

Sexually abused children at higher risk for subtype of PTSD

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By Lisa Owens Viani/San Francisco State University

Young children who experience traumatic events such as physical or verbal abuse, family violence, or loss of a parent or family member may suffer from post-traumatic stress disorder (PTSD) with dissociative features (PTSD-DISS). A new study published online in the *Journal of Affective Disorders* [1] on November 14, 2017, by UC San Francisco faculty members Melissa Hagan, PhD [2] (lead author), and Alicia Lieberman, PhD [3] (senior author), examines the factors that predict that diagnosis. The condition was added to the American Psychiatric Association's diagnostic manual in 2013 on the basis of extensive studies of adults, but until recently, not much was known about this symptom pattern in young children, according to Hagan.

PTSD-DISS includes symptoms of dissociation such as lack of awareness, being in a daze and/or staring into space, along with classic PTSD symptoms such as re-experiencing the traumatic event, shutting off feelings, avoiding thinking about the trauma or becoming agitated.



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The team studied 297 children between the ages of three and six. They found that girls who have experienced trauma and both boys and girls who are victims of sexual abuse are at greater risk of PTSD-DISS. They also found that when a child's parent avoided dealing with their own trauma (whether related to the child's or not), the likelihood of the child having PTSD-DISS was greater.

"Young children rely on their primary caregiver to help them make sense of traumatic experiences," said Hagan. "When the caregiver avoids their own trauma or their child's, it can interfere with the child's ability to adaptively respond to the trauma."

Hagan, who is also an assistant professor of psychology at San Francisco State University, explains that for a young child, a traumatic event is not just about harm or fear of harm to themselves and their bodies but also fear of harm — whether physical or psychological — to anyone who is close to them, especially their primary caregiver. The preschool-aged children who participated in the study, which was conducted at the UCSF Child Trauma Research Program, had already experienced five to six traumatic events on average.

"So we're talking about chronic stress and trauma," Hagan elaborated.

In addition to shutting down or avoiding thinking about the trauma, children with PTSD-DISS may also become very forgetful, even of significant events or dates.

"Dissociation cuts across memory and thinking and feeling where those things don't act together the way they do naturally, and so you find the child shutting down," Hagan said.

Understanding PTSD-DISS in children is important because they may need different types of treatment than adults.

"How you engage and help the parent support the child is going to need to be informed by the fact that the child is approaching the world differently. Knowing the specific pattern of symptoms in a child allows you to tailor not only the content of the therapy but also how the therapy is delivered to that specific child," explained Hagan.

In a separate study published online November 13, 2017, in the *Journal of Traumatic Stress* ^[4], researchers studied the effectiveness of child-parent psychotherapy on 199 families experiencing some form of trauma, discovering that when parents dealt with their own history of trauma (whether related to the child's trauma or not), both children and parents improved substantially.

"If the parents improved more, the children improved more," said Hagan. "Parents are the lens through which the child views the world. Child mental health is really parent mental health. So it's very important to support parents, and I don't think we do that enough as a society."

Other authors on the first study, "PTSD with and without dissociation in young children exposed to interpersonal trauma," are Chandra Ghosh Ippen, PhD ^[5], of UCSF, and Miya

Gentry of San Francisco State University.

Additional authors of the second study, "Parent and child trauma symptoms during child-parent psychotherapy: a prospective cohort study of dyadic change," include Lieberman, Ippen, Dillon Browne, PhD [6], and Nicki Bush, PhD [7], of UCSF; and Michael Sulik, PhD, of Stanford University.

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