To: Claire Ayer, Chair of the Senate Health and Welfare Committee and Members

From: Linda E Johnson, Executive Director of Prevent Child Abuse Vermont

Re: H.686 – Child Fatality Review Team

Thank you for inviting me to give testimony on H.686, a bill seeking to codify the Child Fatality Review Team, (CFRT). The passage of H.686, would give the CFRT, the authority it needs to review cases, identify State trends in child abuse and neglect, and work with AHS, to reduce preventable childhood deaths by communicating these trends to the public. Prevent Child Abuse Vermont fully supports this bill. It is especially important to include that information sought by the Team, on cases being reviewed be subpoenaed after DCF and law enforcement investigation have been concluded.

I am particularly glad to be here to offer testimony to you because this bill came about in direct response to the increase in child deaths and "accidents" which are preventable. Important in the bill is that a prevention response to these trends, communication to the public and action is recommended in order to prevent these injuries and deaths from occurring.

As both a member of VCAB and the special committee appointed by the governor to review the two toddler deaths in 2014, I can speak with some authority to the great need to broaden our prevention efforts. Communicating to the public, specific ways that infants and toddlers can be cared for safely by their caregivers.

The number of infants and toddlers we have lost to unsafe sleep practices and abusive head trauma, otherwise known as shaken baby syndrome has been increasing. There is a study from the University of North Carolina at Chapel Hill, that showed for every infant and toddler that is publicized in the news media, there are 150 that are not reported or not diagnosed.

Over the last five years, 6 babies have died each year as a result of being rolled over on by parents. This comes from bed sharing. Drugs and, or alcohol and bed sharing, places babies at even greater risk, than bed sharing alone.

If we total up the number of infants and toddlers lost to their families, and communities over these last five years, we would easily have a classroom full of lives, who, never made it to preschool.

In addition, there are scores and scores of babies who were physically abused though not killed. The harm they experienced ranges from fractured skulls to broken bones. The resulting harm ranges from life-long handicaps, to developmental delays and learning challenges. Some are blind, deaf, have trouble walking, and, or may have limited speech. Some may never be able to toilet themselves. Every baby born has a right to make it to pre-school alive. As we concern ourselves with school safety and improved gun laws, I ask you to consider increasing funding for abusive head trauma prevention and safe sleep promotion for Prevent Child Abuse Vermont.

Prevent Child Abuse Vermont partners with DCF, DAIL and the Department of Health delivering training to promote Safe Sleep, Shaken Baby Syndrome Prevention and Safely caring for toddlers.

We train pediatricians in preemptive guidance about infant crying and managing parental stress; provide all hospital birthing units with videos and materials for welcome baby bags, we train birthing unit nurses on how to educate parents about safe sleep and nurturing care for crying babies; and we educate one third of high school students each year on these topics. We utilize a scientifically proven effective approach in our hospital based program.* PCAVT has one trainer who accomplishes over 200 trainings annually. I believe that more resources are required to expand and deepen prevention efforts. With an increasing number of deaths and injuries, reaching 30% of Vermont's high school students is not sufficient. When Vermonters become parents it is vital that the hospital is not the first time they learn about safe sleep and how to safely care for a crying infant.

Thank you for this opportunity to testify about H.686 and about the opportunity to prevent many more preventable deaths of infants and toddlers.

*PCAVT uses pediatric neurologist, Dr. Mark Diaz model because it has significant evidence supporting its' efficacy. Since we started using this program, we have seen a sharp decline in abusive head trauma of infants. However, since the opiod crisis has developed, these numbers have risen, so it is critical that we expand and intensify our approach.