Exposure criteria

DSM-5-TR PTSD >6yo	DM-ID-2	ICD-11 PTSD	ICD-11 CPTSD	DSM-5-TR PTSD 6yo & under	DC:0-5 version 2	Others
 Exposure to actual or threatened death, serious injury, or sexual violence in one (or more) of the following ways : Directly experiencing Witnessing, in person Learning the event(s) occurred to a close family member or close friend. Experiencing repeated or extreme exposure to aversive details. Note: Does not apply to exposure through electronic media, television, movies, or pictures, unless this exposure is work related. 	The person has been exposed to a traumatic event that they experience as being traumatic. This can include exposure to actual or threatened death, serious injury, or sexual violence in one (or more) of the following ways, but may also be activated by less serious events. No adaptation to the 4 criteria, but the threshold is often lowered for vulnerability and consequent activation of these conditions.	Exposure to an event or situation (either short- or long-lasting) of an extremely threatening or horrific nature. Such events include, but are not limited to, directly experiencing natural or human-made disasters, combat, serious accidents, torture, sexual violence, terrorism, assault or acute life-threatening illness (e.g., a heart attack); witnessing the threatened or actual injury or death of others in a sudden, unexpected, or violent manner; and learning about the sudden, unexpected or violent death of a	Exposure to an event or series of events of an extremely threatening or horrific nature, most commonly prolonged or repetitive events from which escape is difficult or impossible. Such events include, but are not limited to, torture, concentration camps, slavery, genocide campaigns and other forms of organized violence, prolonged domestic violence, and repeated childhood sexual or physical abuse.	 Exposure to actual or threatened death, serious injury, or sexual violence in one (or more) of the following ways : Directly experiencing Witnessing, in person Learning the event(s) occurred to a parent or caregiver figure. 	 Exposed to significant threat of or actual serious injury, accident, illness, medical trauma, significant loss, disaster, violence or physical/sexual abuse Directly experiencing Witnessing, in person. Learning the event occurred to a significant person in the infant's/child's life 	DM-ID-2: Typically the lower the developmental age, the lower the threshold that qualifies as traumatic. ICD-11 PTSD: No age differences ICD-11 CPTSD: No age differences

Other criteria

	DSM-5-TR PTSD >6yo :	DM-ID-2	ICD-11 PTSD : 3 main clusters	ICD-11 CPTSD : PTSD plus 3 more clusters. For <i>problems in affect</i>		DSM-5-TR PTSD 6yo & under	DC:0-5 version 2	Others
	4 main clusters	DM-1D-2	ICD-II PISD : 5 main clusters	<i>regulation (PAF)</i> , some examples can be in multi-areas	Intrusive/ Re- experiencing Symptoms	• Intrusive memories; may not appear distressing, and may be expressed in play reenactment	 Play or behavior that reenacts Preoccupation conveyed by repeated statements or questions 	DM-ID-2: No modifications, or see section for
Intrusive/Re- experiencing Symptoms	 Intrusive memories Distressing dreams Dissociative reactions Psychological distress to reminders Physiological response to reminders For children >6 Repetitive play with themes or aspects Frightening dreams, unrecognizable content 	 Intrusive memories: Behavioral acting out of traumatic experiences. Possibility of self-injurious behavior. Distressing dreams: Frightening dreams without recognizable content Dissociative reactions: Trauma specific enactments. Episodes can appear to be symptoms of psychosis. Psychological distress to reminders: Disorganized or agitated behavior. Physiological response to reminders: 	 Intrusive memories Distressing dreams Dissociative reactions Psychological distress to reminders Physiological response to reminders 	• Dissociative symptoms when under stress (PAF)		 Distressing dreams; may not be able to tell if content is related Dissociative reactions; reenactment may occur in play Psychological distress to reminders Physiological response to reminders 	 about some aspect. Distress is not necessarily apparent. Repeated nightmares, which may or may not be linked, increase in frequency after. Dissociative episodes; freezes, stills, or stares and is unresponsive to environmental stimuli. Distress at reminders Physiological reactions 	children older than 6. ICD-11 PTSD: Same clusters for all ages, possible differences in Developmental Presentations section. ICD-11 CPTSD: Same clusters for all
Avoidance Symptoms	 Reenactment in play Avoiding or efforts to avoid memories, thoughts, feelings 	No modification Lower and broader threshold for avoidance of stimuli.	• Avoidance of internal memories or thoughts		Avoidance Symptoms	 Avoiding or efforts to avoid activities, places, physical reminders Avoiding or efforts to avoid people, conversations, interpersonal situations 	Attempts to avoid trauma-related stimuli.	ages, possible differences in Developmental Presentations section.
	 Avoiding or efforts to avoid external reminders. 	Avoidance behaviors may be viewed as "noncompliance".	• Avoidance of external reminders					
changes in • cognition and a mood • • • • • • • •	 Inability to remember Negative beliefs or expectations about oneself, others, or the world. Distorted cognitions about the cause or consequences Negative emotional state Diminished interest/participation in activities Feelings of detachment or estrangement from others Inability to experience positive emotions 	 Inability to remember: Problems with recall may appear to be function of cognitive impairment. Negative beliefs or expectations about oneself, others, or the world: No modification Distorted cognitions about the cause or consequences: No modification Negative emotional state: No modification Diminished interest/participation in activities: No modification Feelings of detachment or estrangement from others: May be viewed as "noncompliance". 	D	 Negative beliefs about oneself. Difficulties in sustaining relationships and in feeling close to others Emotional numbing (PAF) Inability to experience pleasure or positive emotions (PAF) 	Negative changes in cognition and mood	Negative Changes in Cognition • Increased negative emotional states • Diminished interest/participation in activities • Socially withdrawn behavior • Reduction in positive emotions	Dampening of positive emotional responsiveness • Increased social withdrawal • Reduced expression of positive emotions • Markedly diminished interest or participation in activities • Increased fearfulness or sadness	
					Arousal Symptoms	 Irritable behavior and angry outbursts Reckless or self-destructive behavior Hypervigilance Exaggerated startle response Problems with concentration Sleep disturbance 	 Increased irritability, outbursts of anger or extreme fussiness, or temper tantrums Hypervigilance Exaggerated startle response Difficulty concentrating Sleep difficulties 	
		• Inability to experience positive emotions: Risk of false positives. May be of limited utility.			Other	 Duration is over 1 month Distress or impairment in 	Symptoms or caregiver accommodations in response to the	
Arousal Symptoms	 Irritable behavior and angry outbursts Reckless or self-destructive behavior Hypervigilance Exaggerated startle response Problems with concentration Sleep disturbance 	No modification.	• Persistent perceptions of heightened current threat, for example as indicated by hypervigilance or an enhanced startle reaction to stimuli such as unexpected noises.	• Heightened emotional reactivity to minor stressors, violent outbursts, reckless or self-destructive behaviour (PAF)		relationships with parents, siblings, peers, caregivers, or school behavior	symptoms, significantly affect the infant's/child's or/and family's functioning.	
Other	 Duration is over 1 month Distress or impairment in areas of functioning. 	No modification.	 Duration for at least several weeks Impairment in areas of functioning 	• Impairment in areas of functioning. If functioning is maintained, it is only through significant additional effort.				

Purposes of this document:

- Quick reference for those already familiar with full works.

- To use for training, by those already familiar with full works.

American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision. Washington, DC, American Psychiatric Association, 2022

DM-ID-2: Diagnostic manual, intellectual disability: a textbook of diagnosis of mental disorders in persons with intellectual disability. National Association for the Dually Diagnosed. 2017

International Classification of Diseases, Eleventh Revision (ICD-11), World Health Organization (WHO) 2019/2021

ZERO TO THREE. (2021). DC:0–5TM: Diagnostic classification of mental health and developmental disorders of infancy and early childhood(Version 2.0). Washington, DC: Author. (Original work published 2016)

Compiled by Gwendolyn Downing, version 8.29.22

Other criteria	for	6yo	and	under	
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