



International Society of Psychiatric-Mental Health Nurses

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Prevention of Mental Health Sequela after Trauma in Youth

A Statement of The International Society of Psychiatric-Mental Health Nurses

Introduction

The International Society for Psychiatric Mental Health Nurses (ISPN) recognizes the need to promote mental health and well-being for all individuals, families, and communities across the world. ISPN's mission is "To support advanced-practice psychiatric-mental health nurses in promoting mental health care, literacy, and policy worldwide." In this policy statement, ISPN aims to highlight the ramifications of human-made disasters that contribute to the trauma of youth, families, and communities and to provide recommendations that promote both prevention and effective post-experience interventions to ameliorate long-term sequelae.

Background

The International Society of Psychiatric Nurses (ISPN) condemns human-made disasters that contribute to the traumatization of future generations around the world. Human-created disasters come in a variety of forms including environmental devastation leading to climate change and other catastrophes including family separation, war, terrorism, gun violence, systemic racism, and poverty. As an organization, we have great concern for both the safety and mental and physical well-being of all individuals and communities affected by these atrocities, as well as a shared outrage and sorrow over the loss of life that may occur as a result. We are particularly concerned about the impact of trauma, secondary trauma, and generational trauma associated with these preventable situations. We urge compassion toward all who have been impacted by these events and emphasize the need to do better in the face of the enduring impact of trauma on the growth and development of children. This paper is grounded in trauma research related to adverse childhood experiences (ACEs) (CDC, 2024) but incorporates a broader scope of recent concern related to caregiver or family separation, war, gun violence, and poverty. This list is not exhaustive but supplies context related to the impact of trauma on youth.

Parental/Caregiver Separation

Family separation due to imprisonment or immigration enforcement can have devastating effects on children and youth. Children separated from a caregiver often experience feelings of abandonment, stigma, and grief, which can disrupt their emotional development and lead to issues such as anxiety, depression, and behavioral problems. The absence of a stable parental figure during these formative years can also exacerbate feelings of insecurity, making it challenging for children to form healthy relationships and trust in the future. Moreover, this trauma can have long-lasting impacts, potentially affecting the child's education, social behavior, and overall mental health well into adulthood.

Similarly, the forced separation of families due to immigration policies can have deep psychological ramifications. According to the 2021 Social Policy Report published by the Society for Research in Child Development, “Given the sensitive nature of early development and the hardship and trauma that many migrant children have experienced, immigration policies that do not prioritize child wellbeing, and in fact, neglect or harm it, can have lifelong negative consequences on physical and psychological wellbeing” (Edyburn & Meek, 2021, p. 1). Children separated from their parents often display symptoms of post-traumatic stress disorder (PTSD), depression, and separation anxiety, even after being reunited. The loss of a primary caregiver disrupts the child's sense of safety and stability, which can lead to significant developmental challenges. The trauma is particularly acute for children who may already be fleeing violence or hardship in their home countries. Long-term impacts can include emotional distress, impaired cognitive development, and heightened vulnerability to future mental health issues, highlighting the need to minimize family separation and ensure comprehensive support services to address these harms.

War

War and armed conflict have profound mental health impacts on children and youth, who often experience trauma from direct exposure to violence, loss of family members, and forced displacement. Children in regions of unrest are at increased risk of PTSD, anxiety, and depression. Constant fear, witnessing atrocities, and disruption of everyday life can lead to severe emotional distress and long-term psychological issues. For instance, youth exposed to war are more likely to exhibit symptoms of PTSD and other trauma-related disorders, especially if they have experienced loss or witnessed violence firsthand (APA, 2022).

Beyond immediate trauma, the chronic stress of living in a war-devastated environment can exacerbate mental health challenges and contribute to the multigenerational transmission of trauma (DeAngelis, 2023). The destruction of social support systems, including the loss of stable

caregivers and community networks, further intensifies the emotional burden on affected children. The compounded effects of daily stressors—such as displacement, lack of access to education, and scarcity of basic needs—worsen the psychological impact. Over time, these children may struggle with learning difficulties, behavioral issues, and an increased risk of developing severe mental health conditions that can also persist into adulthood. Additionally, the long-term impact of trauma can be transmitted for generations psychologically and physiologically, as we are starting to understand the epigenetic sequelae of trauma.

Gun Violence

In 2022, gun violence was the leading cause of death among children and teens in the United States (Villarreal et al., 2024). Gun violence contributes to more deaths than motor vehicle accidents, cancers, and overdoses (Villarreal et al., 2024). Seven children die every day in the United States related to gun violence. Worldwide, 600 people die each day related to gun violence. Gun violence disproportionately impacts children of color and children of lower socioeconomic status globally. Black children and teens are five times more likely to die from gun violence as compared to white children and white teens (Gramlich, 2023; Panchal, 2024). Gun assaults accounted for roughly two-thirds of firearm deaths among both adolescents and younger children in 2022. The second most common type of firearm death among adolescents was firearm suicides (31%), and among younger children was accidental gun deaths (19%) (Panchal, 2024). Since 1997 there have been 1,453 school shootings within the US; 383,000 students have experienced gun violence since 1999. The US has significantly more school-based shootings when compared to other comparable countries worldwide. The US has 57 times as many school shootings as other industrialized countries (Rapa et al., 2024).

Children and youth who experience gun violence have an increased risk of a diagnosis of PTSD and anxiety. Children who are exposed to gun violence can experience more absences at school and impaired concentration while at school, both of which can contribute to worsened academic performance (Panchal, 2024; Rossin-Slater, 2022). Suicide is the leading cause of death in adolescents, and access to a firearm in the home is a significant risk factor for suicide. Deisenhammer et al., (2009) found that 50% of suicide attempts occurred within ten minutes of the initial thought, further emphasizing the importance of limiting access to firearms for youth and adolescents. Notably, communities that experienced a school shooting found that there was a higher amount of antidepressant use among youth and higher risk of suicide following the incident. Schools that experience a school shooting also saw a decrease in standardized test scores following the shooting and an increased likelihood of students needing to repeat a grade in the two years following (Panchal, 2024; Rossin-Slater, 2022). The impact of gun violence on children is far-reaching and can negatively affect them lifelong.

Poverty

Currently, 16% of children in the US live in Poverty, which equates to 11.5 million children, while worldwide, there are 333 million children who live in poverty (Salmeron-Gomez et al., 2023). Children can experience poverty in multiple dimensions, which can include limited access to shelter, food, water, education, and healthcare (Salmeron-Gomez et al., 2023). Multidimensional poverty occurs when children have limited access to resources that promote their survival, development, and safety. This form of poverty has detrimental effects on children that can include delays in cognitive and physical development (Belete, 2020). Children who grow up in homes that experience severe poverty are twice as likely to die as children who do not experience poverty, and this number is sometimes higher depending on the region location (Salmeron-Gomez et al., 2023).

Psychologically, poverty can impact the amount of white and gray matter that a child has within their brain and can affect brain growth and development. Children who experience poverty have less gray matter, which directly impacts school readiness and achievement within school (Blair & Raver, 2016; Hair et al. 2015). Children who grow up in poverty are at an increased risk of toxic stress that can increase the risk of depression, anxiety, and self-harm. Looking to adverse childhood experiences (ACE), children who grow up in poverty are at an increased risk of a higher ACE score, which can significantly impact whole health (Walsh et al., 2019). Children with two or more ACEs were 45% more likely to be bullied or excluded from activities by fellow classmates (Trompeter et al., 2023). Looking to the impact of ACEs in adulthood, adults with four or more ACEs had an increased risk in depression, anxiety, self-harm activity, a suicide attempt, and engage in injection drug use (Felitti et al., 1998). Childhood poverty can have effects that follow children throughout their life.

Conclusion

As an international psychiatric mental health nursing organization, ISPN advocates for the emotional and physical health and wellbeing of children. Trauma in childhood can jeopardize the health and wellbeing of children and can have lifelong effects. Although we acknowledge that the solutions to these global challenges are complex and multifaceted, the impact of trauma on the wellbeing of future generations must be considered when planning trauma prevention and effective post-experience interventions.

Recommendations

1. Advocate for compassionate immigration and refugee policies to protect families and individuals displaced by conflict, poverty, and violence.

2. Collaborate and strengthen partnerships with organizations that support prevention and intervention efforts related to best practices for children at risk for trauma or who have been traumatized.
3. Lobby and advocate for re-evaluation of gun laws and policy particularly within countries with higher rates of violence and establishing child access prevention laws.
4. Encourage expansion of safety net programs globally to allow for children and families to meet their basic needs of access to healthcare, clean water, and sanitation.
5. Educate current and future healthcare providers about trauma-informed care, ACEs and the broader multigenerational impact of trauma.
6. Promote education of the general population about to ACEs and trauma responses in children.
7. Fund research initiatives to study the short-term effects and long-term impacts of trauma caused by human-made disasters, emphasizing prevention and recovery strategies.

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Accepted by Policy Committee: January 15, 2025

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Approved by Board: February 19, 2025