What is Child Trauma and Child Traumatic Stress?

Child traumatic stress occurs when children and adolescents are exposed to traumatic events and this exposure overwhelms their ability to cope with what they have experienced.

Prior to age 16, two-thirds of children in the U.S. are exposed to a traumatic event, such as:

- physical or sexual abuse
- natural disasters or terrorism
- family or community violence
- sudden or violent loss of a loved one
- refugee and war experiences
- serious accidents or life-threatening illness
- military family-related stressors (e.g., deployment, parental loss or injury)

Not all children experience child traumatic stress after experiencing a traumatic event. With support, many children are able to adapt to and overcome such experiences.

What are the Consequences of Child Trauma?

Children who are exposed to traumatic events may experience a wide variety of consequences that can include intense and ongoing emotional distress, grief, challenging behavioral changes, difficulties with attention, academic failure, nightmares, or illness. For some children, these reactions interfere with daily life and their ability to function and interact with others. These reactions sometimes develop into psychiatric disorders, including posttraumatic stress disorder (PTSD), anxiety, and depression. Traumatic experiences can also worsen preexisting mental health problems and disrupt children’s ability to form positive relationships and to handle emotions and behavior.

Repeated childhood exposure to traumatic events can affect the brain and nervous system and increase health-risk behaviors (e.g., smoking, eating disorders, substance use, and high-risk sexual behaviors leading to teen pregnancy and sexually transmitted infections). Research shows that child trauma survivors are more likely to have long term health problems (e.g., diabetes and heart disease) or to die at an earlier age. Traumatic stress can also lead to increased use of health and mental health services and increased involvement with the child welfare and juvenile justice systems. Adult survivors of traumatic events may have difficulty in establishing fulfilling relationships, maintaining employment, and becoming productive members of society.

Untreated child traumatic stress contributes to many of the most pressing problems that individuals and communities face, including poverty, crime, low academic achievement, addiction, mental health problems, and poor health outcomes. The cost of these problems is felt not only in human terms, but also in dollars and cents, affecting future generations as well. As an example, the Centers for Disease Control and Prevention recently reported that the total lifetime estimated cost associated with just one year of confirmed cases of child maltreatment alone is approximately $124 billion.

What Can Be Done To Address the Problem?

Fortunately, there are evidence-based treatments and services that are highly effective for child traumatic stress. However, many children and families face barriers in receiving appropriate mental health care. Improving access to effective evidence-based treatments for children who experience traumatic stress can reduce suffering and decrease the costs of health care.
The National Child Traumatic Stress Network

The National Child Traumatic Stress Network (NCTSN) was created by Congress in 2000 as part of the Children’s Health Act to raise the standard of care and increase access to services for children and families who experience or witness traumatic events. This unique network of frontline providers, family members, researchers, and national partners is committed to changing the course of children’s lives by improving their care and moving scientific gains quickly into practice across the U.S. The NCTSN is administered by the Substance Abuse and Mental Health Services Administration (SAMHSA) and coordinated by the UCLA-Duke University National Center for Child Traumatic Stress (NCCTS), which guides NCTSN collaborative efforts.

The NCTSN has grown from 17 funded centers in 2001 to 79 currently funded centers and over 100 affiliate (formerly funded) centers and individuals, working in hospitals, universities, and community based programs in 43 states. These grantees and affiliates work to accomplish the NCTSN mission by:

- providing clinical services
- developing and disseminating new interventions and resource materials
- offering education and training programs
- collaborating with established systems of care
- engaging in data collection and evaluation
- informing public policy and awareness efforts

The national impact of the NCTSN is well documented. During the past several years, quarterly estimates from the NCTSN Brief Services Utilization Report indicate that more than 40,000 individuals – children, adolescents and their families – directly benefited from services through this network. Since its inception, the NCTSN has trained almost one million professionals in trauma-informed interventions. Hundreds of thousands more are benefitting from the other community services, website resources, webinars, educational products, community programs, and more. Over 10,000 local and state partnerships have been established by NCTSN members in their work to integrate trauma-informed services into all child-serving systems, such as: child protective services, health and mental health programs, child welfare, education, residential care, juvenile justice, courts, and programs serving military families.

As part of its mission, the NCTSN immediately mobilizes in the aftermath of national crises, including the terrorist attacks in 2001, Hurricanes Katrina, Rita, and Sandy, and school shootings such as those at Virginia Tech and Sandy Hook Elementary School. In this role, the NCTSN deploys staff, provides direct services and training where needed, and disseminates resources locally and throughout the country, supporting the coordinated interagency federal response.

The continued work of the NCTSN supports the further development of treatment and services to prevent mental health problems among children and families who have experienced trauma and reduce its impact on adult health and productivity. Sustained support for the NCTSN would allow millions more children and families to benefit from the improvements in evidence-based treatment, the expansion of educational opportunities, the development of community and national collaborative partnerships, and the widespread dissemination of public awareness resources.

The NCTSN’s website provides a range of resources for professionals and the public about child traumatic stress, including products, fact sheets, training opportunities, and access to the latest research and resources. For more information about child traumatic stress and the NCTSN, visit www.nctsn.org or e-mail the NCTSN Policy Program at policy@nctsn.org.