



REASONS TO SUPPORT THE 6K STROLL FOR SHAKEN BABY SYNDROME

Infants and young children suffer the highest mortality of any group from child abuse with 43% of victims under age 1 and 75% under age 4. Their physical vulnerability results in the highest morbidity rates from abuse, as well. Injuries are more likely to be serious and to result in physical and mental disabilities that can last a lifetime.

Abusive Head Trauma is the leading cause of child abuse deaths in infants and shaking or impact injuries are the most frequent types of injuries resulting in these deaths. One-third of victims of Shaken Baby Syndrome die and 1/3 suffer serious, permanent disabilities. Long term follow-up of the remaining survivors confirms that 1 of 4 who appear to suffer no apparent effects from shaking are diagnosed with learning disabilities or other psychomotor delays after they reached school age.

SBS is under reported, under-detected, and misdiagnosed. While only a few thousand cases are being reported annually by U.S. pediatric hospitals, the Carolina Safe Survey suggests that 2.6% of U.S. children under 2 may be being shaken by their caregivers as a form of discipline or as a response to crying. This means that for every child who dies or is admitted to an Intensive Care Unit for SBS, there may be as many as 151 children who are shaken but not identified. SBS is also misdiagnosed. Research by pediatrician Carol Jenny, MD confirms that over one-third of cases are not diagnosed by health providers during the first medical visit after a shaking incident, sadly leading to further injuries and deaths that could be prevented with better education.

Early published research indicates that prevention education works. SBS cases were reduced by 47% over five years in the Western New York State In-Hospital Program for parents of newborns led by pediatric neurologist Mark Dias. In 2003 Massachusetts Citizens for Children (MCC) and leaders on Worcester County sought to improve on the Dias approach by developing an improved model that could be standardized, evaluated and replicated. This model includes a

standardized 1-hour curriculum which has been approved by the MA Association of Registered Nurses and provides credit hours as an incentive to training. Pre and post tests have documented a statistically significant increase in nurses' knowledge. Nurse evaluations of the training itself consistently rate it 4.7 or higher on a 5 point scale. The training of parents of newborns includes one-on-one instruction by the nurse. Parents view a brief video and receive MCC's comprehensive brochure about infant crying and soothing and about the dangers of infant shaking.

When surveyed parents who have been educated about SBS prevention overwhelmingly support training for all parents. Parents surveyed 3 to 4 months after participating in the Massachusetts program remembered the information learned without prompting and reported using the new information about infant crying and infant soothing information in caring for their babies. Over two-thirds reported they had shared the information with their other child's caregivers. All support a primary prevention effort directed at all new parents.

Public policy on the issue is steadily increasing and we support a national prevention initiative on SBS prevention. Currently, over a dozen states have passed legislation encouraging SBS prevention education. Also the first bill calling for a national initiative was filed by Senator Dodd earlier this year with a proposed \$3 million appropriation. MCC provided assistance to Senator Dodd's office in reviewing the draft bill. Clearly, Massachusetts has an opportunity to influence the quality of future legislation in all the states, as well as to support passage of the federal law and implementation of a national prevention initiative.

While more research is needed, there is current agreement in the field that a "3 inoculation strategy" should be implemented now. The first inoculation is the In-Hospital education of parents of newborns; the second, the education of parents and caregivers in a wide variety of post-natal and pre-natal settings; and the third, public education and media strategies.

MCC is leading the effort in Massachusetts to implement SBS prevention education in Massachusetts hospitals and communities. It is currently coordinating programs in Worcester and Hampden Counties. Recent implementation in Winchester Hospital marks the launching of the countywide effort in Middlesex County. Melrose-Wakefield Hospital, Newton-Wellesley Hospital, Cambridge Hospital and Mt. Auburn Hospital are currently working with MCC to establish the program. By year's end, all Middlesex County hospitals will be offering this life-saving program to all parents of newborn infants in their care.

Plans are underway to establish the program in Boston area birthing hospitals and in Bristol County. With your support and through funding from Hedge Funds Care, a national foundation dedicated to child abuse prevention, we can work together to bring this comprehensive, quality program to families and communities across our state.