

Developmental trauma and stress: Finding meaning and healing

Noel Hunter, Psy.D.



- I tried to de-emphasize the family situation because I didn't want it to escalate to child protection services – P7



- I spoke to [the psychologist] about my symptoms and I didn't tell them anything about my father or any of the other people that were involved...I wasn't really ready to talk about my father. I was still very concerned that I was gonna be killed for that – P8



Interestingly, they put me on Zoloft thinking that they had fixed me...I just let them believe it. “Oh yeah, that feels great”. What do ya do? I mean come on – P9

In the beginning it was absolutely terrible...My father had been abusing me since I was 2 years old until either 12 or 13 and...I got put into a psych hospital because we're suicidal and I was there for a month. They didn't know anything about the abuse – P12



The one good thing about the medications is it just blocks everything. Which, if you're still a child or teenager stuck in a horrific situation you can always survive by not remembering. I guess it helped, ya know?...I became very attached to this idea...that I had never been abused, that I'd had the perfect childhood. I began to deny things that I had previously disclosed to my therapist... It is so much easier to believe that I am crazy and that I had a perfect childhood with parents who loved me and simply got worn out from dealing with a mentally sick daughter – P13

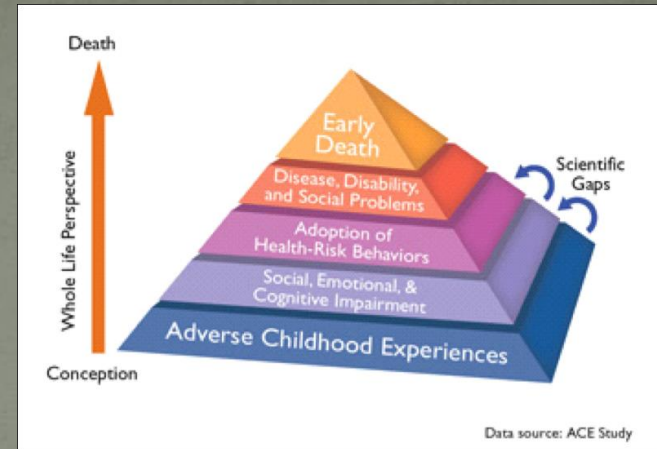


Trauma rarely assessed

- Up to 93% of hospitalized adolescents report overt trauma, such as abuse
 - 32% meet full criteria for PTSD
 - Almost 50% of females hospitalized victims of sexual abuse
- Foster care children account for 41% of Medicaid mental health users and 27% of inpatient population
 - Prescribed neuroleptics at double to quadruple the rate of non-foster care children
 - Most on 5 or drugs
- Up to 98% of hospitalized adults report overt trauma, such as abuse
 - In general, trauma noted around 50%

Some stats...

- 4 or more ACE's:
 - 1 in 6 alcoholic
 - 1 in 5 attempts suicide
 - 3 times more likely to be put on ADHD drugs
 - 460% increase in depression
- 7 or more ACE's:
 - 5-fold increase in reporting hallucinations
 - 1 in 30 IV drugs
- Adults with ADHD diagnosis more likely to also meet full-criteria for PTSD
- High severity of child trauma = Psychosis 48.4 times more likely



What predicts psychosis?

Bullying

Sexual Abuse

Social Isolation

Physical Abuse


Relative Poverty

Chronic Discrimination

Neglect

Heredity

But what about neurological findings???

- The brain correlates with **EVERYTHING WE DO**
 - Difference does not equal disease
 - Brain differences associated with environment not the DSM
 - Environment affects expression of genes
 - Chronic stress, isolation, and abuse lead to excessive pruning
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How can we do better?

- Allow children to be children
- Assume behavior is for a reason
- Stop telling children they have a disease and are defective
- Do not assume abuse
- Be curious to helping parents with their own stress and trauma
- Family therapy
- Parent training
- Building safety
- Preventative and awareness training for bullying
- Mindfulness training
- Helping build positive relationships
- Social advocacy
- Educational reform
- Juvenile justice reform



References

- Bentall, R., Wickham, S., Shevlin, M., & Varese, F. (2012). Do specific early-life adversities lead to specific symptoms of psychosis? A study. *Schizophrenia Bulletin*, 38, 734-740.
- Brown, N. M. (May, 2016). Associations between adverse childhood experiences and ADHD: Analysis of the 2011 National Survey of Children's Health. Presented at the Pediatric Academic Societies annual meeting in Vancouver, British Columbia, Canada. Abstract retrieved from: <https://www.aap.org/en-us/about-the-aap/aap-press-room/pages/Study-Finds-ADHD-and-Trauma-Often-go-Hand-in-Hand.aspx?nfstatus=401&nftoken=00000000-0000-0000-0000-000000000000&nfstatusdescription=ERROR:+No+local+token>
- Daviss, W. B., Barnett, E., Neubacher, K., & Drake, R. E. (2016). Use of antipsychotic medications for nonpsychotic children: Risks and implications for mental health services. *Psychiatric Services*. DOI:10.1176/appi.ps.201500272.
- De Bellis, M. D., Keshavan, M. S., Clark, D. B., Casey, B. J., Giedd, J. N., Boring, A. M., Frustaci, K., & Ryan, N. D. (1999). Developmental traumatology part II: Brain development. *Biological Psychiatry*, 45, 333-354.
- Fisher, H. L., McGuffin, P., Boydell, J., Fearon, P., Craig, T. K., Dazzan, P.,...Morgan, C. (2014). Interplay between childhood physical abuse and familial risk in the onset of psychotic disorders. *Schizophrenia Bulletin*. DOI:10.1093/schbul/sbt201.
- Freyd, J. J. (1996). *Betrayal Trauma: The logic of forgetting childhood abuse*. Harvard University Press.
- Halfon, N., Berkowitz, G., & Klee, L. (1992). Mental health service utilization by children in foster care in California. *Pediatrics*, 89
- Henry, J., Sloane, M., & Black-Pond, C. (2007). Neurobiology and neurodevelopmental impact of childhood traumatic stress and prenatal alcohol exposure. *Language, Speech & Hearing Services in Schools*, 38, 99-108.
- Hunter, N. & Schultz, W. (2016). ISEPP White Paper: On brain scan research. *Ethical Human Psychology and Psychiatry*, 18(1), 9-19.

References

- Janssen, I., Krabbendam, L., Bak, M., Hanssen, M., Vollebergh, W., de Graaf, R., & van Os, J. (2003). Childhood abuse as a risk factor for psychotic experiences. *Acta Psychiatrica Scandinavica*, *109*, 38-45.
- Keeshin, B. R., Strawn, J. R., Luebke, A. M., Saldana, S. N., Wehry, A. M., DelBello, M. P., & Putnam, F. W. (2014). Hospitalized youth and child abuse: A systematic examination of psychiatric morbidity and clinical severity. *Child Abuse & Neglect*, *38*, 76-83.
- Kelleher, I., Keeley, H., Corcoran, P., Ramsay, H., Wasserman, C., Carli, V.,...Cannon, M. (2013). Childhood trauma and psychosis in a prospective cohort study: Cause, effect, and directionality. *American Journal of Psychiatry*, *170*, 734-741.
- Kirkbride, J. B., Jones, P. B., Ulrich, S., & Cold, J. W. (2014). Social deprivation, inequality, and the neighborhood-level incidence of psychotic syndroms in East London. *Schizophrenia Bulletin*, *40*, 169-180.
- Kohan, M. J., Pothier, P., & Norbeck, J. S. (1987). Hospitalized children with history of sexual abuse: Incidence and care issues. *American Journal of Orthopsychiatry*, *57*, 258-264.
- Lipschitz, D. S., Winegar, R. K., Hartnick, E. Foote, B., & Southwick, S. M. (1999). Posttraumatic stress disorder in hospitalized adolescents: Psychiatric comorbidity and clinical correlates. *Journal of the American Academy of Child & Adolescent Pscyhiatry*, *38*, 385-392.
- Neece, C. (2013). Mindfulness-based stress reduction for parents of young children with developmental delays: Implications for parental mental health and child behavior problems. *Journal of Applied Research in Intellectual Disabilities*. DOI:10.1111/jar.12064.
- Pelham, W. E., Jr., & Fabiano, G. A. (2008). Evidence-based psychosocial treatments for attention-deficit/hyperactivity disorder. *Journal of Clinical Child and Adolescent Psychology*, *37*, 184-214.
- Pibiri, F., Nelson, M., Guidotti, A., Costa, E., & Pinna, G. (2008). Decreased corticolimbic allopregnanolone expression during social isolation enhances contextual fear: A model relevant for posttraumatic stress disorder. *PNS*, *105*, 5567-5572.
- Read, J. (2010). Can poverty drive you mad? "Schizophrenia", socio-economic status and the case for primary prevention. *New Zealand Journal of Psychology*, *39*, 7-19.
- Read, J., Fosse, R., Moskowitz, A., & Perry, B. (2014). The traumagenic neurodevelopmental model of psychosis revisited. *Neuropsychiatry*, *4*, 65-79.
- Rossiter, A., Byrne, F., Wota, A. P., Nisar, Z., Ofuafor, T., Murray, I., Byrne, C., & Hallahan, B. (2015). Childhood trauma levels in individuals attending adult mental health services: An evaluation of clinical records and structured measurement of childhood trauma. *Child Abuse & Neglect*, *44*, 36-45.

References

- Singh, N. N., Singh, A. N., Lancioni, G. E., Singh, J., Winton, A. S. W., & Adkins, A. D. (2010). Mindfulness training for parents and their children with ADHD increases the children's compliance. *Journal of Child and Family Studies*, *19*, 157-166.
- Teicher, M. H., Andersen, S. L., Polcari, A., Anderson, C. M., Navalta, C. P., & Kim, D. M. (2003). The neurobiological consequences of early stress and childhood maltreatment. *Neuroscience & Biobehavioral Reviews*, *27*, 33-44.
- Van der Kolk, B. A. (2005). Developmental trauma disorder. *Psychiatric Annals*, *35*, 401-409.
- Veling, W., Susser, E., Selten, J. P., & Hoek, H. W. (2015). Social disorganization of neighborhoods and incidence of psychotic disorders: A 7-year first-contact incidence study. *Psychological Medicine*, *45*, 1789-1798.
- Vita, A., De Peri, L., Deste, G., Barlati, S., & Sacchetti, E. (2015). The effect of antipsychotic treatment on cortical gray matter changes in schizophrenia: Does the class matter? A meta-analysis and meta-regression of longitudinal magnetic resonance imaging studies. *Biological Psychiatry*, *78*, 403-412.
- Whitfield, C. L., Dube, S. R., Felitti, V. J., & Anda, R. F. (2005). Adverse childhood experiences and hallucinations. *Child Abuse & Neglect*, *29*, 797-810.
- Wicks, S., Hjern, A., Gunnell, D., Lewis, G., & Dalman, C. (2005). Social adversity in childhood and the risk of developing psychosis: A national cohort study. *American Journal of Psychiatry*, *162*, 1652-1657.