What is traumatic stress?

By the time most children enter the foster care system they have already been exposed to a wide range of painful and distressing experiences. Although all of these experiences are stressful, **experiences are considered traumatic when they threaten the life, well being, or physical wholeness of the child or of someone critically important to the child (such as a parent or sibling)**. Traumatic stress characteristically produces intense physical and emotional reactions, including:

- A primal fight, flight, or freeze response
- An overwhelming sense of terror, helplessness, and horror
- Physical sensations such as rapid heart rate, trembling, dizziness, or loss of bladder or bowel control

Not every distressing event automatically results in traumatic stress. Something that is traumatic for one child may not be traumatic for another. The actual impact of a potentially traumatic event depends on several factors:

- The child’s age and developmental stage
- The child’s perception of the danger faced
- Whether the child was the victim or a witness
- The child’s relationship to the victim or perpetrator
- The child’s past experience with trauma
- The adversities the child faces in the aftermath of the trauma
- The presence/availability of adults who can offer help and protection

In general, **children who have been exposed to repeated stressful events within an environment of abuse and neglect are more vulnerable to experiencing traumatic stress.**

**Types of Traumatic Stress: Acute Trauma**

A single traumatic event that is limited in time is called an **acute trauma**. A natural disaster, dog bite, or motor vehicle accident are all examples of acute traumas. Over the course of even a brief event, a child may go through a variety of complicated sensations, thoughts, feelings, and physical responses that change from moment-to-moment as the child appraises and reappraises the danger faced and the prospects of safety. As the traumatic
event unfolds, the child’s pounding heart, out-of-control emotions, loss of bladder control, and other physical reactions are frightening in themselves and contribute to his/her sense of being overwhelmed. After going through an acute trauma, a child may experience:

- Nervousness, jumpiness, and a sense of being on edge
- Difficulty sleeping, nightmares, or night terrors
- Intrusive repeated thoughts, images, and sensations of what happened
- Secret fantasies and wishes about how it could have been different
- Anger or aggression
- Difficulty concentrating or paying attention in school
- Play that recreates the whole event or some moments in it
- A feeling of being numb
- Withdrawal from ordinary activities and relationships
- Feelings of isolation and of having been made different from others by the experience
- Strong reactions to any person, place, thing, situation, or feeling that remind the child of the traumatic event

**Types of Traumatic Stress: Chronic Trauma**

When a child has experienced multiple traumatic events, the term *chronic trauma* is used. Chronic trauma may refer to multiple and varied events—such as a child who is exposed to domestic violence, is involved in a serious car accident, and then becomes a victim of community violence—or longstanding trauma such as physical abuse or war.

Chronic trauma may result in any or all of the symptoms of acute trauma, but these problems may be more severe and more long lasting. The effects of trauma are often cumulative, as each event serves to remind the child of prior trauma and reinforce its negative impact. A child exposed to a series of traumas may become more overwhelmed by each subsequent event and more convinced that the world is not a safe place. Over time, a child who has felt overwhelmed over and over again may become more sensitive and less able to tolerate ordinary everyday stress.

**Types of Traumatic Stress: Complex Trauma**

“Complex trauma” is a term used by some experts to describe both exposure to chronic trauma—usually caused by adults entrusted with the child’s care, such as parents or caregivers—and the long-term impact of such exposure on the child. Children who experienced complex trauma have endured multiple interpersonal traumatic events (such as physical or sexual abuse, profound neglect, or community violence) from a very young age
When trauma is associated with the failure of those who should be protecting and nurturing the child, it has profound and far-reaching effects on nearly every aspect of a child’s development and functioning. Children who have experienced complex trauma have had to cope with chronically overwhelming and unmanageable stresses almost entirely on their own. As a result, these children often:

- Have extreme difficulty regulating their feelings and emotions
- Believe they are unlovable and that others will not respond to their needs
- Have difficulty forming trusting relationships
- Have difficulty describing their feelings because no adult has ever helped them understand and find words for their experiences
- Have problems forming coherent memories and may experience a sense of dissociation—as if they are in a dream or outside their own bodies—when under stress
- Lack a fixed sense of who they are or where they fit in the world

**Neglect and Trauma**

Neglect is defined as the failure to provide for a child’s basic physical, medical, educational, and emotional needs. Whereas physical and sexual abuses involve clear “acts of commission,” neglect results from “omissions” in care, making it more difficult to measure. It is important to understand that an infant or very young child, left alone in a crib, without predictable loving attention, in a wet diaper, and suffering from the pain of hunger, cannot recognize the difference between acts of “omission” vs. “commission.” Abandonment feels like an acute threat to survival.

Neglect can have broad and significantly negative effects on all aspects of a child’s development. Its effects may resemble those of complex trauma, and it may be difficult to differentiate the effects of neglect from those of abuse, since neglect often occurs in the context of other maltreatment.

**Transcending Trauma: The Role of Resource Parents**

Regardless of the child’s age or the types of trauma experienced, healing is possible. With nurture and support, children who have been through trauma can regain trust, confidence, and hope.

Resource parents are critical in helping children in their care overcome the emotional and behavioral effects of child traumatic stress. By creating a structured, predictable environment, listening to the child’s story at the child’s pace, and working with professionals trained in trauma and its treatment, resource parents can make all the difference.

For more information on the impact of trauma on children, visit the National Child Traumatic Stress Network (NCTSN) at [www.nctsn.org](http://www.nctsn.org).