CHILDHOOD TRAUMA AND DEVELOPMENTAL PROCESSES

M. Graovac¹, D. Petrić¹, A. Kaštelan¹, J. Rebić², M. Biškup³, T. Frančišković⁴

¹Department for Adolescent Psychiatry, University Psychiatric Clinic Rijeka, Clinical Hospital Centre Rijeka, Rijeka, Croatia, ²Department of Psychiatry and Psychological Medicine, School of Medicine, University Psychiatric Clinic Rijeka, Clinical Hospital Centre Rijeka, ³School of Medicine, ⁴Department of Psychiatry and Psychological Medicine, School of Medicine, Rijeka, Croatia

Introduction: Children can experience traumas in family, school and society, as well as participants in natural disasters, terrorism, war and civilian casualties. Their reactions depend on age, sex, individual ego strength, coping strategies, but also on the reactions of child's surrounding.

Objectives: Clinical entities associated with the traumatic experience in children are common in psychiatric practice. Frequent manifestations of these experiences are classical clinical picture of PTSD, as well as depression, anxiety, somatization, behavior disorder, dissociative reactions, etc.

Aims: The child's perception of the traumatic event, and subsequent developing psychiatric symptoms were the aims of this case report.

Methods: We present difficulties in growing a 9 years old girl, whose father, after being stricken at the front and had been treated for PTSD, attempted suicide.

Results: Faced with the traumatic situation, the patient used a self-protective mechanism suppressing negative emotions and memories to combat the negative effects of traumatic experience. Ways of coping were associated with the low degree of reliance with mother, brother and siblings. During adolescence she manifested symptoms intensified anxiety and depresion, guilt to encourage a sense of protection.

Conclusions: Secure attachment is the first line of defense against psychopathology launched traumatic experience. In terms of traumatic events in the child unless objective factors related to the traumatic event affects a child's perception of danger / threat, and perceptions of care required and provided by others. In that space shape the emotional experience of the child, which includes a sense of helplessness, irretrievable loss, anger and betrayal.