

Dissociation and PTSD: What Parents Should Know



A group of nursing, psychology, and psychiatry researchers conducted a study on the dissociative subtype of PTSD using the NCTSN Core Data Set. This brief summarizes key findings from the study for parents and caregivers of children who have experienced traumatic events.. The detailed report is published in the *Journal of the American Academy of Child & Adolescent Psychiatry*.

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What is the issue?

- Dissociation is a coping mechanism children sometimes use during frightening or overwhelming experiences. It is a psychological survival tool children use when they feel helpless, afraid, or unable to escape a dangerous situation. When children dissociate, they mentally block off thoughts, feelings, or memories about the traumatic experience. They may feel as if in a dream or somewhere else in the room watching what is happening.
- Dissociation can help children cope with traumatic experiences in the moment, but sometimes dissociation can begin to happen in non-traumatic situations. When children frequently dissociate—not fully present in their everyday lives—their development might be negatively affected. Children learn and grow best when they can be their whole, integrated selves, rather than having cut off or lost touch with parts of themselves.
- It can be challenging to detect dissociation in children because it is happening in the child's mind. It is not always evident to others that a child is dissociating; the child may appear to be daydreaming or spacing out. Often, child health professionals will look for signs of posttraumatic stress disorder (PTSD) in children who have experienced trauma. New research has shown that there is a specific type of PTSD called the PTSD dissociative subtype that includes dissociation symptoms, but it has been mainly studied with adults. The goal of this research project was to study the PTSD dissociative subtype with teenagers.

What are the findings?

- The dissociative subtype of PTSD is slightly different for teenagers than it is for adults. Dissociation symptoms that teenagers tend to experience more than adults are daydreaming, forgetting things, and blocking out thoughts.
- Teenagers with the dissociative subtype of PTSD tend to have more trauma experiences as well as more severe PTSD and problems with behavior.
- Some teenagers with trauma exposure and problems with PTSD have dissociative amnesia—that is, problems with memory and forgetting things. Dissociative amnesia could be related to remembering a trauma experience.

WHAT TO DO

What can you can do?

1

Learn more about trauma and dissociation in children.

The NCTSN and the International Society for the Study of Trauma and Dissociation provide helpful information about trauma and dissociation for parents and caregivers to get started:

<http://www.nctsn.org/resources/audiences/parents-caregivers>
<http://www.isst-d.org/default.asp?contentID=100>



2

Pay attention to when and where your child seems be dissociating.

It may be helpful to identify if anything seems to trigger dissociation and discuss this with your child's doctor or therapist. The parent-report Child Dissociative Checklist (CDC) can be used by parents or caregivers to document pathological dissociation in children ages 6-12 years. Parents and caregivers can also document these common signs of dissociation:

- Amnesia for important or traumatic events known to have occurred,
- Frequent dazed or trance-like states,
- Perplexing forgetfulness (e.g., the child knows facts or skills one day and not the next),
- Rapid, profound age regression,
- Difficulties deriving cause-and-effect consequences from life experiences,
- Lying or denying responsibility for misbehavior despite obvious evidence to the contrary,
- Repeatedly referring to self in third person,
- Unexplained injuries/recurrent self-injurious behavior,
- Vivid imaginary companionship that controls the child's behavior (i.e., passive influence experiences), and
- Auditory and visual hallucinations.

3

Talk about your child's trauma and dissociation problems with his or her doctor or therapist.

They can make additional recommendations for managing trauma and dissociation and help you find treatment. The NCTSN also provides resources to help you find the right treatment for your child:

<http://www.nctsn.org/resources/audiences/parents-caregivers>

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The Core Data Set was developed as a central part of the mission and vision of National Child Traumatic Stress Network (NCTSN), which seeks to raise the standard of care for children who have experienced trauma. The NCTSN Core Data Set was the first collection of behavioral health data to include a set of forms and assessment measures designed to systematically capture important demographics, trauma exposure, client functioning, service use, and treatment information for youth and families affected by trauma. The Core Data Set includes information from 78 NCTSN sites that received referrals for 14,890 children who experienced trauma between the years of 2004 and 2010.

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