

# UACT NOW

*United Against Childhood Trauma*

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## FOUNDING CHARTER

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A 50-Year Roadmap to Unite the World Against Childhood Trauma

Founding Summit • October 10, 2026 • Washington, D.C.

***Name the wound. Heal the wound. Prevent the wound.***

*The healing of one generation is the liberation of the next.*

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### A Founding Declaration

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Leaders from across faith, mental health, healthcare, education, public safety, foster care, research, media, policy, and those with lived experience are asked to unite with a single purpose: to declare that the era of fragmented, siloed, under-measured work against childhood trauma is over.

This Charter establishes UACT — United Against Childhood Trauma — as the catalyst and convener for a fifty-year, evidence-based, globally coordinated movement to dramatically reduce the prevalence, mortality, and human and societal destruction caused by childhood trauma and its downstream consequences in adulthood, and to build the awareness, healing, and prevention infrastructure required to break the generational cycle.

This Charter is the action step that follows the research first synthesized in the book *Greater Than Gravity: How Childhood Trauma is Pulling down Humanity* (March 2026)

We begin from a belief about people: every human being enters the world with inherent worth and the capacity to grow, connect, and contribute. Childhood trauma can disconnect a person from those gifts, but it cannot erase them. Healing is the work of reconnection — to ourselves, to one another, and to the communities where we are meant to flourish.

***Human suffering is inevitable. Human disconnection is not.***

**Signatories to this Charter affirm a shared vision, a shared set of principles, and a shared accountability to measurable outcomes. This is not a statement of intent. It is a commitment to move the metrics that matter.**

## I. Who We Are

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### **Vision**

A world in which childhood trauma is no longer the leading driver of human suffering — a world in which every child is protected, every wound is healed, and every person is supported in reaching their full human potential. A world where individuals, families, and communities reconnect and thrive together.

### **Mission**

UACT exists to unite the world against childhood trauma. We serve as the catalyst that brings together the leaders, institutions, disciplines, philanthropists, and communities required to dramatically reduce the prevalence, mortality, and destruction of childhood trauma over the next fifty years — through coordinated awareness, healing, reconnection, and prevention.

### **What UACT Is:**

- A 501(c)(3) nonprofit coalition headquartered in Arrington, Tennessee.
- A catalyst and connective hub within a global, multi-pillar movement that includes the multi-language UACT Trauma Institute — the learning, certification, and standards pillar — alongside pillars in research, public relations, media, social media, digital reach, policy, and direct community engagement.
- The convener of leaders across faith, mental health, healthcare, education, public safety, prisons, foster care, government, and the private sector.
- The steward of a unified framework, a shared vision, and a coordinated roadmap that reduces redundancy and accelerates outcomes.

### **What UACT Is Not:**

- A political organization. Not on the left, not on the right.
- A religious organization, and not a secular gatekeeper. Open to all.
- A feel-good campaign. Every partner is expected to move at least one of the measurable outcomes in this Charter.
- In competition with member organizations. UACT exists to coordinate, amplify, and unify the field — not to absorb it.

## II. The Crisis We Are Confronting

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### **What We Mean by Childhood Trauma**

For twenty-five years, the field has measured childhood trauma through the ten Adverse Childhood Experiences (ACEs) — abuse, neglect, and household dysfunction endured before the age of eighteen. Those ten are real, they are validated, and they remain our baseline. But they were only ever designed to measure the trauma that happens inside the home. They miss too much.

This work begins in gratitude. The modern understanding of childhood trauma was opened by the original Kaiser–CDC ACE Study of Drs. Vincent Felitti and Robert Anda, and carried forward by a generation of researchers, clinicians, and advocates — many of them invited to sign this Charter. UACT stands on their shoulders and builds on their work; it does not replace it.

A child is not wounded only by what happens under their own roof. A child is wounded by violence in the street, by war and displacement, by a serious accident or a life-threatening illness — their own or a loved one's — by the sudden death of someone they love, by bullying, by poverty, by disaster, by prejudice.

UACT therefore defines childhood trauma as *any experience in childhood that overwhelms a child's ability to cope and leaves a lasting mark on the developing brain and body* — whether it originates inside the home or outside it. The ten ACEs are the floor of that definition. They are not the ceiling. Any framework that stops at the front door of the house will undercount the wounds — and you cannot heal what you refuse to count.

Whatever its source, the common thread of trauma is not only what happened to a child, but how it reshapes the way they see themselves, relate to others, and move through the world. UACT exists not only to prevent that wound, but to help people reconnect with what it disrupted, so they can heal, flourish, and thrive.

This broader definition is why UACT holds that roughly seventy percent of the population carries the wound. It is drawn from *Greater Than Gravity* and governs how every metric in this Charter is defined and measured.

### **The Scale of the Wound**

Childhood trauma is the number one cause of death in America. It is also the largest hidden driver of mental illness, addiction, suicide, metabolic disease, incarceration, foster-care collapse, and generational suffering. Existing institutions — healthcare, education, justice, faith, government are addressing fragments of the problem in isolation, with no shared vocabulary, no shared standards, no shared metrics, and no shared roadmap. The cost of that fragmentation is measured in lives as well as the societal and economic costs.

### **The Baseline (United States, current data):**

- **Prevalence:** Approximately 70% of U.S. adults have experienced at least one Adverse Childhood Experience; roughly 17% have experienced four or more — and under UACT's broader definition of childhood trauma, closer to 70% carry the wound.<sup>1</sup>
- **Mortality:** Approximately 1,401 Americans die every day from the downstream consequences of childhood trauma — the leading cause of death in the United States. This figure is established through Population Attributable Fraction analysis — the same method used to prove that smoking causes cancer — and is documented in *Greater Than Gravity*.<sup>2</sup>
- **Economic Burden:** An estimated \$14.1 trillion per year in direct medical spending and lost healthy-life years.<sup>3</sup>

- **Mental Illness:** Preventing ACEs could reduce adult depression cases by an estimated 78%.<sup>4</sup>
- **Suicide:** Among adolescents, the population-attributable fraction for suicide attempts linked to ACEs is approximately 89%.<sup>5</sup>
- **Incarceration:** Under the traditional ACE framework, roughly 97% of incarcerated individuals report at least one ACE, compared with about 64% of the general population — and under UACT's broader definition of childhood trauma, higher still.<sup>6</sup>
- **Foster Care:** Approximately 20,000 youth age out of U.S. foster care each year; 31–46% experience homelessness by age 26, and fewer than 3% earn a college degree.<sup>7</sup>
- **Generational Transmission:** Untreated childhood trauma transmits to the next generation — the single most preventable and least addressed driver of long-term societal harm.

**These numbers are not abstractions. They are the destination of every unhealed child. UACT exists to change them.**

### III. Founding Principles & Standards

Membership in the UACT coalition is a privilege earned through commitment to the following principles. These are not aspirational values — they are operating standards.

1. **Unwavering Neutrality.** UACT does not take political sides. The trauma of a child is not a partisan issue, and we will never allow it to become one. Signatories keep partisan rhetoric and political positioning out of UACT-affiliated work. We are for humanity, not for any faction within it.
2. **Faith-Inclusive and Secular-Inclusive.** UACT welcomes people of every faith tradition and people of no faith tradition with equal standing. Childhood trauma harms all children; healing is owed to all children and adults. We will not privilege one theology and will not exclude faith-rooted work. We are big enough for both, and we require both.
3. **Grounded Realism Married to Belief.** We are realistic about the scale of the problem and the time it will take to move it. We do not promise miracles, and we do not traffic in wishful thinking. But realism without belief is paralysis. Signatories commit to believing this is possible — because nothing of this scale was ever accomplished by people who did not first believe it could be done.
4. **Evidence-Based Practice.** Every program, claim, and intervention endorsed under the UACT banner must be grounded in published science, replicable data, or measurable outcomes. UACT will not endorse pseudoscience, anecdote-only programs, or interventions that cannot be evaluated against the Charter's metrics.
5. **Radical Transparency and Accountability.** Signatories report their outcomes annually against at least one Charter metric. The coalition operates in the open, sharing the results and lessons that advance our collective learning — while respecting participant privacy, confidential information, and intellectual property. Funding, measurable results,

and what we learn are made available to other members and, where appropriate, to the public.

6. **Non-Redundancy and Coordination.** Signatories coordinate with other UACT members rather than duplicating their work. Where two members pursue the same outcome, UACT brokers collaboration, not competition. Where another organization has already built tools, curricula, or methodologies that work, UACT will seek to adopt and credit them rather than replicate or compete. Together, we can strive to end the era of overlapping nonprofits, redundant curricula, and parallel certifications.
7. **Universal Dignity.** Every person served by UACT-affiliated work — the child, the survivor, the incarcerated adult, the foster youth, the addicted parent — is treated as a full human being with inherent worth. No labeling, no shaming, no diminishment.
8. **Healing, Reconnection, and Thriving.** UACT does not stop at the absence of suffering. Once a person is no longer in crisis, our obligation is to support them toward their fullest potential. That means helping people reconnect — to themselves, to others, and to their own capacity to grow, contribute, and thrive. UACT will develop and steward a universal Well-Being Assessment that measures human flourishing and will hold itself accountable to moving people upward along that scale.

## IV. The Standard We Set: From Informed to Responsive

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Language marks the line between an idea and an act. For fifty years, the field has worked to become trauma informed — aware that trauma is widespread and that it shapes behavior. That awareness was necessary. It is no longer enough.

To be **trauma informed** is to *know*. To be **trauma responsive** is to *do* — to take trained, deliberate action that begins to heal, restore connection, and create the conditions in which people, families, and communities can thrive. Healing is not merely the absence of symptoms; it is the return of safety, connection, and the freedom to flourish. UACT establishes a maturity ladder that every person, organization, and system can be measured against:

Trauma Unaware → Trauma Aware → Trauma Informed → **Trauma Responsive**

Trauma Responsive is the summit, and it is the standard UACT certifies to. A hospital that screens for ACEs is informed. A hospital that heals is responsive. In a crisis that kills 1,401 people a day, knowing is not enough. The next fifty years must be the era of doing.

## V. The Invitation

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This is an invitation to do something that has never been done: to put down the flags of our individual organizations long enough to raise one shared flag against the largest preventable source of suffering in human history. Together, we can help millions reconnect — to themselves, to one another, and to a future worth building.

*The healing of one generation is the liberation of the next.*

***We are the generation that begins it.***

## **What We Believe**

*Every human being has inherent worth.*

*Human suffering is inevitable. Human disconnection is not.*

*Healing cannot be mandated, but the conditions for it can be built.*

*To be trauma informed is to know. To be trauma responsive is to do.*

*Name the wound. Heal the wound. Prevent the wound.*