ABSTRACT

The term complex trauma was coined by Judith Herman nearly 30 years ago (Herman, 1992). In contrast to acute trauma, complex trauma reflects extreme stress that follows exposure to chronic and repeated traumatic experiences (Herman, 1992) typically involving caregivers or responsible adults. Cumulative interpersonal trauma can often lead to complex PTSD symptoms; however, many children who have experienced complex trauma demonstrate symptoms that are not captured by current diagnostic criteria in the DSM-5. Researchers and clinicians have advocated for Developmental Trauma Disorder (DTD) be added to the DSM-5, which in turn will help guide clinicians on implementing appropriate trauma-focused treatments for this population. Several evidence-based treatments have been established to treat complex trauma in children and these treatments continue to be studied.

LEARNING OBJECTIVES

1. Describe the impact of complex trauma vs. acute trauma.
2. Explain the utility of developmental trauma disorder (DTD) diagnostic criteria.
3. Identify two effective treatments for treating complex trauma.

REFERENCES