

## HB 1036

Testimony Submitted by Dr. Jennifer Shaw

Founding Partner, Gil Institute for Trauma Recovery and Education

Non legislative Member: Maryland Workgroup to Study Child Custody Court Proceedings Involving Child Abuse or Domestic Violence Allegations

---

Thank you for this opportunity to share a child-centered perspective before voting on HB 1036. I am Dr. Jennifer Shaw, a Founding Partner at Gil Institute for Trauma Recovery and Education. Along with my founding partners, Dr. Eliana Gil and Myriam Goldin, LCSW, we co-created a group of providers passionately committed to providing research- and trauma-informed assessment and therapy to children who have been neglected or abused, including sexual abuse in early childhood. We know how to help children begin to heal from what is too often a life-altering brain injury, including joining and guiding their protective parent(s) and families in that effort.

It is imperative that all stakeholders in a position to change the trajectory of a child's life understand that child abuse and neglect is a traumatic injury. An injury that can impact physical, neurological, emotional, relational, and cognitive functioning. For traumatized children, typical neurodevelopment can be derailed in the absence of intervention and evidence-informed rehabilitation.

Whether that injury is a temporary disruption of development or a wound that neuroscience confirms will persist throughout the lifespan depends on what we do as soon as the wound is discovered. In cases of custody, separation from an abusive parent often follows such a discovery. This places a life-altering decision in the hands of courts. For Courts, an injured child's rehabilitation needs must be the priority of anyone tasked with determining the environment best suited to meet those needs. While the implications of this bill are complex, the request of you is simply to ensure that all those in a position of power have a current evidence-informed understanding of the impact of trauma, including the impact of failing to recognize warning signs.

On behalf of all those dedicated to both the protection and restoration of children (social workers, child advocates, protective parents, forensic interviewers, teachers and counselors, and child therapists), I ask you to consider a traumatized child cannot recover until her home proves to be a space of physical and psychological safety. We ask you to accept the science: children cannot begin to heal until they are safe, feel safe consistently, and custodial decision-making is based on a parent's capacity to prioritize research-informed recovery needs. We cannot begin our work when a child's right to safety is postponed, or considered secondary to an adult's right to parent, or deemed debatable as they wait for a final custody determination.

For providers and court advocates, our most important job is to put adult words to the suffering of children, including making recommendations so that their adult stewards prioritize them above all else. Some children are too young to know the words, others have learned their words will not make a difference, and others may just reserve them for when the world proves that their safety is actually the priority. We serve as trained translators for children; today we ask that all involved, including Judges, be

asked to learn the same language before offering a recommendation for custody and visitation in cases involving an abuse allegation.

We all know children are incredibly resilient. However, we cannot rely on a capacity for resilience as justification for a passive response to an active threat to that very capacity. A developing brain either explores or retreats; thrives or survives; attaches to a healthy ally or learns the risk of harm or rejection is just too great. It can grow in the direction of tomorrow or first wait to see if tomorrow is a safe place to be. They are resilient but creating conditions to activate that resilience is our responsibility. In most cases, children survive abuse but let us give injured children a chance to consider that their present circumstance is temporary, and the future is not determined by what has happened but rather how the world responded when it did.

Whether or not a child heals depends much less on the approach of a therapist or the resiliency of a child but much more on what people in their world do in response to what happened. Healing does not depend on the type of therapy he receives; rehabilitation depends on how the world responds once the visible or invisible wound is discovered. In short, this bill is part of a comprehensive but common-sense effort to ensure no child citizen's right to safety is postponed or based on a partially informed court decision. Thank you, Jennifer Shaw