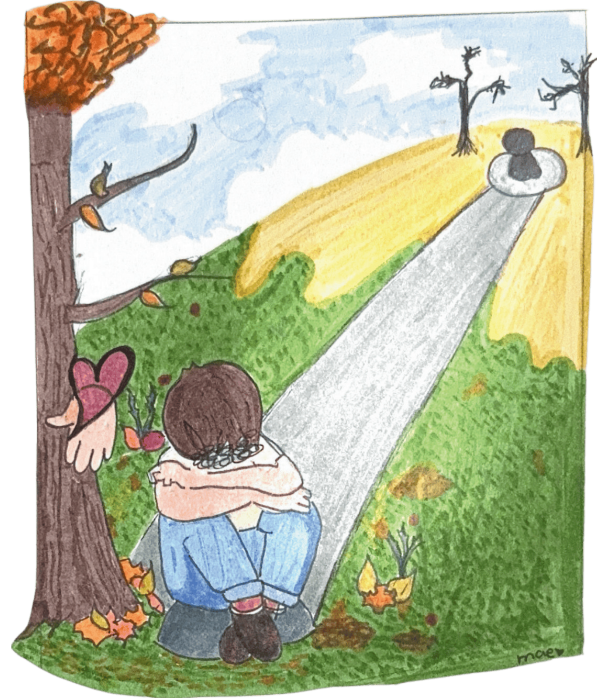


# Post Traumatic Stress Disorder in Children

**By Bella Chang**

Post-traumatic stress disorder (PTSD) is a mental health condition that can develop in those who have experienced or witnessed a traumatic event, leading to a range of adverse symptoms such as flashbacks, nightmares, severe anxiety, and uncontrollable thoughts about the event (Loeb et al., 2011). Hence, this can lead to inference on the individual's quality of life, in areas such as relationships and work. The DSM-5-TR is a manual used to diagnose and classify mental disorders based on various criteria associated with each disorder. Traumatic events include war, accidents, and abuse, along with others that involve threatening acts of violence (Loeb et al., 2011). Experiencing these in early childhood can interfere with normal growth and functioning of the brain and other maturing organs (Kerbage et al., 2022), therefore leaving children more vulnerable to psychological damage and likely to develop intense negative physical and emotional responses that can persist and impact their daily lives in



**Art by Maria Delgado**

adulthood. The chances of experiencing adverse childhood experiences are extremely high. Children are significantly more likely to develop PTSD than adults, with the same exposure to trauma, 57% of adults developed PTSD, while 77% of children also received the diagnosis (Robinson, 2017). One of the most prevalent incidents would be sexual abuse; defined as sexual touching, without force by those five

or more years older than the child. A study by McLEER et al., (1992) conducted on child victims showed 53.8% of children abused by their fathers, and 42.4% abused by trusted adults met the DSM-5-TR criteria for PTSD. Furthermore 86.5% of victims met practical criteria for PTSD such as avoidant behaviors and physiological symptoms of sweating, lightheadedness associated with anxiety and fear (McLEER et al., 1992). It was also found that children who cannot protect themselves or lack protection from others dramatically increase their chances of developing PTSD, therefore there needs to be further research on risk factors for the development and persistence of PTSD.

Children who experience extreme traumatic events tend to have the highest PTSD symptoms than adults due to their developing brains. A study by Schoedl et al., (2013) focusing on early-life experience of interpersonal violence showed that those with PTSD had higher severe symptoms, worse social adjustment and quality of life during adulthood. Furthermore, research by Loeb et al., (2011) showed that early trauma interferes with infants' sleep, feeding patterns,

and forming secure attachments with others, therefore limiting their ability to cope with overwhelming emotions and physical symptoms associated with trauma. Due to these factors, the study revealed that the DSM-5-TR criteria focuses on adult diagnosis that relies on verbal and cognitive capacities such as memory and emotional processing. As a result, the manual is not sufficient to identify PTSD in children. Therefore, diagnosis can be more based on behavioral observation, such as aggression and fear.

Childhood traumatic events increase the risk of physical and mental health issues in adulthood. Zlotnick et al. (2008) found that childhood trauma from interpersonal interactions was significantly associated with PTSD in adulthood and was more likely to be linked to panic disorder, agoraphobia, and other psychiatric disorders than adult onset. Another study by Baker et al. (2009) showed the high prevalence of PTSD, with a reported 35% of participants experiencing childhood trauma, and how different trauma types link to varying symptoms in men and women. For example, sexual violence led to women's gallbladder

muscular-skeletal and gastrointestinal problems, whereas men experienced all signs on the 20-item measure of physical health symptoms. The study's results can be generalized to larger populations, although the participants were from Mexico. Therefore, further research should contribute to more effective intervention strategies and prevention efforts are crucial to treat trauma survivors and reduce exposure to trauma.

Childhood trauma may not be completely preventable; however, society can reduce the risk of traumatic events. As parents and caregivers are likely to cause interpersonal trauma, education can provide safe and nurturing environments and treat mental health issues that could lead to abusive behaviors. Furthermore, there should be more suitable child education on coping skills and promoting community-based support programs for families (Kerbage et al., 2022). To accurately diagnose children with PTSD, alternative methods that focus on behaviors should be used, such as clinical interviews, behavioral symptom assessment, observation, or collateral information from other sources (Kerbage et al., 2022).

Society should emphasize prevention and treatment methods for children, as it is essential to promote healthy development going into adulthood to prevent negative outcomes. Furthermore, providing young people with resources can avoid the transmission of trauma from one generation to the next.

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