	31.4		
Some college credit, no degree	23.6	16.7	36.1	14.3		
Technical/vocational training	7.9	16.7	2.8	8.6		
Associate's degree	7.9	27.8	5.6	0		

Table 2 – *Continued*

Variables	Total sample	Mild distress	Moderate distress	Severe distress
	%	%	%	%
Bachelor's degree	10.1	11.1	8.3	11.4
Master's degree or higher	4.5	5.4	2.7	5.7
Employment				
Full time	22.5	33.3	19.4	20.0
Part time	13.5	22.2	16.7	5.7
Unemployed, looking for work	23.6	22.2	25.0	22.9
Unemployed, not looking for work	5.6	0	5.6	8.6
Student	9.0	5.6	11.1	8.6
Homemaker	3.4	0	2.8	5.7
Self-employed	3.4	5.6	0	5.7
Unable to work	13.5	5.6	13.9	17.1
Other	5.6	5.6	5.6	4.5
Income				
Below \$9,999	51.2	35.3	44.4	66.7
\$10,000-19,999	16.3	17.6	19.4	12.1
\$20,000-29,999	16.3	11.8	22.2	12.1
\$30,000-39,999	8.1	17.6	11.2	0
\$40,000-69,999	3.5	5.9	0	6.1
\$70,000-99,999	4.6	11.8	2.8	3.0
Region of the U.S. currently living				
West ^f	23.0	28.0	19.7	25.0
Midwest ^g	5.2	8.0	4.5	4.5
South ^h	31.1	32.0	25.8	38.6
Northeast ⁱ	3.0	4.0	3.0	2.3
Types of sex trafficking experienced				
Escorting	37.0	44.0	33.3	38.6
Familial trafficking or CSEC ^j	23.0	24.0	19.7	27.3
Illicit massage parlors	6.7	8.0	6.1	6.8
Pornography	25.9	16.0	22.7	36.4
Prostitution	63.7	64.0	54.5	77.3

Table 2 – *Continued*

Variables	Total sample	Mild distress	Moderate distress	Severe distress
	%	%	%	%
Stripping/exotic dancing	24.4	16.0	22.7	31.8
Other	10.4	0	7.6	20.5

Note. ^a1 = within the past month, 2 = in the past 1 to 6 months, 3 = in the past 7 to 12 months, 4 = in the past 1 to 5 years, 5 = more than 5 years ago. ^bLength of time in years. ^cRevised Adult Attachment Scale sub-scales. ^dAttitudes Toward Seeking Professional Psychological Help Scale – Short Form items. ^eGeneral Help-Seeking Questionnaire items (i.e., help-seeking intentions). ^fWest = WA, OR, CA, NV, AZ, UT, ID, MT, WY, CO, NM, AK, HI. ^gMidwest = ND, SD, NE, KS, MN, IA, MO, WI, IL, IN, MI, OH. ^hSouth = OK, TX, AR, LA, MS, AL, FL, GA, TN, SC, NC, VA, WV, KY, DC, MD, DE. ⁱNortheast = PA, NJ, NY, CT, RI, MA, VT, NH, ME. ^jCommercial Sexual Exploitation of a Child.

Table 3 – *Polyvictimization and Biopsychosocial Health Profiles among Adult Sex Trafficking Survivors: Latent Profile Analysis Fit Statistics for 1 – 4 Class Solutions and Classification Posterior Probabilities for the Three-Class Solution (N = 135)*

Model	LL	AIC	BIC	SSA-BIC	Entropy	LMR	BLRT	Participants per class (%)			
								1	2	3	4
1 class	-6960.24	14032.48	14195.18	14018.03				100			
2 class	-6591.26	13352.51	13599.46	13330.58	.91	-6960.24**	-6960.24**	61.48	38.52		
3 class	-6454.43	13136.86	13468.06	13107.44	.89	-6591.56	-6591.26**	18.52	48.89	32.59	
4 class	-6378.41	13042.83	13458.28	13005.92	.90	-6454.43	-6454.23**	30.37	16.30	26.63	23.70
Average classification posterior probabilities											
		<i>n</i> (%)	Class 1: mild distress		Class 2: moderate distress		Class 3: severe distress				
Class 1: mild distress		25 (18.52)	.98		.02		.00				
Class 2: moderate distress		66 (48.89)	.06		.91		.04				
Class 3: severe distress		44 (32.59)	.00		.01		.99				

Note. LL = log-likelihood. AIC = Akaike information criterion. BIC = Bayesian information criterion. SSA-BIC = Sample-size adjusted Bayesian information criterion. LMR = Lo-Mendell-Rubin likelihood ratio test. BLRT = Bootstrapped likelihood ratio test. Participants per class (%) = the proportion of participants in each of the classes in the model. Values on the posterior probability diagonal are the average posterior probabilities associated with the classes to which participants were assigned. * $p < .10$. ** $p < .001$

Table 4 – *Help-Seeking Attitudes and Intentions by Sex Trafficking Survivor Profiles of Polyvictimization and Biopsychosocial Health (N = 135)*

Distal outcome variables	Global χ^2	Class comparisons			Summary
		1 v 2	1 v 3	2 v 3	
Help-seeking attitudes	1.05	.03	.40	.93	ns
Openness	1.56	.97	1.56	.09	ns
Value and need	4.80*	.59	4.69**	1.78	1 > 3
1. Would obtain professional help if having a mental breakdown ^a	1.46	1.45	.74	.26	ns
2. Talking about psychological problems is a poor way to solve emotional problems ^a	5.31*	.39	4.74**	2.76*	3 > 1, 3 > 2
3. Would find relief in therapy if having an emotional crisis ^a	1.84	1.05	1.84	.11	ns
4. Coping without professional help is admirable ^a	5.86**	.22	4.43**	3.37**	3 > 1, 3 > 2
5. Would obtain psychological help if upset for a long time ^a	2.44	.14	.51	2.25	ns
6. Might want counseling in the future ^a	7.24**	7.23***	5.14**	.83	2 > 1, 3 > 1
7. A person with an emotional problem is likely to solve it with professional help ^a	2.06	2.05	1.22	.26	ns
8. Therapy would not have value for me ^a	5.23*	4.58**	2.59*	.67	2 > 1, 3 > 1
9. A person should work out their problems without counseling ^a	2.21	.62	.43	2.21	ns
10. Emotional problems resolve by themselves ^a	.79	.02	.63	.48	ns
Likely to seek help from...intimate partner ^b	.43	.43	.19	.09	ns
Likely to seek help from...friend ^b	.88	.64	.04	.63	ns
Likely to seek help from...parent/caregiver ^b	2.92	1.03	.19	2.91*	2 > 3
Likely to seek help from...other family member ^b	1.26	.89	.00	.99	ns
Likely to seek help from...mental health professional ^b	.19	.01	.14	.11	ns
Likely to seek help from...phone helpline ^b	3.33	2.99*	.32	1.96	1 > 2
Likely to seek help from...internet ^b	.35	.01	.16	.31	ns
Likely to seek help from...doctor/nurse ^b	2.98	2.82*	.84	1.19	2 > 1
Likely to seek help from...community agency ^b	.46	.23	.46	.04	ns
Likely to seek help from...religious leader ^b	.93	.01	.47	.76	ns
Would not seek help from anyone ^b	5.90**	.77	5.77**	2.51*	3 > 1, 3 > 2

Note. Mean differences assessed by Wald chi-square tests performed as part of the BCH stepwise approach to latent class modeling. 1 = *mild distress class*; 2 = *moderate distress class*; 3 = *severe distress class*. ns = not significant. ^aAttitudes Toward Seeking Professional Psychological Help Scale – Short Form items. ^bGeneral Help-Seeking Questionnaire items (i.e., help-seeking intentions). * $p < .10$. ** $p < .05$. *** $p < .01$

References

- ¹Hopper, E. (2017). Polyvictimization and developmental trauma adaptations in sex trafficked youth. *Journal of Child & Adolescent Trauma*, 10(2), 161-173. doi:10.1007/s40653-016-0114-z
- ²Ottisova, L., Hemmings, S., Howard, L. M., Zimmerman, C., & Oram, S. (2016). Prevalence and risk of violence and the mental, physical and sexual health problems associated with human trafficking: An updated systematic review. *Epidemiology and Psychiatric Sciences*, 25(4), 317-341. doi:10.1017/S2045796016000135
- ³Powell, C., Asbill, M., Louis, E., & Stoklosa, H. (2018). Identifying gaps in human trafficking mental health service provision. *Journal of Human Trafficking*, 4(3), 256–269. doi:10.1080/23322705.2017.1362936
- ⁴Mutthén, L. K., & Muthén, B. O. (1998-2012). *Mplus user's guide* (7th ed.). Los Angeles, CA: Muthén & Muthén.
- ⁵Back, Z., Tekle, F. B., & Vermunt, J. K. (2013). Estimating the association between latent class membership and external variables using bias-adjusted three-step approaches. *Sociological Methodology*, 43(1), 272-311. doi:10.1177/0081175012470644
- ⁶World Health Organization. (2017). *The Adverse Childhood Experiences International Questionnaire (ACE-IQ)*. Retrieved from http://www.who.int/violence_injury_prevention/violence/activities/adverse_childhood_experiences/en/
- ⁷Saunders, J. B., Aasland, O. G., Amundsen, A., & Grant, M. (1993). Alcohol consumption and related problems among primary health care patients: WHO collaborative project on early detection of persons with harmful alcohol consumption- I. *Addiction*, 88(3), 349-362. doi:10.1111/j.1360-0443.1993.tb00822.x
- ⁸Spitzer, R. L., Kroenke, K., Williams, J. B., & Löwe, B. (2006). A brief measure for assessing generalized anxiety disorder: The GAD-7. *Archives of Internal Medicine*, 166(10), 1092-1097. doi:10.1001/archinte.166.10.1092
- ⁹Collins, N. L. (1996). Working models of attachment: Implications for explanation, emotion, and behavior. *Journal of Personality and Social Psychology*, 71(4), 810-832. doi:10.1037//0022-3514.71.4.810
- ¹⁰Kroenke, K., Spitzer, R. L., & Williams, J. (2001). The PHQ-9: Validity of a brief depression severity measure. *Journal of General Internal Medicine*, 16(9), 606-613. doi:10.1046/j.1525-1497.2001.016009606.x
- ¹¹Skinner, H. A. (1982). The Drug Abuse Screening Test. *Addictive Behaviors*, 7(4), 363-371. doi:10.1016/0306-4603(82)90005-3
- ¹²Krueger, R. F., Derringer, J., Markon, K. E., Watson, D., & Skodol, A. E. (2012). Initial construction of a maladaptive personality trait model and inventory for DSM-5. *Psychological Medicine*, 42(9), 1879-1890. doi:10.1017/S0033291711002674
- ¹³Hooper, L., Stockton, P., Krupnick, J., & Green, B., (2011). Development, use, and psychometric properties of the Trauma History Questionnaire. *Journal of Loss and Trauma*, 16, 258-283. doi:10.1080/15325024.2011.572035
- ¹⁴Blevins, C. A., Weathers, F. W., Davis, M. T., Witte, T. K., & Domino, J. L. (2015). The Posttraumatic Stress Disorder Checklist for DSM-5 (PCL-5): Development and initial psychometric evaluation. *Journal of Traumatic Stress*, 28, 489-498. doi:10.1002/jts.22059

- ¹⁵ Whitlock, J., Exner-Cortens, D., & Purington, A. (2014). Assessment of nonsuicidal self-injury: Development and initial validation of the Non-Suicidal Self-Injury-Assessment Tool (NSSI-AT). *Psychological Assessment, 26*, 935-946. doi:10.1037/a0036611.
- ¹⁶ Osman, A., Bagge, C. L., Gutierrez, P. M., Konick, L. C., Kopper, B. A., & Barrios, F. X. (2001). The Suicidal Behaviors Questionnaire—Revised (SBQ-R): Validation with clinical and nonclinical samples. *Assessment, 8*(4), 443-454. doi:10.1177/107319110100800409
- ¹⁷ Elhai, J. D., Schweinle, W., & Anderson, S. M. (2008). Reliability and validity of the Attitudes Toward Seeking Professional Psychological Help Scale-Short Form. *Psychiatry Research, 159*(3), 320-329. doi:10.1016/j.psychres.2007.04.020
- ¹⁸ Wilson, C. J., Deane, F. P., Ciarrochi, J., & Rickwood, D. (2005). Measuring help-seeking intentions: Properties of the General Help Seeking Questionnaire. *Canadian Journal of Counselling, 39*(1), 15-28.