April 25, 2022

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

The Honorable Richard Shelby Ranking Member 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 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 around preventing children and youth from experiencing trauma and addressing it when it does occur.

Increased support to prevent and address child trauma is needed now more than ever. According to new data from the Centers for Disease Control and Prevention (CDC), in 2021, more than a third (37%) of high school students reported they experienced poor mental health during the COVID-19 pandemic and 44% reported they persistently felt sad or hopeless during the past year. The new analyses also describe some of the severe challenges youth encountered during the pandemic: more than half (55%) reported they experienced emotional abuse by a parent or other adult in the home, including swearing at, insulting, or putting down the student; 11% experienced physical abuse by a parent or other adult in the home, including hitting, beating, kicking, or physically hurting the student; and more than a quarter (29%) reported a parent or other adult in their home lost a job.

We are greatly encouraged and remain appreciative of new funding, increased funding, robust report language and new community directed funding programs related to trauma-informed care in the Fiscal Year 2022 (FY22) appropriations bills. As you consider Fiscal Year 2023 (FY23) appropriations funding, we ask that you build on these successes and 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.

For FY23, we request 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 parents and 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 \$8.3 million for this Task Force in FY23 to continue its work and support an online clearinghouse. We applaud the inclusion of \$1 million in FY22.

Adverse Childhood Experiences Research (CDC's Injury Center)

The CDC's National Center on Injury Prevention (NCIPC) collects and reports the data on ACEs and uses this data to support comprehensive prevention strategies. 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. When CDC funded six state-level entities in 2020, there was great interest in the original grant announcement, with over 30 applicants. Increased funding would address the large demand for this novel and important work. The ACEs funding stream also currently funds the Preventing ACEs: Leveraging the Best Available Evidence program, 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 \$15 million in continued funding for ACEs surveillance, prevention, and research at NCIPC, which would enable CDC to expand surveillance and innovative ACEs prevention activities to additional state health departments or increase support to existing sites. We also support increases for critical topics at NCIPC that help ensure kids, parents, families, and communities are safe and can thrive, including firearm injury and mortality prevention, child sexual abuse prevention, community violence 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 prevents violence by identifying and addressing the needs of children who are experiencing or witnessing violence, abuse, and other adverse childhood experiences while supporting their parents. 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 supports \$30 million for this initiative in FY23, which would reduce violence in families and communities by focusing on prevention and early intervention. Additional funds would allow for more communities to participate and expand the types of organizations who could participate.

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 in partnership with community-based organizations that address equity is even 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 FY23.
- > We greatly appreciate inclusion of \$7 million within Project AWARE funds to be marked for Section 7134 school mental health grants and ask that these funds increase to \$25 million, as authorized. 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. Continuing to grow 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 the existing need 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 FY23, 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 law dedicated to preventing child maltreatment and supporting families to heal from abuse and ensure meaningful parent leadership in systems improvement. It addresses all forms of abuse and neglect – including physical, sexual, emotional, and medical – and supports families at highest risk for maltreatment through community-based support. In March 2021, the House passed a strong CAPTA reauthorization bill, H.R. 485, the Stronger Child Abuse Prevention and Treatment Act, with bipartisan support. In June 2021, the Senate HELP Committee approved a separate and also strong and bipartisan reauthorization bill, S. 1927, the CAPTA Reauthorization Act. Recognizing the fundamental challenge of funding to strengthen CAPTA's impact, these bills would increase authorization levels for Titles I and 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 and including modest increases to CAPTA in FY22 appropriations. It is critical that Congress both reauthorize CAPTA and increase its funding to realize the goals and vision of this important law.

- CTAP urges Congress to reauthorize CAPTA in 2023.
- CTAP also strongly supports increasing authorization levels for CAPTA to \$540 million in FY23 \$270 million per Title in line with the House and Senate reauthorization bills.

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 employers 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 Jen Kurt, Campaign for Trauma-informed Policy and Practice, at jen@traumacampaign.org.

Sincerely,

Afterschool Alliance

American Academy of Pediatrics

Boys & Girls Clubs of America

Campaign for Trauma-Informed Policy and Practice

Child and Adolescent Health Measurement Initiative

Children's Home Society of America

CLASP

Committee for Children

Communities in Schools

Family Focused Treatment Association

Futures Without Violence

Girls Inc.

MENTOR

National Center on Shared Leadership®

National Crittenton

National Head Start Association

National Parent Teacher Association

National Youth Employment Coalition

Parents Anonymous® | Raising the Future

RAINN

Social Current

Starr Commonwealth

Strengthening Families All Around the World

Trust for America's Health

YMCA of the USA

YWCA USA