

969 Reading Rd. Suite E, Mason, Ohio 45040 www.thelaborsoflove.com (513) 294-8114

Dear Health Committee:

As a trauma-specializing therapist and trainer, I have much gratitude for your understanding of how important this landmark legislation is going to be. I have committed my career to helping others understand the true nature of trauma and assist in the development of trauma-responsive practices in organizations, corporations, schools, churches, and government. I wish I could be present to testify on behalf of HCR. 25 but am very grateful for the opportunity to have my voice heard through writing. It is my hope that my professional contributions to this hearing, and my full commitment as a core member of the team moving this initiative forward will empower all decision makers to feel, beyond a shadow of a doubt, that a State of Emergency on Childhood Trauma is not only necessary but long overdue.

What comes out of a person really does make sense when you understand what has gone into them. From in utero to about seven years of age, children are not only learning the lessons that are being intentionally taught to them, but they are also absorbing information through all five of their senses that help them develop an understanding of how the world works. This is not a conscious process and children have no control over the safety and survival skills that are being developed during this time. The brain and body have an elaborate collaboration that works to ensure safety and survival without the conscious awareness of any human. Repeated adverse experiences during childhood not only impacts how children adapt and survive but their brain development is altered in service of it. Based on this understanding of human development and how trauma impacts the human experience, one can only look at the behaviors of children as vital clues about what said children need to feel safe and survive – based on the experiences they have had. When in constant survival mode, the part of our nervous system that tells us we need to run or fight in order to survive takes over and it can look a lot like hyperactivity, aggression, opposition, and running away. When the part of our nervous system that shuts the body down in order to survive is active, it can look a lot like lack of motivation, laziness, and an unwillingness to cooperate. Without this understanding, the behaviors of children are often viewed through the lens of delinquency, criminality, and character deficit and this happens at a disproportionate rate to Black and Brown children, immigrants, and those who live in poverty. The very places and services that exist to protect children like schools, law enforcement, children's services, faith-based organizations, hospitals, and community mental health organizations are, unfortunately, not provided the necessary training to deepen their understanding of human development and trauma and are not held accountable for caring for children in a way that meets their various needs for safety and survival.

A State of Emergency is not a mere convenience but an obligation when a known threat significantly impacts the lives (and deaths) of a government's citizens. The lives and lifespan of many Ohio children are being impacted by trauma DAILY. It is not only the interpersonal experiences that these children are facing, but the barriers that cause and maintain trauma on institutional and systemic levels like racism, gender inequality, and discrimination. In full honesty, it is not enough to only provide programs directed at "mental health" that often miss the underlying root causes and applies a misattributed diagnoses and medication treatment. We must require all those who engage with traumatized youth to understand what they are seeing through a lens trauma-responsive care and equip them to develop and implement practices that bring healing and build resilience within

communities that are experiencing community violence, mass incarceration, poverty, increased school dropout rates, high rates of suicide, and other manifestations of trauma. I implore the Health Committee to use the power that has been given them by the very citizens that suffering from the effects of trauma and declare a State of Emergency on Childhood Trauma to centralize and mobilize the call to help our children heal.

It is my life's mission and purpose to end generational cycles of trauma and help develop generational cycles of healing. I hope that my contribution to this hearing has erased any doubt that your decision to pass HCR. 25 is what Ohio needs NOW. I leave an open invitation for any member of the Health Committee or other legislator to contact me with questions or concerns that I can help answer or speak to.

With sincere gratitude,

La Shanda Sugg, LPC

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CEO, Therapist and Consultant

Labors of Love Counseling and Consulting, LLC

www.thelaborsoflove.com

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