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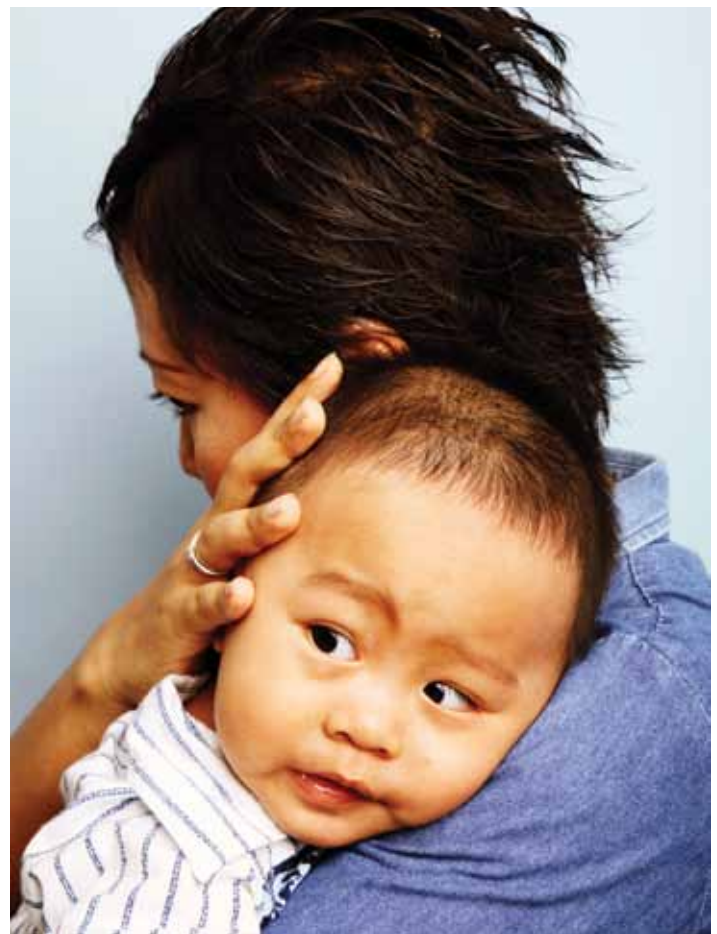
# Trauma and Violence Exposure among Asian American and Pacific Islander children

## WHAT IS A TRAUMATIC EVENT?

A traumatic event is an unpredictable, unanticipated event that renders an individual to feel helpless, fearful, and very concerned about his/her personal safety and/or the safety of others.

## TYPES OF TRAUMATIC EVENTS

- Physical abuse/maltreatment
- Sexual abuse
- Witnessing intimate partner violence/family violence
- Emotional/verbal abuse
- Exposure to war/conflict
- Natural disaster exposure (hurricanes, earthquakes, tsunamis)
- Target of hate crimes/bullying
- Witnessing school or community violence
- Loss or separation from loved ones (deportation, death, child welfare)
- Living with or taking care of a parent or loved one who has a chronic/terminal illness



**Complex trauma** is the result of experiencing multiple or prolonged traumatic events, which can have a cumulative effect on children's well-being<sup>1</sup>. If left untreated, complex trauma has the potential to have long-term consequences on cognitive, physical, socioemotional, and spiritual development.<sup>2</sup>

# COMMON SYMPTOMS OF CHILDHOOD EXPOSURE TO TRAUMA AND VIOLENCE



- Reenactment of trauma or violence in play
- Intrusive/disruptive thoughts about the trauma during various activities
- Recurring nightmares
- Avoidance and/or expressed fear of trauma reminders (situations, places, and people)
- Hypervigilance
- Depressed and/or anxious mood
- Increased aggression and/or withdrawal
- Regression in behaviors/skills that were once mastered



*It is essential to consider that trauma symptoms may manifest differently based on cultural practices, socialization, and meaning, all of which should be taken into account when intervening.*

## POPULAR MYTHS ABOUT CHILDHOOD TRAUMA

**MYTH:** “Children are too young to be affected by trauma.”

**FACT:** Even preverbal children suffer the effects of traumatic events as is evidenced by subsequent physiological symptoms and in some cases, “nonorganic failure to thrive”.<sup>3</sup> The way that children react to trauma can differ from adults. Parents might consider consulting a pediatrician or a mental health professional if they notice marked behavioral changes and/or regression following a traumatic event, even if they do not believe their child witnessed or was affected by it.

**MYTH:** “Children will recover on their own—they are resilient.”

**FACT:** While many children do not develop post-traumatic stress disorder following trauma, symptoms related to experiencing or witnessing a highly traumatic event rarely extinguish on their own and may worsen over time if not treated.

**MYTH:** “It is better not to talk with children about trauma—it will just re-traumatize them.”

**FACT:** On the contrary, when trauma is discussed in age-appropriate and sensitive ways, caregivers and professionals can support children to feel validated and relieved after having endured traumatic events. Creating a space for children to voice their concerns following trauma may also help accelerate the recovery process.

## TRAUMA PREVALENCE AND KEY FINDINGS REGARDING ASIAN AMERICAN PACIFIC ISLANDER (AAPI) CHILDREN AND FAMILIES

An estimated 60% of children in the United States are thought to have been exposed to violence, crime, and/or abuse each year,<sup>4</sup> but there is a lack of systematic research within AAPI communities.

- When compared to other racial and ethnic groups, AAPI youth (age 12 and older) have the lowest rates of “non-fatal victimization.”<sup>5</sup>
- 77.5% of Southeast Asian American adolescents have witnessed physical aggression and/or community violence and 43.7% have been victims<sup>6</sup> during their lifetime.
- Physical abuse among Asian American families has been found to be higher than the general population, but sexual abuse and neglect rates are lower in the AAPI community.<sup>7,8</sup>

Children under five are more likely to be exposed to intimate partner violence than older children because they tend to spend more time with caregivers in the home.<sup>9</sup>

- Prevalence rates of family violence in AAPI households are higher when studies examine specific Asian subgroups (e.g., Indian, Filipino, Cambodian, Korean, Vietnamese, etc.) as compared to national, aggregate surveys with multiple ethnic groups.<sup>10</sup>

Trauma prevalence and related symptoms may differ widely and systematically across Asian subgroups:

- Based on a study examining child welfare referrals, Southeast Asian and Samoan families were overrepresented while Chinese, Filipino, and Japanese families were underrepresented relative to these groups’ overall representation in the AAPI community.<sup>11</sup>

- Differences in physical abuse prevalence across Asian subgroups have been attributed to predictors such as pre-migration history/post-migration experiences and trauma (for refugee and immigrant families); childrearing differences; acculturative and adjustment stress; availability of social support, and understanding of the child welfare system and policies in the U.S.<sup>12</sup>
  - Southeast Asian refugees may have a higher risk for developing post-traumatic stress disorder and depression due to war and forced migration in their home countries.<sup>13</sup>

Trauma and violence exposure do not necessitate long-term, negative consequences in all individuals. Multiple factors contribute to the long-term effects of traumatic stress.

- Biculturalism, or the ability to negotiate more than one culture's beliefs, values, and practices, emerged as a protective factor among Southeast Asian teens who had witnessed domestic violence.<sup>14</sup>
- In one study, exposure to violence was not significantly associated with Asian American adolescents' psychological functioning.<sup>15</sup>

Definitions of what constitutes child abuse, maltreatment, and neglect can vary cross-culturally.

- For AAPI immigrants, risk factors for child maltreatment can include respect for authority, family hierarchies, gender socialization, differential acculturation rates between children and parents; traditionally accepted childrearing practices involving shaming and physical punishment; and values related to suffering and fatalism.
- However, no studies have found a causal relationship between these factors and abuse.<sup>16</sup>

## SEEKING HELP FOR CHILDHOOD TRAUMA

You do not need to be a professional or in the mental health care field to report suspected child abuse. Call the National Child Abuse Hotline to make a report: 1-800-4-A-CHILD.

### Culturally Sensitive Trauma Treatments

- **Child-Parent Psychotherapy**<sup>17</sup>: a multi-theoretical treatment model designed specifically for young children under the age of six who have been exposed to trauma and their parents. The intervention is play-based and requires the participation of at least one parent or caregiver of the child to help co-construct a trauma narrative with the child.
- **Trauma-Focused Cognitive Behavioral Therapy**: a structured treatment model used especially with children exposed to sexual abuse, terrorism, disasters, and traumatic grief. It is typically used with school age and older children and includes individual and family sessions. Treatment materials are available in Mandarin, Korean, and Japanese.
- **Integrative Treatment of Complex Trauma**: an intervention for individuals between two and 21 years of age that is particularly useful for children who have experienced multiple and/or chronic trauma.

### Trauma Interventions developed for specific AAPI communities

- **Sikh Healing Collective**: a community-based mental health response developed following the 2012 shooting in a Sikh gurudwara in Oak Creek, WI. Additional information available at: <http://tinyurl.com/lwa8vj9>
- **Southeast Asian Teen Village**<sup>18</sup>: a program designed primarily for teenage girls in the Hmong community, and counseling is administered in a group modality that addresses spiritual, immigration, and trauma-related factors.

## RESOURCES

National Child Traumatic Stress Network website—[www.nctsn.org](http://www.nctsn.org)

Brave Little Panda storybook and mobile app for childhood sexual abuse (available in many Asian dialects)—[http://www.asiansforhealth.org/node/21#.U2glv\\_IdWSo](http://www.asiansforhealth.org/node/21#.U2glv_IdWSo)

Coalition for Asian American Children & Families—<http://www.cacf.org/>

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