



Understanding Child Trauma

What is Child Trauma and Child Traumatic Stress?

A traumatic event is a frightening, dangerous, or violent event that poses a threat to a child's life or bodily integrity. Witnessing a traumatic event that threatens life or physical security of a loved one can also be traumatic. 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. Children who suffer from child traumatic stress are those who have been exposed to one or more traumas over the course of their lives and develop reactions that persist and affect their daily lives after the events have ended.

Prior to age 16, two-thirds of children in the US are exposed to a traumatic event¹, such as:

- Physical, sexual, or psychological abuse and neglect (including trafficking)
- Natural and technological disasters
- Family or community violence
- Terrorism, mass violence, and school shootings
- Discrimination, prejudice, and racism
- Sudden or violent loss of a loved one
- Substance use disorder (personal or familial)
- Traumatic separation (including as part of an immigration journey or incarceration)
- Refugee and war experiences (including torture)
- Serious accidents or life-threatening illness
- Military family-related stressors (e.g., deployment, parental loss or injury)

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 and behavioral problems, difficulties with attention, academic failure, problems with sleep, 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 serious mental illnesses, including posttraumatic stress disorder (PTSD), anxiety, and depression. Exposure to traumatic experiences can also worsen preexisting mental health problems and disrupt children's ability to form positive relationships and handle emotions and behavior.

Without treatment, 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 activities). Research shows that child trauma survivors can be 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 also have difficulty in establishing fulfilling relationships, and maintaining employment.

Untreated child traumatic stress can also contribute to many of the most pressing problems that individuals, families, 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 across generations, but also in dollars and cents. 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 billion².

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. As the leading federal initiative focused on child trauma in the US, the National Child Traumatic Stress Network (NCTSN) has made great strides in raising the standard of care for children and families. (See page 2 for more details).

¹ Copeland, W.E., Keeler, G., Angold, A., & Costello, E.J. (2007). Traumatic events and posttraumatic stress in childhood. *Archives of General Psychiatry*, 64, 577-584.

² Fang, X., Brown, D. S., Florence, C. S., & Mercy, J. A. (2012). The economic burden of child maltreatment in the United States and implications for prevention. *Child Abuse and Neglect*, 2, 156-65.



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 US. 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).

The NCTSN has grown from 17 funded centers in 2001 to 208 currently funded centers and over 200 Affiliates (formerly funded) centers and individuals in 2024, working in hospitals, universities, and community-based programs in 46 states, the District of Columbia, Puerto Rico, and Guam. To accomplish the NCTSN mission, grantees, and affiliates work to:

- provide clinical services
- develop and disseminate new interventions and resource materials
- offer education and training programs
- collaborate with established systems of care
- engage in data collection and evaluation
- inform public policy and awareness efforts

The national impact of the NCTSN is well documented. In recent years, estimates from the NCTSN Collaborative Change Project (CoCap) Report indicate that each quarter about 50,000 individuals – children, adolescents and their families – directly benefited from services through this network. Since its inception, the NCTSN has trained more than two 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 on September 11 2001; Hurricanes Katrina, Sandy, Harvey, and Maria; and school shootings such as those at Sandy Hook Elementary School and Robb Elementary School in Uvalde. 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 and dissemination 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 of additional 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 website provides a range of resources for professionals, policy makers, the media, and the public about child traumatic stress, including treatment guidelines, fact sheets, training materials, and access to the latest research information. For more information about child traumatic stress and the NCTSN, visit www.nctsn.org or <https://learn.nctsn.org>; for questions, email info@nctsn.org.

Suggested Citation:

Elmore, D., Snyder, E., & Gerrity, E. (2023). *Understanding Child Trauma and The National Child Traumatic Stress Network*. Los Angeles, CA and Durham, NC: National Center for Child Traumatic Stress.