



State of Connecticut
GENERAL ASSEMBLY



Commission on Children

**Testimony of Elizabeth C. Brown
Legislative Director
Connecticut Commission on Children**

**Before the Select Committee on Children
Connecticut General Assembly
Thursday, February 5, 2009**

Senator Musto, Representative Urban and members of the Committee. Thank you for the opportunity to testify this morning on two important bills that will help promote the well being of children and families.

Support: S.B. 749, An Act Concerning the Inclusion of the Children's Trust Fund in the Early Childhood Cabinet. The Commission has the honor of serving on the Cabinet and believes the Trust Fund is an integral part of the services to children and families in Connecticut and would be a critical partner in efforts to integrate services and establish a comprehensive, family focused, data driven system that serves children and families in a holistic manner.

Support: H.B. 5145, An Act Concerning Education of Students on the Prevention of Shaken Baby Syndrome. Shaken Baby Syndrome impacts some 50,000 children annually across the country and is responsible for up to 15 percent of all children's deaths. The Syndrome is a type of inflicted traumatic brain injury that happens when a baby is violently shaken. A baby has weak neck muscles and a large, heavy head. Shaking makes the fragile brain bounce back and forth inside the skull and causes bruising, swelling, and bleeding, which can lead to permanent, severe brain damage to the spinal cord and neck and fractures of the ribs and bones. The injuries may not be immediately noticeable. Symptoms of shaken baby syndrome include extreme irritability, lethargy, poor feeding, breathing problems, convulsions, vomiting, and pale or bluish skin. Shaken baby injuries usually occur in children younger than 2 years old, but may be seen in children up to the age of 5.

- Connecticut data demonstrates that this is a serious problem. Of the 88 homicides of children under 18 years old, 41 were children under age 6.

The bill seeks to provide our young people knowledge about the syndrome in the school health curriculum. Schools will select the appropriate way to integrate the material and not be burdened with a new mandate. The Commission supports this effort and would also recommend that our young people learn about the broader topic of child development.

(cont.)

We know 90% of adults become parents. But, there is little or no instruction on child development or how to parent. Shaken Baby Syndrome is a good example of a totally preventable injury or even fatality that information and knowledge can prevent. Unfortunately, too many parents are ill prepared for parenthood and do not have the skills and knowledge to understand the physical, social, emotional needs of a child that promote healthy development.

The fact is that many parents do not have the time or the inclination to attend parenting classes or seek out good information on child development. Research tells us that this is especially true for parents facing multiple problems including low education levels, poverty, substance abuse, single parenting and other stressors. Education in an age appropriate manner through research based curriculum has proven effective in preparing students for the most important role they will assume in life.

We understand that schools cannot do it alone. The Infant Toddler Report of the Early Childhood Cabinet recommends reaching school age children through school curriculum, but, also in community settings. Prevention is the solution.

Components of a Broad System Approach:

- Preparing future parents with a solid base of information, taught to all children in middle and high school, teaching relevance and methods of accessing child development information, along with teaching information about child development directly.
- Elevate the importance of teaching all students the basic biological structure and function of the human fetus and infant, and the importance of caring properly for children in early development.
- All students need to be exposed to significant class work around the care of the human fetus and child. Acting commissioner Coleman has lent his recent support to these goals, as had past Commissioner Sternberg, and the many groups and professional organizations that are part of our Coalition.
- Hospital based program penetration. Research is clear on the positive impact of hospital based home teaching programs for at risk parents in reducing child abuse for the present and next generation, and improving parenting and child care on numerous dimensions. Every hospital in the State needs to have this facility available.
- Public Relations - disadvantaged and at-risk youth often spend a good deal of time with media. Messages presented there are often memorized. For example, last week I was walking out of my school building with a severely retarded sixth grader. He saw a staff member smoking and commented to him you know, that's bad for you, Mr. X!
- Sustained media campaigns can have a huge impact (e.g. Vermont's Stop It Now), and really help spread the word across all economic lines around care of children prenatal to nine.

The Commission supports the inclusion of Shaken Baby Syndrome education as a good start to educating middle and high school children on the issue, but looks forward to a deeper discussion on how to prepare future parents for their role as parents to improve outcomes for children and reduce the incidence of abuse and neglect in Connecticut that costs so much in dollars and dignity.