

Trauma-Informed Care for Children and Families Act

Senators Dick Durbin (D-IL), Heidi Heitkamp (D-ND), and Al Franken (D-MN)

Background

When children experience serious traumatic events, such as witnessing violence or living in a household where there is substance abuse, they can suffer. Decades of research have established the link between a child's exposure to trauma, its effect on neurological and behavioral development, and long-term health and societal outcomes, such as mental health disorders and high school graduation. A child's response to trauma or toxic stress may manifest as difficulty paying attention or regulating emotions, and can lead to poor academic performance. Childhood trauma is often overlooked and the effects can be misunderstood by adults, resulting in school suspensions or escalation of conflicts. As children who have experienced trauma get older, they can pass these disruptions to their children, impacting communities more broadly.

According to the National Survey of Children's Health, nearly 35 million children in the United States have had at least one serious traumatic experience. The good news is that there are approaches and interventions that can effectively prevent and mitigate the impact of trauma. However, too few individuals who experience trauma are identified and supported with the right care. There is a need to ensure that all of the systems and settings that often come into contact with children who have experienced trauma – social service providers, health care, schools, first responders, and the justice system – can coordinate and have the tools to recognize trauma and the means to address it.

Legislation

Senators Durbin, Heitkamp, and Franken have introduced legislation that would:

- *Identify Best Practices.* Establish a task force comprised of the HHS, ED, DOJ, and relevant tribal agencies to identify a set of best practices that improve capacity and coordination for the identification, referral, and support of children and families that have experienced trauma;
- *Test New Models.* Increase funding for the National Child Traumatic Stress Initiative to evaluate new strategies for improving trauma-informed prevention and care;
- *Disseminate Best Practices.* Create an eligible use of funding for training in trauma-informed best practices for major federal grant programs that serve children who experience trauma;
- *Train Law Enforcement.* Create a law enforcement coordinating center that will share information, improve awareness of child trauma, and train officers on trauma's impact;
- *Improve Understanding of Trauma.* Require the CDC to improve data collection on trauma prevalence, and directs CDC and GAO to conduct studies to identify barriers and opportunities to trauma coordination, service delivery, and information sharing;
- *Expand Treatment Capacity.* Pilot a Medicaid demonstration program to incentivize coverage of a comprehensive set of trauma-informed screening and treatment services;
- *Support Workforce Development.* Promote trauma service delivery by expanding loan repayment programs for clinicians who serve in high-need communities; develop licensing guidelines for states to credential sub-clinical providers in trauma care; and improve pre-service and continuing education training for teachers and health care providers in trauma-informed best practices;
- *Foster Community Coordination.* Create a grant program to support coordinating bodies that bring together stakeholders to identify needs, collect data, build skills, and leverage resources. Additionally, builds on the Performance Partnership Pilot to break down silos and create flexibility to pool federal grants from multiple agencies to increase access to resources.