

Addendum #1—Research Findings on Impact of Complex Trauma in Infancy and Early Childhood

The need to focus on complex trauma in infancy and early childhood is supported by research on the prevalence and impact of early childhood trauma exposure and its association with risk for future polyvictimization (experiencing four or more traumatic and stressful events) and negative developmental sequelae. As an example, Crusto and colleagues (2010) screened children aged 3 to 6 who were referred to mental health community agencies. The majority of children were referred due to social, emotional, and behavioral concerns (42.9 percent) and only 13 percent were referred as the result of exposure to violence or abuse. Using the Traumatic Events Screening Inventory-Parent Report Revised (TESI-PRR; Ghosh Ippen et al., 2002), the authors discovered a previously unidentified high prevalence of trauma exposure: 1) 42 percent of the children had seen family members assaulting each other, 2) 18 percent had been assaulted or beaten, 3) close to 6 percent had been forced to see or do something sexual, 4) 27 percent had witnessed physical assault between non-family members, and 5) nearly 15 percent had experienced the death of someone close to them. In addition, trauma exposure did not, as a rule, occur as a single, discrete event. The children had been exposed to an average of 4.9 different types of traumatic and stressful events, with over 48 percent of the children experiencing 5 or more of these types of events. Trauma exposure had concrete repercussions on the child's functioning. Clinically significant posttraumatic stress scores were shown by 23.4 percent of the children using the Trauma Symptom Checklist for Young Children (Briere, 2005), and another 16.2 percent were in the subclinical but problematic range. These children would not typically be identified as needing trauma-informed treatment because their initial assessment did not include screening for trauma exposure. This study demonstrates the critical importance of screening for, and addressing complex trauma exposure in early childhood. Recent research (Stover, Ghosh Ippen, Liang, Briggs, & Berkowitz, manuscript in preparation) from the National Child Traumatic Stress Network (NCTSN) provides additional support. Among 8,544 youth presenting for treatment at selected NCTSN sites, 30 percent witnessed partner violence before age 2 and an additional 10 percent witnessed these acts between ages 2-4. Moreover, witnessing partner violence before age 2 was associated with a significantly increased likelihood of polyvictimization, greater impairment, and higher rates of psychiatric comorbidity.