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Universal Trauma Services for Young Victims of Gun Violence

Good Morning,

My name is Caroline Menapace Glavin, and I am the Trauma Assessment Specialist for the Children’s Hospital of Philadelphia (CHOP)’s Violence Intervention Program and CHOP’s Healthier Together Initiative, Growing Resilience in Teens (GRIT). We work with youth ages 8-18 years old to address social determinants of health, specifically around youth’s exposure to community violence and trauma. We provide intensive case management and trauma therapy to youth and their families to help them heal from their experiences, reduce reinjury, and bolster resilience. The Violence Intervention Program, which is a program within the Center for Violence Prevention at CHOP, is an example of many programs around the country that are dedicated to breaking the cycle of violence for children and young adults following a violent injury. Because we know that violence permeates communities, impacts entire families, and can lead to poor outcomes, our program provides assistance to youth and families with case management in order to support a family as they obtain medical follow-up care, navigate the legal system, and engage in trauma-focused mental health treatment.

I appreciate the opportunity to speak today on this very important issue of Universal Trauma Services for Young Victims of Gun Violence. I hope to provide insight based on my work that can improve access, resources, and policies that support universal trauma services for young victims of gun violence.

There are three co-occurring epidemics currently faced by children and youth in Philadelphia: gun violence, COVID-19, and mental health crises. The intersection and severity of these epidemics have exacerbated pervasive psychosocial problems, and the needs of youth and families exceed the current resources designed to respond and provide support. These co-occurring epidemics are also shedding light on longstanding disparities, as they are disproportionately impacting Black, Indigenous, and People of Color, both in Philadelphia and around our nation. As challenging as the last year has been for our community, it has also provided an opportunity to step back and reflect; an opportunity to think creatively and collectively in order to identify the real issues and the sustainable solutions to address our city’s struggles.

We know that youth who are exposed to community violence are at risk for long-term mental health problems. A study done here at CHOP and the University of Pennsylvania showed that children who lived closest to incidents involving guns were more likely to have emergency department visits for mental and behavioral health issues in the weeks after those incidents. Beneath the numbers of gunshot injuries and deaths are the stories that I hear on a daily basis from children and families impacted by violence. The youth I work with at CHOP are clearly experiencing increased trauma symptoms. Many of them have trouble sleeping, nightmares, suicidal thoughts, trouble focusing, and are hypervigilant and afraid to walk down...
certain streets. Our children tell us that they cannot stop worrying that something bad will happen to them or their family and loved ones.

We need to do better. We need to come together to prioritize the health and well-being of our children. While no one program, initiative or intervention is going to fix the crisis that our children face, we can work together to ensure that we care for the entire family to provide a holistic approach. I have learned firsthand the importance of wrapping support and services around the whole family directly, especially after gun violence. One way that we address the symptoms following a traumatic experience is by providing Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), an evidence-based treatment for children impacted by trauma as well as their parents or caregivers. When youth and family members understand that their trauma symptoms are not their fault or because of something they have done wrong, they can start to heal and function better in the outside world.

From my work as a trauma therapist, I have seen youth write trauma narratives that highlight their strengths and resilience, rather than define themselves by their trauma. While our services focus on youth, I have seen the gratitude in the hearts of our caregivers when we walk alongside them and help them navigate services after their child is shot or is otherwise impacted by violence. Providing safe places for youth and caregivers to speak freely, to express their fears and to give kids a voice is an immeasurable gift.

Trauma-focused therapy works, when done by well-intentioned, well-trained practitioners. There is a network of dedicated, brilliant practitioners called The Philadelphia Alliance for Child Trauma Services (PACTS). This network of child-serving systems and programs provides evidence-based practices, like TF-CBT, for traumatized youth and their families across the city of Philadelphia. The mission of PACTS is “to increase the number of children and families who receive the most effective trauma-specific care in Philadelphia.” While we know TF-CBT works and the PACTS network is strong, the current needs of our children and families are far exceeding our capacity. We must come together to identify systematic, sustainable ways to support the growing need for trauma-focused treatment in Philadelphia.

One child’s story comes to mind: A 15-year-old, African American female entered CHOP’s Violence Intervention Program, which we call CHOP VIP, last November after being assaulted in her community. With the support of her family and her CHOP VIP case manager from our program she made great strides to heal and recover from her violent injury and was excelling in school. Then, this past month she was walking down the street with her best friend when they heard gunshots and her friend pushed her to the ground. She quickly realized he was hit, and this young girl had to witness her best friend die for no other reason but for where they lived. This girl, like so many I work with, experienced more than one traumatic event in a short time span. She is currently enrolled in trauma-focused CBT and is processing the multiple traumatic experiences that she has been through. By engaging in this trauma therapy, she has a safe space to discuss her experiences, her fears, her emotions and her hopes. By engaging in trauma therapy now, she is less likely to experience long-term mental or physical health issues.

But unfortunately, in our current landscape, the need is outpacing the available services when it comes to mental health support; there is a necessity for more readily available trauma therapy and services in addition to what’s already being provided. We know that stories like this are all too common, and we need to better provide support for the chronic, recurrent and complex experiences of our youth. Trauma-focused treatment needs to be consistently and readily available for the youth and families in Philadelphia.

In my experience, we as providers tend to focus services on the identified victims of the gun violence. While this is essential, we know all too well that each victim is someone’s child, best friend, sister, brother, cousin, nephew, niece or student. We know that for each episode of gun violence, an entire community is crushed.
We must work together to create a larger, more robust network of trauma-focused providers so that every child in Philadelphia, and their loved ones, have access to the care they need and deserve.

I want to thank Councilmembers Johnson and Gym for the invitation to testify and holding a hearing on this important issue. I’m happy to take any questions at this time.