

Child Safety: Abusive Head Trauma (Video 2)

Dipesh Navsaria: Hello, I'm Doctor Dipesh Navsaria. I'll be your host for this episode of Keeping Them Safe.

Today's topic is abusive head trauma, commonly known as shaken baby syndrome. Over the past several years, there's been increasing recognition that shaking a young child can cause brain injuries. Thirty percent of all infants who are shaken die and upwards of 80% who survive suffer permanent life-long neurological disability. It is the most common cause of injury and death related to child abuse. Early childhood programs can play an important role in preventing or recognizing abusive head trauma and shaken baby syndrome. Requirements for your programs vary greatly from state to state. Most states, territories, tribes, or local health departments may have different regulations, training requirements, or other procedures in place. It is important to understand and follow your state or local regulations.

There may be times when you, as a caregiver or teacher, may be taking care of a baby who cannot be soothed or easily comforted. A baby may cry a lot, no matter what you do. This can be frustrating. Abusive head trauma usually occurs when adults become frustrated and shake a crying baby. It is very important for you to learn the risks of shaking a baby as well as strategies to cope with constant fussiness. As child care staff, you should be able to recognize the signs and symptoms of shaken baby syndrome or abusive head trauma for children in your care. You have many responsibilities as a childcare provider, and you work in a stressful environment. Excessive crying adds to this stress, so it is very important to develop coping strategies for when this happens. Remember: It is never okay to shake, throw, hit, slam, or jerk any child. The consequences can be deadly.

In order to identify and prevent abusive head trauma, there are steps your program can take. All childcare facility should have a policy and procedure to identify and prevent abusive head trauma. Here are steps you can take to help identify and prevent abusive head trauma or shaken baby syndrome. First, all caregivers or teachers who are in direct contact with children, including substitute teachers and volunteers, should receive training on preventing abusive head trauma. Second, it is important that you recognize potential signs and symptoms of abusive head trauma. Third, you should learn or create strategies for coping with a crying, fussy, or distraught child. And finally, make sure you and your staff understand brain development and vulnerability in early childhood and how it contributes to fussiness. The information I'm sharing comes from Caring for Our Children, a collection of best practice standards for early care and education programs.

Caregivers and families often ask if playing rough with the baby can cause abusive head trauma. Abusive head trauma is a form of child abuse that happens when a baby or small child is violently shaken. These injuries do not incur bouncing a baby on your knee, if you toss them in the air, or if they fall off the couch or bed. Shaking an infant or small child violently, even for just a few seconds, has the potential to cause severe injuries. Let's talk about symptoms of

abusive head trauma. Victims of abusive head trauma may exhibit one or more of the following symptoms: irritability, trouble staying awake, trouble breathing, vomiting, unable to be woken up. On the video landing page, there's a more complete list of resources you can review to learn more about abusive head trauma.

Staff training is key. Childcare and Head Start programs are required to provide training on abusive head trauma and shaken baby syndrome. The more you know about brain development and what is normal for infants when it comes to crying, the better you can cope with difficult phases and support families who may be experiencing similar reactions to stress. At the end of this episode, be sure to check out the online training available as well as resources for staff and families on the video landing page. Before we close, I have two reflective questions for you. What policies and procedures do you have in place to help identify and prevent abusive head trauma in your program? How do you ensure that all staff who provide direct care to small children understand abusive head trauma and ways to identify and prevent it? Thank you for spending this time with me. We will see you on another episode of Keeping Them Safe. Remember the more you learn, the safer they are.