SB 316 Lucio

(Solis)

SUBJECT: Providing new parents with information on Shaken Baby Syndrome

5/17/2005

COMMITTEE: Public Health — favorable, without amendment

VOTE: 5 ayes — Laubenberg, Jackson, McReynolds, Truitt, Zedler

0 nays

4 absent — Delisi, Coleman, Dawson, Solis

SENATE VOTE: On final passage, March 21 C 29-0

WITNESSES: (On companion bill, HB 842:)

For — Lila Carl; Kathryn Dittman, Prevent Child Abuse Texas and The Shaken Baby Alliance; Robert W. Hendee, Jr., Prevent Child Abuse Texas (*Registered, but did not testify*: Carrie Kroll, Texas Pediatric Society)

Against — None

On — Cynthia Bednar, Department of State Health Services

BACKGROUND: Shaken Baby Syndrome (SBS) is caused by vigorous shaking of an infant

or young child by the arms, legs, chest, or shoulders. Long-term

consequences can include learning disabilities, physical disabilities, partial or total blindness, hearing impairment, speech disabilities, cognitive

disabilities, cerebral palsy, seizures, behavioral disorders and death.

The 76th Legislature enacted SB 588 by Lucio in 1999, which requires day care providers to receive annual training about the causes and dangers of SBS. HB 341 by Uresti, enacted by the 78th Legislature in 2003 requires that expecting and new parents receive training and counseling

about postpartum depression.

DIGEST: SB 316 would require hospitals, birthing centers and midwives to provide

new parents with information about preventing SBS and about childhood immunizations. The information could be provided verbally or through a

brochure. Information about SBS would include the following:

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- anger management techniques for handling crying babies;
- ways to prevent someone from shaking a baby or young child;
- the dangerous effects of shaking a baby or young child;
- the symptoms of shaken baby syndrome; and
- where to report that a baby may have been shaken.

The bill would require that new parents receive a list of required immunizations and a schedule of follow-up treatments for newborns.

The Department of State Health Services (DSHS) would develop a brochure with information on SBS and childhood immunizations and display the brochure on the commission's website. DSHS would be responsible for funding or soliciting funding for the costs of developing and distributing the brochures. Hospitals, birthing centers, and midwives could create their own brochures or use the one on the DSHS website.

The bill would take effect September 1, 2005.

## SUPPORTERS SAY:

SBS is the leading cause of morbidity and mortality in infants in the United States. SBS can be difficult to confirm because it causes such a variety of problems. However, it is estimated that about 1 in 2,600 children under age 5 are victims of SBS, a quarter of which do not survive. Babies under six months are particularly susceptible to SBS because their neck muscles are too weak properly to support their heads. In Texas, about 34 percent of children who die from abuse or neglect die from injuries sustained while being shaken or beaten.

Increasing parental awareness would help reduce the occurrence of SBS in Texas. If parents were more aware of situations that placed them at risk for shaking their children, they would be better prepared to cope when a high-stress situation occurred. Many parents are unaware of how easy it is for babies to suffer from SBS, and increasing understanding should help to prevent more cases. An educational initiative that taught parents how to deal with crying babies would reduce the number of children that die from being shaken.

SBS prevention initiatives have been passed in nine other states. New York has passed legislation requiring all hospitals to provide brochures addressing the causes and consequences of SBS. Pennsylvania requires SBS prevention educational training for new parents, Florida requires that hospitals provide informational brochures to new parents, and Ohio has

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proposed legislation that would provide all hospitals and birthing centers with educational videos on SBS prevention.

Saving the lives and mental functioning of children also would save the state money in future expenditures for nursing home or other institutional care, rehabilitation, personal care services, and other support and medical services. SBS can cause irreversible brain damage, blindness, hearing loss, seizures, learning disabilities, cerebral palsy and death.

Consolidating information about SBS with information the state already requires into one packet that new parents could bring home with them would provide a user friendly format. Adding requirements about SBS to existing law related to postpartum depression would ensure that new parents' medical records confirmed that they have received the materials.

OPPONENTS SAY:

SB 316 would place a new mandate on hospitals that already are overburdened and understaffed. New parents already are bombarded with excessive amounts of information and another brochure likely would get lost in the barrage of information parents already receive.

OTHER OPPONENTS SAY: While the bill would require hospitals to provide information about SBS to new parents, a brochure or verbal message is not the most effective way of conveying the dangers of SBS to parents. Studies have shown it is most effective to engage parents with a powerful video presentation.

NOTES:

According to the fiscal note, the bill would produce an estimated net savings of \$2,232 in general revenue per year and would cost the Hospital Licensing Account an estimated \$19,880 per year. DSHS estimates that it would distribute 275,000 pamphlets each year to hospitals, birthing centers, and midwives.