

POSTTRAUMATIC STRESS DISORDER (PTSD) FACT SHEET

- POSTTRAUMATIC STRESS DISORDER (PTSD) is an anxiety disorder that some children and adolescents develop after experiencing or seeing a frightening or dangerous event (e.g., violence, natural disaster, accident, abuse, etc.) that overwhelms their ability to cope.
- Between 5% and 63% of children exposed to a traumatic event will develop PTSD.
- PTSD symptoms vary by age and can affect all areas of a child’s life including home, school, work and social life.

Clinical Symptoms

SYMPTOM	WHAT DOES A PARENT/CAREGIVER SEE?
Re-experiencing	<ul style="list-style-type: none"> • Flashbacks (reliving the trauma as if it is happening again) • Bad dreams/nightmares • Frightening thoughts • Acting out the scary event during play
Avoidance	<ul style="list-style-type: none"> • Refusing to go places, do things, or see things that remind them of the experience • Not wanting to talk or think about the experience
Hyperarousal	<ul style="list-style-type: none"> • Easily startled • Feeling tense, irritable or “on edge” • Difficulty sleeping • Angry outbursts or destructive behavior
Mood/cognition	<ul style="list-style-type: none"> • Distorted feelings like guilt or blame • Loss of interest in previously enjoyable activities • Trouble remembering important aspects of the traumatic event • Negative thoughts about oneself or the world

Evidence-Based Practices

Evidence-based practices are treatments that have been shown through clinical research to produce positive outcomes for children and their families.

Treatment Approaches

The following are the best-supported treatment approaches for treating PTSD in children and adolescents:

- Cognitive Behavior Therapy
- Cognitive Behavior Therapy with Parents
- Eye Movement Desensitization and Reprocessing (EMDR)

Treatment Practices

The following are the best-supported treatment practices for treating PTSD in children and adolescents:

- **Cognitive Processing:** Cognitive processing is used to teach children about how the way they think about things can affect how they feel, and how they feel can affect how they behave. Cognitive methods might be used to help children understand how their thoughts are related to their moods and behaviors. They are taught strategies to help them check the accuracy of their thoughts and replace negative or unhelpful thoughts with more positive or helpful thoughts.
- **Exposure:** Children exposed to traumatic events might develop ongoing physical and psychological symptoms. Exposure is a technique that helps the child overcome distressing thoughts and feelings related to their experiences. A therapist usually starts with indirect ways to help the child stay calm while thinking about a distressing topic. This might include practicing relaxation while talking about the trauma. Exposure for treating trauma is different than for other anxiety disorders because the goal is to expose the child to memories, situations, or activities they are avoiding, but not to the actual traumatic event itself.
- **Psychoeducation:** Psychoeducation is teaching children and their caretakers about their mental illness. The purpose is to help children and their families understand how the illness affects them, what kind of activities or treatment might help, and that there are others who have similar problems. This type of education helps them understand what will happen in the treatment sessions and how long the treatment might take. They will also learn what role the parent, the therapist, and the child will play in the treatment, and that they will be a team that will work on problems together. Psychoeducation for trauma might include safety planning and education about appropriate physical boundaries, depending on the type of trauma experienced.
- **Relaxation:** Ongoing anxiety or stress can make children irritable and can interfere with concentration. Relaxation methods help children reduce stress. These exercises include muscle relaxation, breathing exercises, imagery, meditation, and similar activities. Some methods are meant to be used away from daily activities. Others are useful in the moment.
- **Narrative:** This strategy involves the development and review of a narrative or story about one's life events in a safe, calm, reassuring context that promotes gradually increasing depth of processing,

prompted coping, and construction of meaning about the events. This should always be done with the assistance of a mental health professional. When treating trauma, the narrative also acts as a type of exposure.

- **Maintenance/Relapse Prevention:** Maintenance/relapse prevention includes exercises and training designed to consolidate skills the child has already developed and to anticipate future challenges that might arise after the termination or reduction of therapeutic services. The overall goal of maintenance/relapse prevention is to minimize the chance that the gains made during the course of treatment will be lost in the future.
- **Personal Safety Skills:** Personal safety skills training teaches the youth how to maintain personal safety. This can include education about attending to one's sense of danger, body ownership issues (e.g., "good touch-bad touch"), risks involved with keeping secrets, how to ask for help when feeling unsafe, and identification of other high-risk situations.