POSTTRAUMATIC STRESS DISORDER (PTSD)

About PTSD
Discussion of posttraumatic stress disorder (PTSD) often brings to mind veterans and their experiences after serving in combat. However, PTSD can occur after many other traumatic occurrences and impacts individuals of all ages, including children and adolescents. Traumatic events can include abuse, natural disasters, witnessing violence, neglect, and accidents.

Understanding the symptoms associated with PTSD can assist educators, mental health professionals, and families in providing meaningful interventions and support. Communication between the student’s team members is paramount. While a student’s safety should be the most important priority, it is also imperative to understand triggers and the way in which they may manifest (such as fear of somebody with a particular facial feature or style of dress). Understanding these nuances can assist teams in developing helpful interventions and building support for the student.

Risk Factors
- Observing or experiencing a traumatic event
- Previous exposure to trauma

Help and Treatment
- Therapy
- Medication
- Support from family, school, peers, and the community

By the Numbers
According to the U.S. Department of Veterans Affairs,1
- 1% to 6% of boys will likely experience PTSD as a result of trauma
- 3% to 15% of girls will likely experience PTSD as a result of trauma
- Approximately 14% to 43% of boys and 15% to 43% of girls experience at least one trauma in their lives
What Does It Look Like?²

*Symptoms*

- Recollections of the traumatic event (flashbacks)
- Fear of being separated from a parent or, conversely, fear of being left alone with a particular adult
- Anxiety, anger, or depression
- Engagement in risky or dangerous behaviors, including substance abuse, self-injury, or suicidal thought
- Difficulty with sleep
- Changes in eating habits
- Play that relives the trauma
- Loss of interest in usual activities
- Easily distracted or difficulties with attention
- Physical pains, such as stomachaches or headaches
- Hyperalertness (always on guard or edgy)
# Symptoms and Interventions

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<tr>
<th>Class</th>
<th>Symptoms</th>
<th>Interventions</th>
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| Classroom | • Experiences fear of being left alone, without parent, or with another adult  
• Engages in or experiences bullying (victim or perpetrator)  
• Engages in play that relives trauma  
• Struggles with peer and staff relationships | • Consider modifications or ways to ease the child's anxiety (informing him when leaving the room, allow check-ins with parent or other trusted adult)  
• Allow time for lessons with an SMHP to identify emotions and understand possible triggers (including noise, touch, or specific situations)  
• Identify supportive figures with whom the student can build relationships  
• Practice calm, positive interactions with student, particularly when student is experiencing anxiety or distress |
| School Work | • Struggles with completing school work  
• Defies directives  
• Exhibits detachment or disengagement with assignments and responsibilities | • Adapt assignments or decrease workload  
• If trauma is known, avoid assigning work that may trigger the student  
• Identify methods of instruction or work completion that the student enjoys and responds to (e.g., using the computer, artwork, music) |
| Desk | • Becomes easily distracted | • Provide additional directives or reminders to help student stay on task  
• Use methods of completing work that employ the student's strengths (e.g., technology) |
| Outside the Classroom | • Engages in behavior that is considered risky or dangerous  
• Demonstrates changes in eating habits  
• Experiences difficulties with sleep  
• Expresses concern or fear of being left with a particular adult | • Communicate with parents or caregivers to identify patterns in behaviors or events at home that may impact the student's behavior (e.g., lack of sleep)  
• Understand the student's home environment and identify supports  
• If concerned about student's safety after leaving school, contact appropriate individuals such as SMHPs, police, or local child welfare agency |
| Transitions | • Experiences difficulties with unexpected transitions or schedule changes  
• Struggles with loud situations (busy hallways, assemblies, etc.) | • Create routines and schedules that are predictable  
• Work with other staff members to develop consistent rules and interactions (e.g., remaining calm, identifying triggers)  
• Consider early or late transitions to avoid stressful situations |
Student Strengths

- Smart
- Resilient
- Kind
- Sensitive
- Compassionate
- Creative

References


Resources

- **U.S. Department of Veterans Affairs: National Center for PTSD**

- **American Academy of Child & Adolescent Psychiatry**

- **Child Mind Institute**

- **The National Child Traumatic Stress Network**
  http://www.nctsn.org/resources/audiences/parents-caregivers/understanding-child-traumatic-stress