

Youth Primer on Intersex



Introduction

Childhood trauma is an event or occurrence that threatens child's life or bodily integrity. Physical or sexual abuse are examples. Car accidents, natural disasters, or medical trauma are other examples that can take a psychological toll.¹ Similarly, living in a dangerous neighborhood or being bullied. Some of these might not seem so for adults.² Childhood trauma does not always have to be direct. Watching a loved one suffer can cause trauma. Just as exposure to violent media.³ These experiences may influence children's behaviour. For example, unhealthy expressions of anger might be normalised to an extent that they exhibit those expressions in adulthood.⁴



Overview

Many children are exposed to traumatic events at one point or another. While most of them experience distress following a traumatic event, most return to a normal state of functioning in a relatively short period of time. Some children are much less affected by their circumstances than others.⁵ However, it has been established that traumatic experiences are a root cause of many social, emotional, and cognitive impairments. These often lead to increased risk of unhealthy self-destructive behaviours, violence, re-victimization, chronic health conditions, and premature mortality. As the number of traumatic experiences increase in childhood, so will the risks in adulthood.⁶ Screenings for adverse childhood experiences among adult and

¹ APA. (2014). Trauma Leaves Children Behind: Impact of Psychological Distress on Children's Learning. *Journal of Trauma & Treatment*, *s4*, 125. <https://doi.org/10.4172/2167-1222.s4-013>

² De Bellis, M. D., & Zisk, A. (2014). The Biological Effects of Childhood Trauma. *Child and Adolescent Psychiatric Clinics of North America*, *23*(2), 185–222. <https://doi.org/10.1016/j.chc.2014.01.002>

³ APA. (2016). Virtual Violence. *Pediatrics*, *138*(2), e20161298. <https://doi.org/10.1542/peds.2016-1298>

⁴ Brandt, A. (2017). *4 Ways That Childhood Trauma Impacts Adults*. Psychology Today. <https://www.psychologytoday.com/us/blog/mindf>

[ul-anger/201706/4-ways-childhood-trauma-impacts-adults](https://doi.org/10.1016/j.chiabu.2017.06.001)

⁵ Gilbert, L. K., Breiding, M. J., Merrick, M. T., Thompson, W. W., Ford, D. C., Dhingra, S. S., & Parks, S. E. (2015). Childhood Adversity and Adult Chronic Disease. *American Journal of Preventive Medicine*, *48*(3), 345–349. <https://doi.org/10.1016/j.amepre.2014.09.006>

⁶ Thomson, P., & Jaque, S. V. (2017). Adverse childhood experiences (ACE) and adult attachment interview (AAI) in a non-clinical population. *Child Abuse & Neglect*, *70*, 255–263. <https://doi.org/10.1016/j.chiabu.2017.06.001>

child patients is increasingly becoming a norm.⁷

Childhood trauma can increase the risk of mental disorders including posttraumatic stress disorder (PTSD), dependency, depression, and substance abuse.⁸ Sensitive and critical stages of child development can result in altered neurological functioning adaptive to a stifling environment but not a compassionate one.⁹



Challenges

Trauma affects all children differently. It re-regulates biological stress systems. Some develop significant and long-lasting problems while others may have minimal symptoms and recover more quickly.¹⁰ The long-term consequence of early trauma experiences and elevated CRF resets the regulation of the LHPA axis so that ACTH and cortisol secretions are set at lower 24-hour levels during baseline and non-stressful conditions. Adult studies of victims of childhood trauma consistently show lower cortisol levels.¹¹ Trauma-informed care and interventions regularly produce better outcomes than standard mental health care.¹²

⁷ Van Der Kolk, Besela., PERRY, J. Christopher., & HERMAN, Judith. L. (1992). Dr. van der Kolk and Associates Reply. *American Journal of Psychiatry*, 149(9), 1280-a. <https://doi.org/10.1176/ajp.149.9.1280-a>

⁸ Sachs-Ericsson, N. J., Sheffler, J. L., Stanley, I. H., Piazza, J. R., & Preacher, K. J. (2017). When Emotional Pain Becomes Physical: Adverse Childhood Experiences, Pain, and the Role of Mood and Anxiety Disorders. *Journal of Clinical Psychology*, 73(10), 1403–1428. <https://doi.org/10.1002/jclp.22444>; Taylor, S. E., Lerner, J. S., Sage, R. M., Lehman, B. J., & Seeman, T. E. (2004). Early Environment, Emotions, Responses to Stress, and Health. *Journal of Personality*, 72(6), 1365–1394. <https://doi.org/10.1111/j.1467-6494.2004.00300.x>; Psychology Help Center. (2014). Trauma Leaves Children Behind: Impact of Psychological Distress on Children's Learning. *Journal of Trauma & Treatment*, s4, 24. <https://doi.org/10.4172/2167-1222.s4-013>.

⁹ Tognin, S., & Calem, M. (2017). M122. Impact of Childhood Trauma on Educational Achievement in

Young People at Clinical High Risk of Psychosis. *Schizophrenia Bulletin*, 43(suppl_1), S255. <https://doi.org/10.1093/schbul/sbx022.116>

¹⁰ Rockstroh, B. S., & McTeague, L. M. (2019). Psychophysiological approaches to understanding the impact of trauma exposure. *Psychophysiology*, 57(1), 234. <https://doi.org/10.1111/psyp.13497>

¹¹ Southwick, S. M., Bremner, D., Krystal, J. H., & Charney, D. S. (1994). Psychobiologic Research in Post-Traumatic Stress Disorder. *Psychiatric Clinics of North America*, 17(2), 251–264. [https://doi.org/10.1016/s0193-953x\(18\)30112-6](https://doi.org/10.1016/s0193-953x(18)30112-6);

Kinzie JD, Sack WH, Angell RH, Manson S, Rath B (1986). "The Psychiatric Effects of Massive Trauma on Cambodian Children: I. The Children". *Journal of the American Academy of Child Psychiatry*. 25 (3): 370–376. [doi:10.1016/s0002-7138\(09\)60259-4](https://doi.org/10.1016/s0002-7138(09)60259-4).

¹² TF, K., L, K., & K, J. (2016). Human Immunodeficiency Virus Infection in Young Adults: Treatment of Substance Use Disorders as a Priority Component of HIV Prevention, Care and Treatment in Low and Middle Income Countries. *International Journal of HIV/AIDS and Research*, 97–104. <https://doi.org/10.19070/2379-1586-1600021>

Many children and adolescents with traumatic exposure or trauma-related psychological symptoms are not identified and do not get help. Notably, those who are identified within minority ethnic and migrant groups do not get required and sustained care.¹³ In many instances their trauma exposure is not always known or addressed. For those children who do receive services, evidence-based treatment is not a standard.¹⁴ Despite the widespread prevalence of childhood trauma, data on biological effects in children - as compared to adults with child trauma histories is lacking. There is even less data on paediatric influences underlie the consequences of trauma in one's short- and long-term health.¹⁵



¹³ Voineskos, A. N. (2020). Mapping Effects of Childhood Trauma Onto Brain Systems and Behavior. *Biological Psychiatry*, 88(11), 810–811. <https://doi.org/10.1016/j.biopsych.2020.08.009>

¹⁴ Gump, A. M., Boeck, C., Behnke, A., Bach, A. M., Ramo-Fernández, L., Welz, T., Gündel, H., Kolassa, I.-T., & Karabatsiakos, A. (2020). Childhood maltreatment is associated with changes in mitochondrial bioenergetics in maternal, but not in neonatal immune cells. *Proceedings of the National Academy of Sciences*, 117(40), 24778–24784. <https://doi.org/10.1073/pnas.2005885117>

¹⁵ Chamberlain, C., Gee, G., Harfield, S., Campbell, S., Brennan, S., Clark, Y., Mensah, F., Arabena, K., Herrman, H., & Brown, S. (2019). Parenting after a history of childhood maltreatment: A scoping

Conclusion

Primary healthcare packages should include trauma-informed approaches for all people. Traumatic stress disorders manifest in variant ways and cannot always be addressed. However, there should be more proactive measures in helping patients and their health service providers' stress levels simultaneously.¹⁶ Institutionalising trauma care for health staff and patients prevents instances of triggers, harm, or further trauma.¹⁷

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review and map of evidence in the perinatal period. *PLOS ONE*, 14(3), e0213460.

<https://doi.org/10.1371/journal.pone.0213460>

¹⁶ Thomas C (2016). "Symbolization of early separation traumas and the formation of new representations. Experiences from the analysis of a former institutionalized child". *Psyche*. **70** (11). [doi:10.21706/ps-70-11](https://doi.org/10.21706/ps-70-11). ISSN 0033-2623.

¹⁷ Department Of Health And Human Services, U.S. (2016). *A Treatment Improvement Protocol - Trauma-Informed Care in Behavioral Health Services - Tip 57*. lulu.com.

<https://www.ncbi.nlm.nih.gov/books/NBK207192/>