



## Generally-Accepted Truths: The Psychological Effects of Trauma on Children

Children's response to stressful situations is often less intense than might be anticipated.

The child's psychological response to trauma varies with age and cognitive development.

There is a commonality of psychological responses to trauma regardless of the specific trauma exposure.

Exposure to a traumatic stressor may occur through direct and immediate physical impact, witnessing the event on-scene, media exposure or interpersonal connectedness to disaster victims.

Combined forms of exposure increase risks for psychological consequences.

Repetitive exposure to a "distant" trauma such as television and media viewing increases children's risks for posttraumatic stress symptoms.

Exposure to human-generated trauma and disaster is associated with increased risk for psychological impairment and illness compared with exposure to natural disasters.

An "acute trauma" refers to a traumatic event that is circumscribed in time and space. A "chronic trauma" refers to a traumatic situation in which there is continuing and unrelenting exposure to an inventory of primary and secondary stressors.

A disaster or extreme event may set in motion a cascade of secondary stressors—ongoing hardships and adversities—that effectively transduce an acute ("event") trauma into a chronic ("process") trauma.

Complex trauma refers to the exposure to violence that begins in childhood and is repeated throughout the developmental years. The consequences of complex trauma exposure include difficulties with emotional control, mood instability, interpersonal and social difficulties and diminished self-efficacy. These consequences increase the child's vulnerability to future trauma.

Trauma impacts not just the individual child but also the family and social system within which the child lives.

The family environment, the parent's level of function and the parent's symptoms predict the possible expression of posttraumatic stress symptoms in children.

The child's subjective experience of the traumatic situation at the time of exposure is a powerful predictor of the child's psychological outcome.

Previous trauma exposure increases vulnerability to subsequent trauma exposure.

Being physically injured, or having a family member injured or killed, increases the risk of posttraumatic stress symptoms for both children and adults.

The psychological response to a traumatic situation may be delayed ("sleeper effect") and may increase over time.

Traumatic reminders are internal and external triggers that suddenly bring the traumatic event back into awareness with all its emotional, perceptual and ideational content; creating an ongoing risk for psychological distress.

War is characterized by chronic and enduring exposure to trauma-related events for children and families. The greater the dose and intensity of war-related trauma exposure, the greater is the likelihood of psychological symptoms.

The psychological effects of earlier trauma exposure in childhood add to the child's current psychological/psychiatric syndromes.

Cognitive behavioral intervention techniques have the greatest empirical evidence regarding efficacy for treating posttraumatic stress symptoms for persons exposed to trauma and disaster.

The existence of community solidarity and social cohesion before and after disaster favorably affects the course of posttraumatic stress symptoms.