Advances in Pediatric Research

Perspective

Early Trauma Experience in Adolescent

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INTRODUCTION

In an effort to escape or lessen the overwhelming negative feelings that come along with traumatic stress, adolescents engage in a variety of potentially harmful activities, such as obsessive sexual activity, self-mutilation, bingeing and purging, and even attempted suicide.

There are two types of traumas which includes in adolescents.

Acute: A range of various events that frequently occur suddenly and all at once yet have an influence that lasts. Teenagers may experience trauma from experiencing bodily injury in a vehicle accident, being sexually attacked or threatened or from witnessing the harm or violence of another.

Chronic: A teen who has experienced or witnessed chronic, recurrent assaults and traumatic events. Teenagers who experience unpleasant events repeatedly are more prone to use drugs or alcohol to numb uncomfortable, unfavorable thoughts. Examples of chronic trauma include family instability, persistent physical or emotional abuse, bullying, and domestic violence.

Traumatic stress in children and teenagers can cause a variety of circumstances such as physical, sexual or emotional abuse; violent interaction (rape); community violence (gang violence); terrorism; medical trauma (severe injury, life-threatening illness); accidents; traumatic loss (death of parents).

DESCRIPTION

The common signs and symptoms of trauma in teenagers includes sleep disturbance, withdrawing from family and friends, wanting to spend more time alone, losing interest in school, friends, hobbies, and life in general, difficulties with short-term memory and problem solving, withholding responsibilities or suddenly reverting to rebellious behavior, becoming more self-absorbed, Strong feelings like anxiety, anger, sadness, avoiding people etc. Complex trauma in adolescents often results in symptoms include dissociation, absence of empathy, having

trouble controlling emotions and describing inner experiences, disruptions in sleep, poor impulse control, a low sense of self, negative body image, unexplained physical symptoms and increased medical problems.

The following strategies for mental health care can be very beneficial in reducing child's symptoms which includes:

Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) is an intervention (age 3-18) for adolescents and parents who experience the traumatic event.

Dialectical Behavior Therapy (DBT): A cognitive, collaborative, and support-based strategy to assist teenagers in managing safety concerns (such as self-harming or suicidal ideations) and combating illogical notions.

Parent-Child Interaction Therapy (PCIT): Children with trauma-related symptoms such as aggressive, disobedient, and oppositional behaviors might benefit from a parent-child dyadic play-based treatment.

CONCLUSION

Teenagers may experience trauma from experiencing bodily injury in a vehicle accident, being sexually attacked or threatened or from witnessing the harm or violence of another. Teenagers who experience unpleasant events repeatedly are more prone to use drugs or alcohol to numb uncomfortable, unfavorable thoughts. Examples of chronic trauma include family instability, persistent physical or emotional abuse, bullying, and domestic violence. The common signs and symptoms of trauma in teenagers includes sleep disturbance, withdrawing from family and friends, wanting to spend more time alone, losing interest in school, friends, hobbies, and life in general, difficulties with short-term memory and problem solving, withholding responsibilities or suddenly reverting to rebellious behavior, becoming more self-absorbed, strong feelings like anxiety, anger, sadness, avoiding people etc.

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Received: 17-Oct-2022, Manuscript No. LDAPR-22-19653; Editor assigned: 19-Oct-2022, PreQC No. LDAPR-22-19653 (PQ); Reviewed: 02-Nov-2022, QC No. LDAPR-22-19653; Revised: 22-Sep-2023, Manuscript No. LDAPR-22-19653 (R); Published: 29-Sep-2023, DOI: 10.35248/2385-4529.23.10.061

Citation: Ahmed SE (2023) Early Trauma Experience in Adolescent. Adv Pediatr Res. 10:061.

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