**The CPTI network  
  
List of recommended concepts to be measured alongside the CPTI  
  
Last updated November 27, 2013**

**Data collections on children 3-12 years old are of priority. Preschool teacher/teacher/kindergarden staff ratings are important. The CPTI is a teacher-rated instrument in the first place. However, it is interesting to also empirically test the CPTI using parent ratings. To use multiple informants and test modules to collect data is considered a strength. Longitudinal studies are important but not always possible. Below we list a number of concepts that we believe are important to measure alongside the CPTI. Of course, not all measures are necessary or possible to be included in the same data collection. If you want concrete ideas and suggestions of which instruments/scales to include, please contact the CPTI steering group (see** [**www.oru.se/jps/cpti**](http://www.oru.se/jps/cpti)**). In the planning of your data collection, please feel free to share your plans of concepts to measure with the steering group and the network! Collaborations in the design of the study may lead to interesting cross-cultural comparisons.   
  
Temperament**  
Fearlessness/Emotional reactiveness to aversive stimuli, Easy/Difficult temperament.  
  
**Self-regulation**  
Ability to inhibit emotionally driven behaviors (e.g., to inhibit and angry outburst).  
  
**Executive functioning**  
Attention, Inhibition, Working memory, Other prefrontal cortex focused dimensions.  
  
**Social information processing**  
Social attributions, Emotional recognition in others, Social decision making.  
  
**Personality**  
Big five dimensions, Psychopathic personality traits (measured in other ways than via the CPTI).  
  
**Internalizing problems**  
Anxiety (preferably measuring both state and trait anxiety)  
Depressive symptoms  
  
**Aggression**  
Proactive, Reactive.  
  
**Externalizing behavioral problems**Conduct problems/Conduct Disorder symptoms (preferably close to or identical to DSM 5 criteria of CD).  
Oppositional Defiant Disorder symptoms (preferably close to or identical to DSM 5 criteria of ODD).  
  
**Parents**  
SES of parents, Where parents were born, Depressive symptoms of parents, Stress of parents, Substance use of parents, Criminality of parents.  
**Parenting**  
Parent-child relations: Parental rejection, Parental Warmth, Parental Engagement, Child to care-give attachment.  
Parenting strategies: Punitiveness/Harschness, Consistency, Responsiveness, Scuffolding, Reward orientation.  
  
**Social relations**  
Relations to peers, parents, teachers, others, etc.  
  
**School**  
School attachment, School performance.  
  
**Negative life events**  
E.g., Divorce, Death/sickness of close relative, Economic crisis, Moving away, Trauma/Violence of the child, Witnessing of violence.