

# Executive Summary

The ongoing toll of family, school, and community violence, the continuing threat of terror attacks, and the widespread destruction and dislocation caused by Hurricane Katrina have heightened concerns about the thousands of children who are exposed to trauma. In addition to the immediate stress associated with exposure to violence, abuse, natural disasters, severe illness or injury, loss of loved ones due to violence or accident, or forced relocation, new research is documenting the profound and lasting effects of trauma on brain development and both physical and emotional health. Working with public officials, service providers, schools, and families, health grantmakers can play important roles in both preventing the causes and addressing the consequences of exposure to trauma. To make a difference, funders must understand the effects of trauma on children's well-being, know about current efforts to address childhood trauma and the barriers to change, and be able to seize opportunities as they arise.

## Effects of Exposure to Trauma in Childhood

Trauma has both immediate and long-term effects, producing a cascade of physiological and neurological responses that can lead to enduring alterations in brain development and function. Without appropriate interventions, the effects of trauma exposure can follow children throughout their lives, impeding their healthy development and their transition to adulthood. For example, trauma in childhood affects brain development. In some children, areas of the brain associated with anxiety and fear may be overdeveloped, while areas necessary for learning may be underdeveloped (National Clearinghouse on Child Abuse and Neglect Information 2001). Moreover, trauma often precipitates mental health problems, including fear, anxiety, flashbacks, nightmares and other sleep disturbances, poor concentration, regressive behavior, and suicidal thoughts. Finally, trauma relates to greater risk for physical health problems and poorer health outcomes. For example, traumatized children are more likely to suffer from allergies, asthma, and gastrointestinal problems (Graham-Bermann and Seng 2005; Perry 2000).

## Challenges to Addressing Childhood Trauma

While knowledge and awareness about the impact of childhood trauma is increasing, comprehensive and coordinated efforts to prevent childhood trauma and address its consequences are lacking in most communities. There are many challenges to rallying families, schools, and communities to address childhood trauma, including:

- stigma and lack of awareness regarding mental health;
- gaps in knowledge about childhood exposure to trauma and effective interventions;
- fragmentation of existing services among various systems that serve children with mental illness (including mental health, juvenile justice, human services, child welfare, and public health) creating gaps in service, duplication of efforts, and overly complex systems to navigate;
- lack of capacity in schools;
- an inadequate supply of trained providers; and
- inadequate attention to issues of cultural competency.

## Current Efforts to Address Childhood Trauma

Public officials, grantmakers, service providers, and others are turning their attention and their support to programs that provide early identification, intervention, and treatment services to children exposed to trauma, as well as other children with mental health needs.

*Increasing Awareness.* The federal government and national non-profit organizations are working to increase awareness of child trauma through campaigns such as *Caring for Every Child's Mental Health* and the *Campaign for America's Mental Health*.

*Preventing Childhood Trauma.* Current efforts include are *Stop Bullying Now!*, a federal initiative to educate school personnel, students, and families about the impact of bullying and ways to prevent it; *Safe Start*, a program of the U.S. Department of Justice to reduce the impact of family and community violence on young children, between the ages of zero and six.; *Safe Schools, Healthy Students*, an initiative of the Substance Abuse and Mental Health Services Administration (SAMHSA) to foster collaborations among child-serving agencies

and schools to create safer school environments, provide prevention and early intervention services, and promote healthy development.

*Identifying Children Exposed to Trauma.* The first step in helping to treat children with a history of trauma or mental illnesses is to identify troubled children early. The state of Ohio is leading the nation with creative efforts to identify children in middle school, high school, and even early childhood settings.

*Increasing Access to Early Intervention and Treatment.* Several models for promoting early childhood mental health are currently being tested. The mental health consultant model is one approach that is being used to bolster the ability of child care workers to meet mental health needs. The National Center for Child Traumatic Stress and the National Child Traumatic Stress Network are working to test new interventions and disseminate evidence-based models of care.

*Developing Integrated Systems of Care.* The federal government, in partnership with states and communities, is working to reduce the fragmentation of systems serving children with mental health needs and their families. SAMHSA's *State Infrastructure* and *System of Care* grants programs are supporting model interventions, policies, and procedures.

*Enhancing School-Based Assessment, Services, and Supports.* Although federal law requires schools to identify children with mental health needs and provide services necessary to maximize their learning, many schools lack the resources and trained personnel to do so. Public and private sector organizations are working to develop guidelines and tools for this purpose.

## Opportunities for Health Philanthropy

Health grantmakers across the country are addressing the mental health needs of children exposed to trauma. Among the strategies available to help address childhood trauma and its lasting effects grantmakers can:

- support early childhood mental health interventions;
- support school-based or school-lined programs;
- support services for populations at high risk for mental disorders (such as those living in violent households);

- prevent further traumatization by addressing the environment in which trauma occurs;
- address workforce shortages;
- support needs assessments;
- fund research and analysis to expand the knowledge base about child mental health, the causes and consequences of child traumatic stress, and promising approaches for addressing mental health needs;
- promote the development of culturally competent services; and
- help support development of strong community leaders who are passionate about their issues and who can bring clinical, policy, and other expertise together.

## Conclusion

Health grantmakers have a wide range of strategies available to them to aid children exposed to trauma. In states and localities where public agencies and nonprofit organizations are already working to educate people about child trauma and its consequences, grantmakers can use their resources to complement these initiatives by strengthening leadership, increasing awareness, and promoting collaboration. In areas where child trauma has yet to be addressed effectively, health grantmakers can be the catalysts that prompt families, schools, and communities to work together to develop an integrated system of care with a comprehensive array of services and supports that can meet the individualized needs of children and their families. Grantmakers may support small portions of projects including research and evaluation or may develop comprehensive initiatives that fund projects from planning through development, implementation, and evaluation, to create sustainable systems change. By supporting the range of efforts needed to prevent childhood trauma and address its consequences, grantmakers will play a critical role in helping traumatized children move toward a brighter future.

## Sources

- Graham-Bermann, Sandra and Julia Seng, "Violence Exposure and Traumatic Stress Symptoms as Additional Predictors of Health Problems in High-Risk Children," *The Journal of Pediatrics* 146(3):349-354, March 2005.
- National Clearinghouse on Child Abuse and Neglect Information, *In Focus: Understanding the Effects of Maltreatment on Early Brain Development* (Washington, DC: Administration for Children and Families, U.S. Department of Health and Human Services, 2001).
- Perry, Bruce, "Trauma and Terror in Childhood: The Neuropsychiatric Impact of Childhood Trauma" in I. Schulz, S. Carella, and D. O. Brady, eds., *Handbook of Psychological Injuries: Evaluation, Treatment, and Compensable Damages* (Washington, DC: American Bar Association Publishing, 2000).