

March 2, 2022

The Honorable Patrick Leahy
Chair
Appropriations Committee
U.S. Senate
Washington, DC 20510

The Honorable Rosa DeLauro
Chair
Appropriations Committee
U.S. House of Representatives
Washington, DC 20515

The Honorable Richard Shelby
Ranking Member
Appropriations Committee
U.S. Senate
Washington, DC 20510

The Honorable Kay Granger
Ranking Member
Appropriations Committee
U.S. House of Representatives
Washington, DC 20515

Dear Chairman Leahy, Ranking Member Shelby, Chairwoman DeLauro, and Ranking Member Granger,

On behalf of the Child Trauma and ACEs Policy (CTAP) Working Group, made up of more than 30 national organizations, thank you for your leadership to prevent and help children and youth experiencing trauma. As the seriously harmful adverse effects of the COVID-19 pandemic on children continue to emerge, we urge you to swiftly pass the Fiscal Year 2022 (FY22) Appropriations bills to ensure our communities are supported with the highest funding possible for the key priorities outlined below. We also commend the numerous community funding projects included in these bills that employ trauma-informed practices to strengthen communities and help all children thrive.

The Federal response to child trauma and adverse childhood experiences (ACEs) work has never been timelier. A recent report published by the World Health Organization found multiple health and social problems caused by ACEs cost the United States over \$740 billion a year in lost productivity. In the U.S., during the pandemic, nearly two in three young people expressed that they were feeling down, depressed, or hopeless. That is a 200 percent increase since 2018. And according to the Children's Hospital Association, in just the first half of 2021, children's hospitals reported a 45% increase in the number of cases of self-injury and suicide in children ages 5-17 than during the same period in 2019. Additionally, as we now recognize, COVID continues to have a disproportionate impact on children and youth of color.

We ask that you continue to support the integration of trauma-informed policies and practices into already existing Federal programs. We also ask that you support those who work with children and youth, enabling a sustainable workforce environment and nurture the partnership of schools, communities, and families to meet the current needs of children and prevent the devastating consequences of unaddressed trauma.

As you finalize the FY22 appropriations bills, CTAP requests your support for these key priorities:

Interagency Task Force on Trauma-Informed Care (SAMHSA)

In 2018, Congress passed the SUPPORT Act (P.L. 115-271) which created an Interagency Task Force on Trauma-Informed Care chaired by SAMHSA. This Task Force was directed to identify, evaluate, and make recommendations regarding (1) best practices with respect to children and youth, and their families as appropriate, who have experienced or are at risk of experiencing trauma; and (2) ways in which Federal

agencies can better coordinate to improve the Federal response to families impacted by substance use disorders and other forms of trauma. The Interagency Task Force on Trauma-Informed Care is expected to release a report shortly.

- CTAP recommends dedicated funding of \$1 million for this Task Force in FY22, as included in the House's FY22 Appropriations bill, to continue its work and support an online clearinghouse. We applaud the strong supporting language included in the Senate's draft legislation but know that dedicated funding is needed to ensure the Task Force can achieve its goals.

Adverse Childhood Experiences Research (CDC's Injury Center)

The Center for Disease Control and Prevention's (CDC) National Center on Injury Prevention (NCIPC) collects and reports the data on ACEs and uses this data to support comprehensive prevention strategies. The CDC is also encouraged to report on the prevalence of ACEs across geography, race and ethnicity, disability, and socioeconomic status. This work supports the Preventing ACEs: Data to Action grant, which helps communities better understand the burden of ACEs and implement strategies to prevent ACEs from occurring. Currently, four state public health departments receive this funding. It also currently funds the Preventing ACEs: Leveraging the Best Available Evidence, focused on research. Local health centers are well-positioned to understand community context around childhood trauma and address equity issues within their local community.

- CTAP supports \$10 million in continued funding for ACEs surveillance, prevention, and research at NCIPC. This increase would allow six additional states to implement ACEs prevention programs. We also support increases for critical topics at NCIPC that help ensure kids, families and communities are safe and can thrive, including firearm injury and mortality prevention, child sexual abuse prevention, youth violence prevention, and domestic and sexual violence prevention.

Strategies to Support Children Exposed to Violence Initiative (Department of Justice's OJJDP)

Funding under the Children Exposed to Violence initiative is used to develop support services for children exposed to violence in their homes, schools, and communities. It is preventing violence by identifying and addressing the needs of children who are experiencing or witnessing violence, abuse, and other adverse childhood experiences. The initiative also provides technical assistance for child and family-serving organizations to help them better recognize and help families at risk for violence. Several of last year's grantees are using these grants to also expand their culturally relevant outreach efforts.

- CTAP appreciates and supports the House and Senate proposals this year to increase the funding to \$10 million for this initiative in FY22.

Project AWARE (SAMHSA)

Project AWARE (Advancing Wellness and Resilience in Education) builds and expands the capacity of State Educational Agencies, in partnership with State Mental Health Agencies, to increase student awareness of mental health issues, provide training for school personnel on mental and behavioral health, and connect school aged youth with needed mental health services. Project AWARE grantees, through the collaboration of state and local systems, seek to promote the healthy development of school-aged youth, provide support to students with significant behavioral and mental health needs,

and prevent youth suicide and violence. Considering the trauma and isolation students and families have suffered through the course of the pandemic, funding to build more comprehensive school-based mental health programs and services is all the more urgent. We thank you for the supplemental funding included in COVID-19 relief packages.

- We ask that this program continue to receive robust funding in FY22.
- We support the Senate's inclusion of \$25 million within Project AWARE funds to be marked for Section 7134 school mental health grants. Even though these programs have been proven to work repeatedly, very few schools around the country have implemented such programs because they lack the funding to do so. This specific funding allotment will encourage these programs to take root and expand.

Address childhood trauma through Head Start and Early Head Start (HHS, ACF's Office of Head Start)

Head Start and Early Head Start programs represent a key opportunity to support many of the children and families who have been most adversely affected during this past year. The COVID-19 pandemic has destabilized many of the at-risk families who participate in Head Start and compounded existing needs to address the needs to address childhood trauma. This is demonstrated by increased domestic abuse and plummeting reports of child abuse and neglect. Funding targeted through Head Start to address trauma is shown to have dramatic long-term cost savings.

- Building on initial investments made in previous appropriation bills, we recommend additional funding to further invest in this proven intervention in FY22, enabling Head Start and Early Head Start programs to address childhood trauma.

Child Abuse Prevention and Treatment Act (CAPTA) (HHS, ACF's Children's Bureau)

CAPTA is the key federal legislation dedicated to preventing child maltreatment and supporting families to heal from abuse. It addresses all forms of abuse and neglect, including physical, sexual, emotional, and medical, and works to support families at highest risk for maltreatment through community-based supports. In January 2021, H.R. 485, the Stronger Child Abuse Prevention and Treatment Act, was reintroduced in the House with strong bipartisan cosponsorship – following unanimous support by the House of Representatives for the same measure last Congress. Recognizing the fundamental challenge of funding to strengthen CAPTA's impact, this bill would increase authorization levels for both Title I and Title II to \$270 million each, for a total of \$540 million. Since then, we appreciate the recognition by Congress for the need of this program by including funding for CAPTA in the American Rescue Plan. COVID has only highlighted the clear need for substantially increasing appropriations to improve outcomes and support for children and families. The isolation and economic challenges presented by the pandemic underscore CAPTA's role in addressing the stresses families are facing over this past year.

- CTAP strongly supports increasing authorization levels for CAPTA to \$540 million in FY22.

Other Opportunities:

CTAP also recommends additional funding to the Department of Labor in coordination with HHS to assist with trauma-informed approaches for youth job-training programs supported by federal funding streams. This targeted investment would support training and hiring of trauma-informed staff,

community partnerships for treatment, peer support models, and support for employer to hire young adults transitioning back into the workplace following the pandemic.

CTAP remains supportive of increased funding for many critical programs at HHS that prevent and address childhood trauma. This includes SAMHSA's Healthy Transitions program, HRSA's Behavioral Health Workforce Education and Training program, the funding for the National Health Service Corps to improve opportunities for paraprofessionals and loan repayment for health professionals, and CDC's National Collaboration to Promote Health, Wellness, and Academic Success of School-Age Children, which promotes emotional wellness strategies, trainings, and professional development opportunities for local out-of-school time providers.

Again, our sincere appreciation for the leadership you have demonstrated in responding to the needs of children and youth throughout the COVID-19 pandemic. The members of the Child Trauma and ACEs Policy (CTAP) Working Group will gladly act a resource should you have any questions. For questions, our co-chairs are Kiersten Stewart, Futures Without Violence, at kstewart@futureswithoutviolence.org, Samuel Chasin, YMCA of the USA, at samuel.chasin@ymca.net, and Marlo Nash, Campaign for Trauma-informed Policy and Practice, at marlo@traumacampaign.org.

Sincerely,

Afterschool Alliance

American Academy of Pediatrics

American Association of Child and Adolescent Psychiatry

Boys & Girls Club of America

Bellxcel

Campaign for Trauma-Informed Policy & Practice (CTIPP)

Center for Law and Social Policy (CLASP)

Child and Adolescent Health Measurement Initiative

Committee for Children

Communities In Schools

Futures Without Violence

Girls Inc.

MENTOR National

National Crittenton

National Head Start Association

National Youth Employment Coalition

Omni Visions, Inc

Prevent Child Abuse America

RAINN

Social Current

Starr Commonwealth

Sumner M. Redstone Global Center for Prevention and Wellness

The Center for Community Resilience

The Family Focused Treatment Association

Trust for America's Health

YMCA of the USA

YWCA USA