



# Trauma

## Brief Facts and Tips

- 1. Trauma is a serious problem.** Nearly 35 million children have experienced at least one event that could lead to childhood trauma (Child and Adolescent, 2012). About 72% of children and youth in the United States will have experienced at least one stressful event (e.g., witnessing or being a victim of violence; experiencing sexual, physical, or emotional abuse; suffering a serious injury or medical condition; death of a parent or sibling) before the age of 18 (Deryck, Silver, & Prause, 2014).
- 2. Trauma can have a lasting impact.** Childhood trauma can increase the risk for psychological, behavioral or emotional problems (depression or PTSD), substance abuse, low occupational attainment or academic failure, social maladjustment and poor medical health.
- 3. There are several types of trauma including:**
  - Community, domestic, and school violence
  - Physical and sexual abuse
  - Neglect
  - Complex trauma (multiple traumatic events and severe impact)
  - Early childhood trauma (any traumatic event experienced by children aged 0-6)
  - Medical trauma
  - Natural disasters
  - Terrorism, refugee and war zone trauma
  - Traumatic loss
- 4. If a child perceives the event as threatening, there is an increased likelihood that the child will be traumatized.** These threat perceptions are influenced by (1) the nature of the crisis event itself, (2) crisis exposure, (3) relationships with crisis victims, (4) adult reactions to the trauma, and (5) a variety of individual/personal vulnerability factors.
- 5. Trauma Risk Factors.** Certain characteristics are associated with an increased likelihood of experiencing a traumatic event, such as:
  - Proximity to a traumatic event
  - Past exposure to trauma
  - Current or past mental health problems or the presence of a disability
  - Parental substance abuse or mental illness

- Limited social support or isolation
  - Family stress
  - Loss or fear the loss of a loved one
  - Community characteristics
  - Developmental level
  - Poverty level
6. **Common Reactions to Trauma:** Shock or disbelief, fear, sadness, guilt/shame, grief, confusion, pessimism, or anger. *In most cases these reactions are temporary and lessen over time.*
7. **Warning Signs.** If any of the following symptoms do not decrease over time, if they severely impact the child's ability to participate in normal activities, or if significant changes are noted, a referral to a mental health professional may be necessary.
- Disruption or withdrawal from peer relationships
  - General lack of energy or lack of interest in previously enjoyed activities.
  - Strained family relationships (increased misbehavior, lashing out against family members, refusal to participate in normal family routines).
  - Decline in school performance, school avoidance, or difficulty concentrating
  - Physical complaints with no apparent cause
  - Maladaptive coping (drug or alcohol use, severe aggression)
  - Repeated nightmares and reporting strong fears of death, violence, etc.
  - Repetitive play re-enacting the traumatic events
  - Low self esteem, negative talk about self (if this was not apparent prior to the trauma)
  - Sleeping (difficulty falling or staying asleep) and eating disturbances
  - Increased arousal (easily startling or quick to anger), agitation, irritability, aggressiveness
  - Regression in behavior (thumb sucking, bedwetting, clinginess, fear of the dark)
8. **Schools have an important role in decreasing the impact of a traumatic event on a child.** Children spend the majority of their day in school where caring adults are available to help them. Educators can help children by providing the structure of a usual routine, providing a safe place to share concerns, being sensitive to cues in the environment that may trigger a traumatic response, and providing additional supports.
9. **There is help available.** There are crisis hotlines for a wide range of traumatic events, such as child abuse and domestic violence. In addition, there are a number of interventions specifically designed to address trauma related symptoms.
- **Child Sexual Abuse:** 1-888-PREVENT (1-888-773-8368)
  - **Crime Victims:** 1-800-FYI-CALL (1-800-394-2255)
  - **Domestic Violence:** 1-800-799-SAFE (1-800-799-7233)
  - **Runaway and Homeless Youth:** 1-800-RUNAWAY (1-800-786-2929)
  - **Suicide Prevention:** 1-800-273-TALK (1-800-273-8255)

## References:

Child and Adolescent Health Measurement Initiative. (2011/12). *National survey of children's health*. [Data Query]. Retrieved from [www.childhealthdata.org/ browse/survey?q=2257&r=1](http://www.childhealthdata.org/browse/survey?q=2257&r=1)

Deryck, F., Silver, R. C., & Prause, J. (2014). *Examining adversity in the lives of adolescents: An analysis of a nationally representative sample*. Unpublished research memorandum.

## Suggested Resources:

- [The National Child Traumatic Stress Network](#)
- [Helpguide.org](#)
- [Adverse Childhood Experiences \(ACE\) Study](#)
- [National Center for PTSD](#)

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