

TESTIMONY BEFORE THE HOUSE FINANCE COMMITTEE

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Chairman Sykes, Vice Chair Bolon, Ranking Member Amstutz, I am Gayle Channing Tenenbaum and I come before you today as a child advocate working with the **GroundWork Campaign** to talk about Early Childhood Mental Health. All of the work I am honored to do in child welfare through PCSAO and in child health through Voices for Children has taught me the importance of providing mental health treatment for our youngest children.

I am here today to request a permanent earmark in line item 404 in the Department of Mental Health for Early Childhood Mental Health Treatment. Funds were earmarked in the state budget for FY 08-09 for Early Childhood Mental Health Treatment. An RFP process in FY 2008 and 2009 resulted in 13 Boards being funded for 18 month projects. A total of \$1 million was allocated over the biennium. We are asking for an allocation of \$2.5 million in each year of the biennium for this allocation for FY 10-and 11.

The purpose of the program is the implementation of evidenced-based practice in Ohio through increasing availability of early childhood mental health treatment.

During the first year of the program 752 children and their families received services. Who are these children? Many of them are children who have been victims of childhood trauma. Childhood Trauma is a major public health problem in the United States affecting the brain architecture of young children. Traumatic experiences may include:

- Sudden loss of a loved one
- Maltreatment by caregivers
- Other forms of violence and victimizations including witnessing violence
- Exposure to life threatening accidents, fire, national disasters
- Additionally, research is beginning to highlight the role of poverty in trauma and child development

The part of the brain impacted by trauma is the part that regulates impulse control, depression, and dissociative behavior. Young children affected by trauma who are not treated, in addition to having mental problems as young children are more likely to develop chronic physical and mental health problems as adults. They are more likely to suffer from diabetes, heart disease, cancer and compromised immune systems; struggle with smoking, alcohol and other drug uses; and are nineteen times more likely to attempt suicide.

We know what early interventions work and what treatment programs have proven outcomes. In Ohio the Therapeutic Intervention Program, out of The Mayerson Center for Safe and Healthy Children at Cincinnati Children's Hospital has been serving children referred from the child welfare system in a combined Head Start, Mental Health, Family Program. This eighteen month program has successfully neutralized the mental illness resulting from trauma and increased low cognitive levels enough so that the child is able to enter school in regular classes rather than in special Ed. The Cincinnati Public Schools estimated a one year savings of over \$600,000 due to this program. Life long savings in mental health and health care costs and peace of mind for any child in that program is even greater. There are many other evidenced-based programs that are working for our youngest children. Part of the focus in support of Ohio's youngest children must be to provide funding for those important programs in every state budget.

I was honored this past fall to be asked to serve on a Transition Team for the incoming Obama Administration looking at the issue of Early Childhood Mental Health and Trauma. I authored a paper for the new administration with several renowned experts from around the country on this very important subject. One of them was someone that the Chair of this Committee knows well, Dr. Jack Shonkoff, Director of the Center on the Developing Child at Harvard University who is as passionate on this subject as am I. Dr Shonkoff says

Dramatic new discoveries at the intersection of neuroscience, molecular biology, geonomics, and the behavioral social sciences can now explain how healthy development happens, how it is derailed, and what we as a society can do to keep it on track.

We need to make certain that for all of our children we keep these programs on track and as a state make a permanent commitment to doing so.

I have a great passion for this issue because it is personal for me. Some of you know I have Post Traumatic Stress Syndrome and still battle Depression from years of abuse as a young child. In those days there were no Early Childhood Behavioral specialists in child care settings who might have recognized what was going on with this little blond, blue eyed girl who was afraid of her own shadow and saw people who were not there. There was no one to intervene, protect, or help her until she had been hospitalized four times before the age of 40 for depression and dissociative behavior. Finally she got the care she needed. We can keep that from happening to other small children.

Our first goal should be abuse prevention and we are working on that. You have heard me talk about how to do that. But when trauma does happen let us make certain treatment is always available.

I will be happy to answer any questions. Thank you.