

## ABSTRACT

Post-traumatic stress disorder (PTSD) can affect anyone, regardless of age, gender, ethnicity, or culture, after experiencing a traumatic event. Symptoms vary in intensity and can impact mental, physical, social, and spiritual well-being (American Psychiatric Association, 2013). People with PTSD may relive the trauma through dreams or flashbacks. Children and adolescents can develop severe risk factors from PTSD, especially after experiencing sexual abuse. This review will discuss these risk factors, explore intervention and treatment approaches, and analyze how delayed diagnosis and misdiagnosis can impact the risk factors associated with youth PTSD.

## INTRODUCTION

### Historical Evolution of PTSD:

- Originated as "shell shock" in WWI
- Later termed "combat fatigue" until DSM-III in 1980 (Crocq, 2000)
- Recognized beyond veterans as a widespread issue

### Prevalence & Demographics:

- 3.5% of U.S. adults are diagnosed with PTSD
- Adolescents diagnosed at a higher rate of 8% (American Psychiatric Association, 2013)
- Youth under 18 are vulnerable to various traumatic events

### Vulnerability of Youth:

- Inexperience & dependence make youth susceptible
- Lack of coping tools contributes to PTSD development
- Early intervention is crucial for better recovery chances

### Association with Other Disorders:

- PTSD linked to acute stress disorder
- Symptoms vary in form and severity, usually developing within three months

### Categorization of Symptoms:

- Four groups: intrusion, avoidance, alterations in cognition & mood, alterations in arousal and reactivity (American Psychiatric Association, 2013)
- All categories must be present for diagnosis

### Mental Health Consequences:

- PTSD severely impacts well-being
- Youth face depression, suicide attempts, substance abuse, and lower academic achievement (Herringa, 2017)

### Neurological Impact:

- PTSD can affect neurodevelopment in youth
- Poses a potential for long-term consequences



## Results

### PTSD Diagnosis Criteria:

- Arises from traumatic events like accidents, abuse, or violence
- DSM-5 outlines four symptom categories: intrusion, avoidance, cognitive & mood alterations, and arousal and reactivity alterations
- Criteria require at least one intrusive and one avoidance symptom, plus two cognitive and arousal symptoms (Hansen et al., 2023)
- Symptoms persist for a minimum of one month, significantly interfering with daily life

### Symptom Categories:

- Intrusion:**
  - Involuntary adverse thoughts, feelings, or flashbacks.
  - Physical symptoms like increased heart rate and sweating
- Avoidance:**
  - Avoiding people, places, or activities.
  - Disassociation to evade thoughts and feelings related to trauma
- Cognitive Changes:**
  - Distorted thoughts or beliefs.
  - Alterations in memory or perception, often leading to negative self-feelings
- Arousal and Reactivity:**
  - Heightened arousal leads to irritability, risky behavior, anger, hyper-vigilance, or difficulty focusing

### Youth PTSD Overview:

- PTSD in youth results from events like abuse, neglect, and violence
- Females show higher diagnosed rates than males (National, 2023)
- Unique manifestations of post-traumatic stress may necessitate distinct criteria

### Factors Impacting PTSD Symptoms:

- Traumatic events are categorized as pre-traumatic, peri-traumatic, and post-traumatic (Rooney et al., 2022)
- Various screening measures developed for youth diagnosis

### Prevalence of PTSD from Sexual Assault:

- Sexual assaults contribute to nearly 30% of U.S. PTSD episodes (Goodman-Williams et al., 2022)
- Childhood sexual abuse significantly causes trauma, impacting long-term well-being (Xian-Yu et al., 2022)

### Effects of PTSD on Youth:

- Threatens physical, mental, and emotional health
- Symptoms include intrusive responses, chronic stomach/headaches, sensory issues
- Cognitive problems affect academic achievement and focus
- Brain development alterations observed in MRI studies
- Emotional responses impacted, affecting expression and management
- Behavioral issues involve increased sensitivity, self-regulation problems, and high-risk activities

### Adverse Childhood Experiences (ACE) Study:

- 64% of ACE Study participants experienced childhood trauma (De Young, 2018)
- Link established between childhood trauma, high-risk behaviors, chronic illness, and early death



### Early Treatment for Recovery:

- Early intervention improves recovery chances in youth PTSD

### Current Go-To Treatment:

- Cognitive therapy, medication, and family treatment recommended

### Effective Psychosocial Therapies:

- Trauma-focused Cognitive Behavioral Therapy (TF-CBT) and eye-movement desensitization and reprocessing (EMDR) are preferred interventions (Xian-Yu et al., 2022)
- TF-CBT, with a parent-specific component, enhances effectiveness by addressing behavioral issues (Lee, 2023)
- TF-CBT shows significant improvements compared to alternative treatments

### Real Life Heroes Approach:

- Integrative treatment for youth Complex PTSD
- Merges CBT with elements from attachment theory, neurobiology, and family systems therapies
- Emphasizes regulating emotions, fostering supportive relationships, and integrating life stories
- Life Storybook using creative arts facilitates resilience, self-regulation, and trauma desensitization (Kagan et al., 2014, p. 589)
- Proven significantly effective in improving post-traumatic stress symptoms



## DISCUSSION

### Concerns and Impact of Youth PTSD:

- PTSD in children and adolescents is a significant concern
- Manifestation of symptoms differs from adults, necessitating further research
- Some cases exhibit lifelong prevalence

### Brain Effects and Trauma Severity:

- Unknown full extent of PTSD impact on the brain
- Confirmed negative effects on brain structure and development in youth
- Early and recurrent trauma intensify post-traumatic stress symptoms

### Current Treatment Approaches:

- Cognitive Behavioral Therapy (CBT) is the primary intervention
- Trauma-focused CBT (TF-CBT) shows promise as a leading treatment
- Successful strategies include implementing resilience skills, desensitization, and fostering supportive relationships

### Importance of Distinguishing Youth PTSD:

- Emphasizes separating youth PTSD from adult descriptions
- Highlights differences in symptom manifestation, lack of development, and vulnerabilities
- Stresses the need for evidence-based understanding and support

## RECOMMENDATIONS FOR FUTURE RESEARCH

### Historical Oversight and Urgent Research Needs:

- Past neglect of children as potential PTSD candidates underscores historical oversight
- Urgent need for more longitudinal research and evidence on youth PTSD
- Swift intervention crucial for symptom reduction and high recovery rates

### Detection and Treatment:

- Identifying suitable points for detection personnel is crucial
- Urgent need for prompt and efficient treatment for youth with PTSD

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