

## The Rut

I don't much like being in a rut. I'm guessing you don't either. Whether you're a clinician, parent, or both/and.

The recent 2009 San Antonio ATTACH conference got me thinking. Thinking that those of us who work in the field of childhood trauma aren't doing enough. Not that our intentions aren't good, because they are. For example, over the past few years, researchers have made huge gains in understanding the effects of early trauma on the brains of children—both pre- and post-natally. So yeah, we get that.

Now what?

I'll tell you now what: it's high time we strap on our head-gear and get cracking with the development of more effective treatment alternatives. It's one thing to know that the *lower* brain regions of traumatized children have been assaulted and damaged. It's something else entirely to figure out what to do about it. And we clearly haven't been doing enough.

So, I'm calling out the researchers. The time is now that university-based faculty specializing in childhood trauma and attachment disorder turn up the heat and get serious about treatment research. In the event of any vagueness here, I am talking about research having to do with treatment.

Now before any academicians get all huffy about this, realize that I am talking as much to myself as well. Now that I've begun teaching at the University of the Rockies (formerly the Colorado School of Professional Psychology), I need to put my money where my mouth is. With eager doctoral students interested in neuropsychology—and needing dissertations—I finally have some person-power and financial resources at my disposal. Hopefully, I can be a part of what will prove to be a research *blitzkrieg* over the next few years in terms of developing better treatment for attachment/complex trauma among children.

In the next issue of *Graymatters*, I'll present some outside-the-box thinking about treatment possibilities. After all, ravaged children and families, having gone to Hell and back, are depending on us.

I'm tired of the rut.