

# TEACHER GUIDE

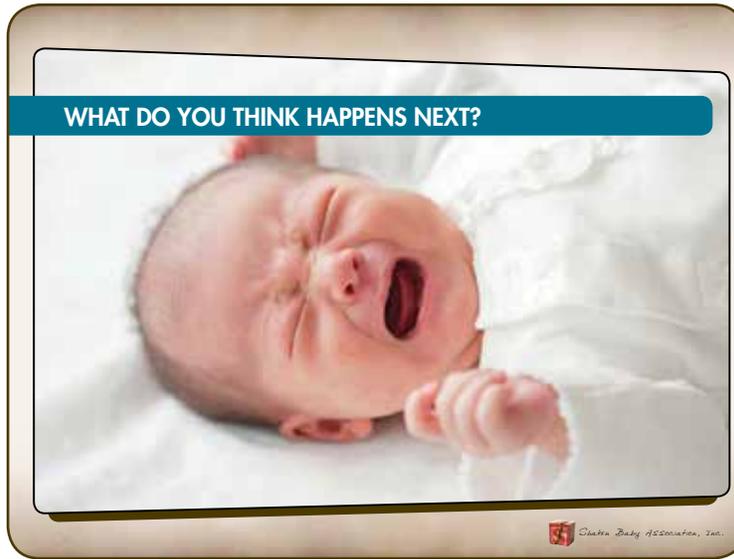


PREVENTATIVE PROGRAM ON SHAKEN BABY SYNDROME

## CONSEQUENCES OF RAGE



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**TEACHER:** *How did that feel to hear the baby cry?*

- High school: Scale of 1 – 10
  - #1 - It doesn't bother me at all
  - #5 - I'm concerned
  - #10 - I want it to stop right now, it bothers me
  
- Middle school: Stop light indicator
  - Green - It doesn't bother me at all
  - Yellow - I'm concerned
  - Red - I want it to stop right now, it bothers me

**TEACHER:** *What do you think happens next?*

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**IN A SINGLE MOMENT...**

- A single moment of uncontrolled frustration can take a life
- A single hour of education can save one

**HELP US SAVE LIVES**

Meet Mia: 



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Play "Meet Mia" video

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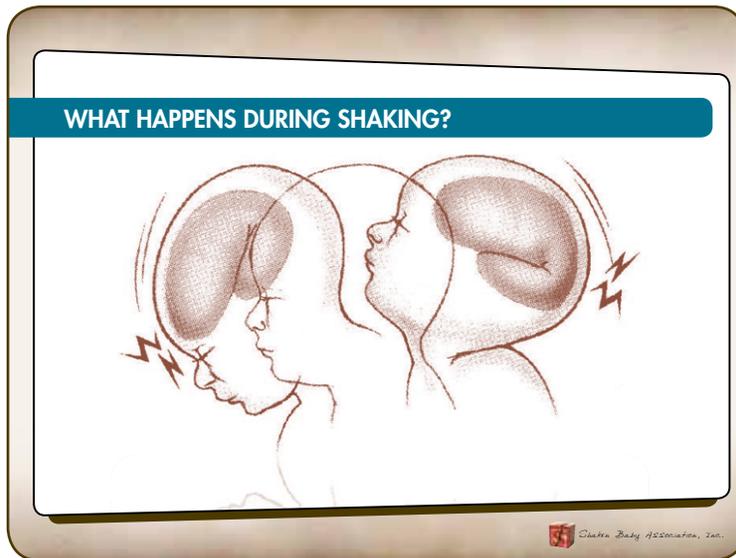
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**TEACHER** This is a diagram of how an infant’s brain moves inside her/his head when she/he is shaken.

The shaking has its most serious effects on the entire brain because different parts of the brain move at different speeds and in different directions. The brain not only moves back and forth but it also moves from side to side. The brain inside the skull moves faster than the skull which can cause tearing of the different layers of the brain resulting in damage to the brain cells.

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MOST COMMON INJURIES

The most common injuries of Shaken Baby Syndrome/ Abusive Head Trauma are:

- bleeding in the space between the brain and the skull
- brain injury causing swelling of the brain
- bleeding in the retinas in the back of the eyes



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**TEACHER:** *So what are the effects of these injuries?*

Abusive Head Trauma often causes irreversible damage, and about 1 out of every 4 cases results in the child's death.

Children who survive may have:

- partial or total blindness
- hearing loss
- seizures
- developmental delays
- impaired intellect
- speech and learning difficulties
- problems with memory and attention
- severe mental retardation
- cerebral palsy

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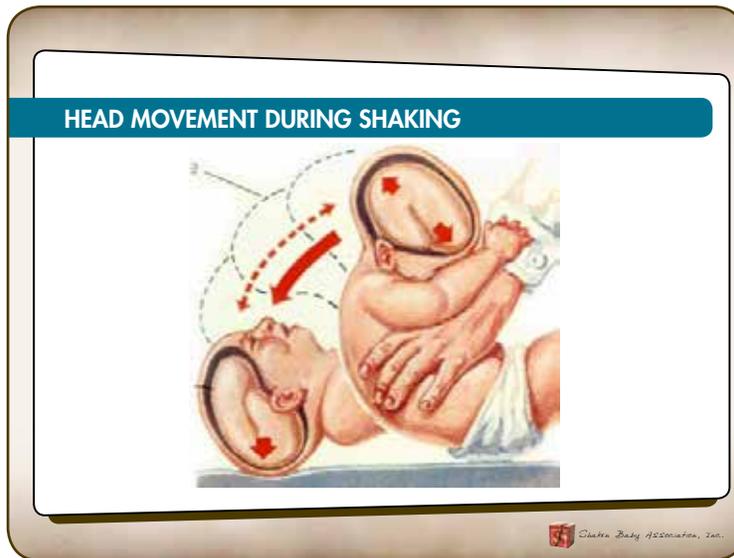
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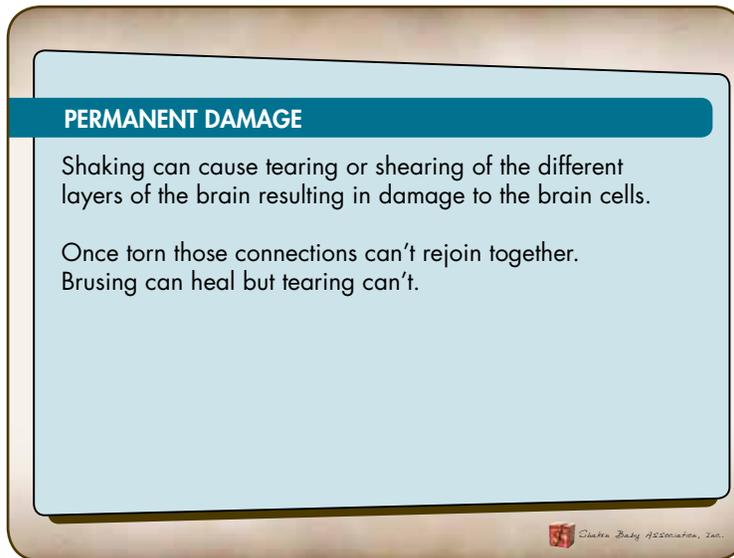
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**TEACHER:** These photos of a doll show how an infant's head moves when violently shaken. Notice how far forward and backward the head moves. The weight of the infant's head, weak neck muscles and the size difference between the adult and the infant all contribute to the effect.





## ACTIVITY

For this activity you will need:.

- An egg
- A small (snack-size) plastic, clear bowl with a lid

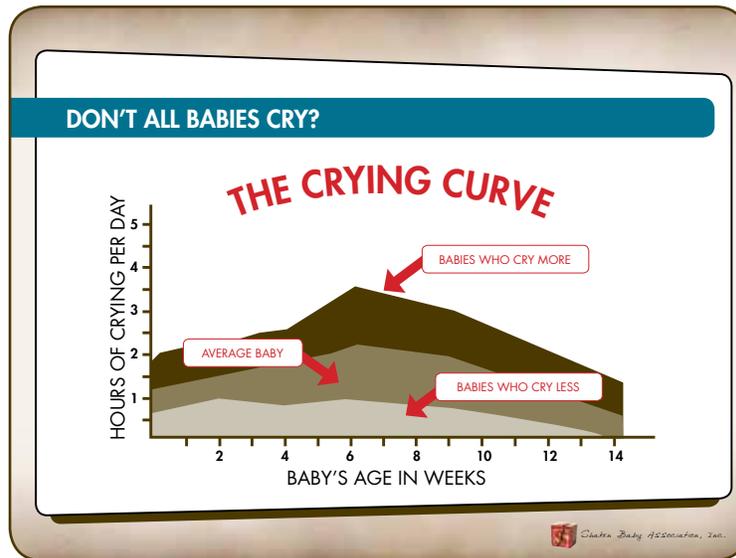
*In advance, crack and place egg inside the bowl*

Discuss some of the falling accidents that occur with babies. Include falling from a couch, a bed or a changing table. Use the slide to demonstrate the dramatic movement of the infant's head during shaking vs the relatively minor movement during a fall.

Explain that the egg in the bowl represents the baby's brain inside of the skull. The plastic bowl is the hard skull. The egg is the delicate brain tissue. When an infant is born, there is space between the skull and the brain so that the brain isn't damaged during the birthing process, and that's what the air space within the bowl represents. The large skull also allows room for the baby's brain to grow.

Recruit a student volunteer. Ask the student to shake the egg as hard as s/he can for 2 seconds, then 5 seconds, then 10 seconds. Crack the egg. Compare the egg prior to shaking to the egg after each subsequent period of shaking. Discuss how the consistency of the egg has changed and how it is impossible to get the egg back to its original form.





All babies are different. All babies cry. Crying is a normal developmental activity just like sitting or crawling.

A great deal of research has been done about infant crying to find out what can be considered normal. This diagram shows what is called the "crying curve." It shows that crying normally starts to increase at about 2 weeks of age, peaks in intensity during the second month, and decreases a lot by the fourth or fifth month of life.

Although the pattern and timing of crying is similar in different circumstances, there can be big differences in how much normal infants cry. As shown in the diagram, the average amount of crying is between 1 to 2 hours at the peak of crying, but some infants will cry less and some will cry more. The main point is that they all are normally developing infants.



**WHY DO BABIES CRY?**

- Some babies cry a lot when they are:
  - Hungry
  - Wet diaper
  - Tired
  - Just want to be held/cuddled
- Some babies cry because they have "colic"
- Sometimes we don't know why... that's what babies do.



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**TEACHER:** Episodes of crying for more than three hours a day without a physical cause is called colic.

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**BASIC NEEDS**

Babies have basic needs and all you need to do is...

- Feed the baby
- Burp the baby
- Change the diaper
- Make sure clothing isn't too tight
- Make sure baby isn't too hot or cold
- Hold, cuddle, talk gently or sing to baby

BUT...sometimes that isn't enough



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**DISCUSSION:** Would you know what to do next?

**NOTE:** Teacher note percentage of yes or no responses for survey at end of program.

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Play "Meet Michael" audio

**TEACHER:** When a baby is shaken, the most serious effect is on the brain, but sometimes bones in the ribs, arms or legs will also be broken. Many babies have injuries to their brains without having broken bones. Sometimes there will be bruising to the baby's head but most often there won't be any external signs that the baby was shaken. Most of the damage will be to the baby's brain.



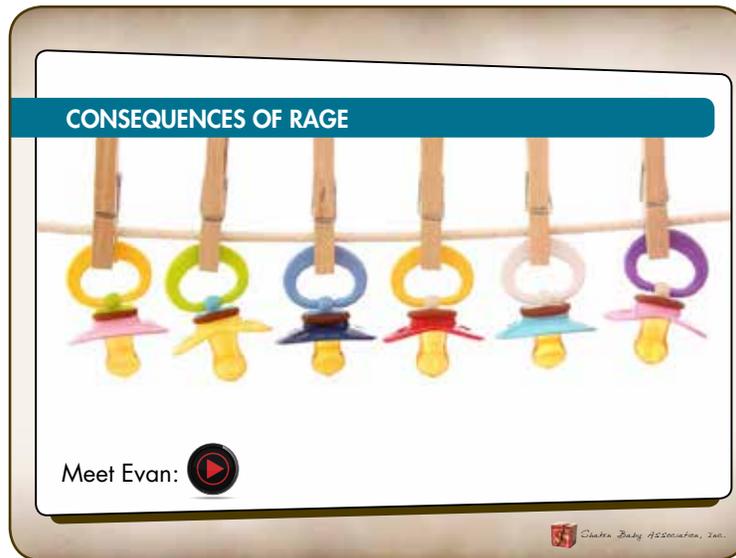
#### OTHER SIGNS THAT A BABY HAS BEEN SHAKEN ARE:

- Crying that sounds different from the babies usual cry, often a high pitched cry or crying at times that the baby is usually calm
- Sleepiness when the baby is usually awake
- Vomitting or refusing to eat
- Pale or bluish skin
- Not breathing or having a hard time breathing
- Unconsciousness

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**TEACHER:** In most cases there won't be external signs on the head that the infant was shaken. Please remember that these are important signs to watch for in an infant, but they do not necessarily mean that the baby has been shaken. Even doctors often miss the diagnosis of SBS when the baby is first seen with one of these symptoms. Other illnesses can also cause many of these symptoms. If you notice any of these signs or anything else that seems unusual, don't be afraid to seek medical help immediately and report what you have observed. Survival chances increase with prompt medical attention.





**TEACHER:** We are about to see a story called “Consequence of Rage – a real story focused on the life of a SBS survivor”.

Interviews with the mother and father of SBS survivor carried the message of devastating long term consequences of SBS.

Both parents said they believe that if the long-term consequences of shaking or abusing a baby are shared, people will think twice before letting their frustration get the best of them.

Play “Meet Evan” video

**DISCUSSION:**

- When you think of the kind of person who would shake a baby, who do you think of?
- Do you think people who shake babies plan to injure the child or do you think they loose control?
- Do you think that most people who shake babies or young children have warm feelings or love the baby?



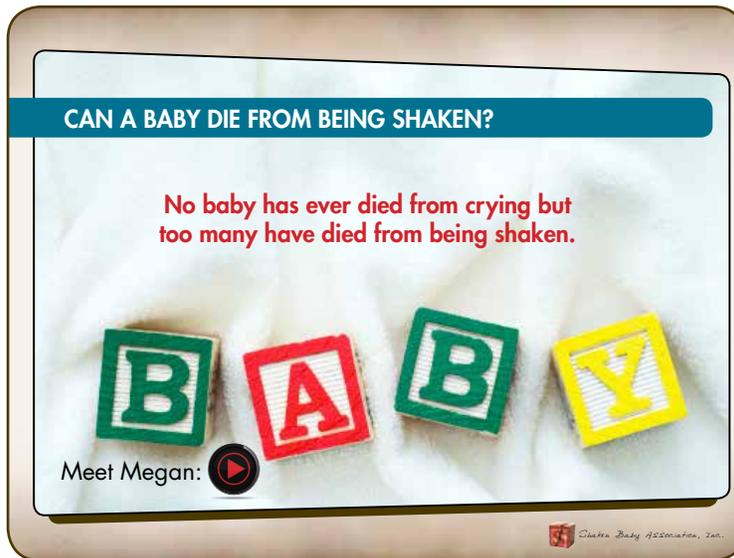
### RISK FACTORS

- Young people in their late teens or early 20s
- People who have little experience with babies
- Individuals who abuse drugs or alcohol
- People who are experiencing mental illness
- When an individual is under high stress, they are more likely to lose control and harm a child
- People who have not developed the skills to control anger

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**TEACHER:** The statistics show that perpetrators can be any age, male or female, any ethnic or racial group, poor or wealthy, but there are some factors that put people at higher risk for shaking a child.





Play "Meet Megan" video

**TEACHER:**

Shaking a baby can have extremely serious results.  
About one of every four victims of Shaken Baby Syndrome also called Abusive Head Trauma dies.



### LIFE-LONG EXPENSES

In the first year, should the baby survive, medical bills alone cost more than \$1 million. Multiply that over a lifetime of medical care the child will require.



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### TEACHER:

Even babies who seem okay when they are released from the hospital may have problems later on, such as learning and attention difficulty in school.



**HOW DO WE STOP THIS**

- Stress factors
  - Major life changes (illness, change of homes/school)
  - Physical changes (heat, over crowded, noise)
  - Social Interaction (bullied or lack of friends)
  - Behaviors (drinking/drugs, lack of sleep)
  - Daily hassles (homework, no money, over scheduled)
  - Negative Feelings (taking things personally)
  - TV/computer games (violent shows/games)





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**TEACHER:** Stress is an unavoidable part of life. We experience it in varying forms and degrees every day. The stress you experience is not necessarily harmful. In small doses, stress can actually be beneficial to us. Stress can help compel us to action; it can result in a new awareness and an exciting new perspective. It is only when the stress becomes too great, affecting our physical or mental functioning, that it becomes a problem.

**DISCUSSION:**

- What causes you stress? What are your stressors?
- What makes them angry?
- What are some ways you can manage your stress in a healthy way?

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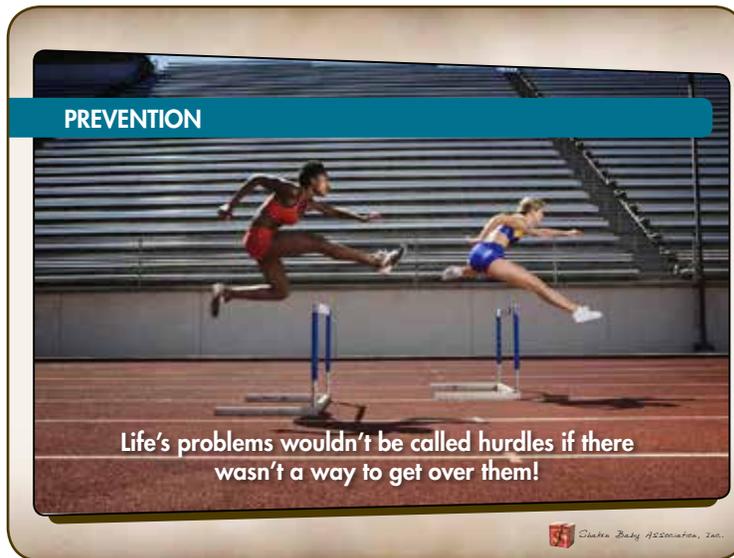
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**TEACHER:** Rage and acting out anger has consequences.

Besides the emotional price of having a baby shaken, what are the other costs? We talked a little about the medical expenses over \$1 million but these medical expenses don't begin to capture the cost to society for each life tragically altered as a result of Shaken Baby Syndrome.

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**CONSIDER THE COSTS TO:**

- Prosecute and incarcerate perpetrators
- Provide expert care for survivor
- Lost pay for caregivers to take off work for doctors appointments
- Cost of special education instruction and equipment in schools

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**DISCUSSION:**

Abusers rarely pay these costs. Who do you think pays these bills?  
(victims families, tax payers, insurance companies)

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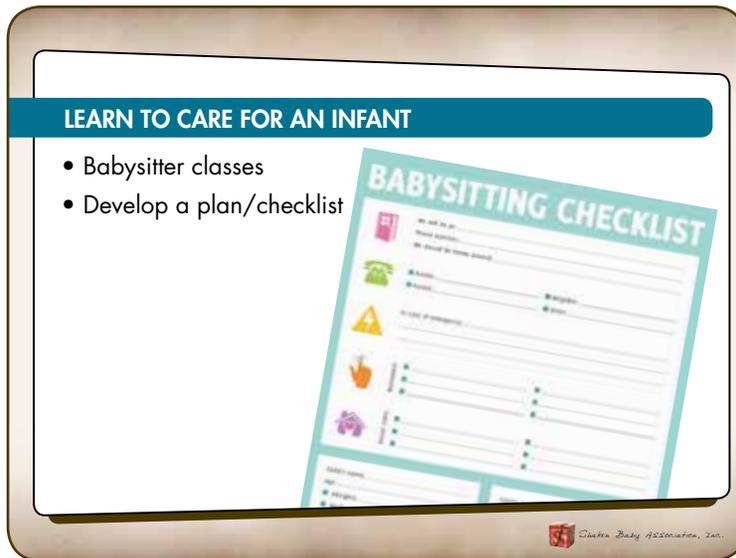
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**TEACHER:** How many of you babysit for a sister/brother or family friends?

Before you begin care of a child, either your own baby or someone else's baby, make sure you are prepared. Have a plan because keeping the baby safe is the most important role you can have.

American Red Cross has an online course. Where else can you get training?

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**HANDLING A CRYING BABY**

- Make sure baby isn't hungry, wet or ill.
- Lay the baby on his/her back in the crib.
- Walk **TEN** feet or more away.
- Slowly count to **TEN** and take **TEN** deep breaths.
- Put on music at comfortable level.
- Remove other distractions from room.
- After **TEN** minutes, check on the baby.
- **CALL SOMEONE FOR HELP**

**10**

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**DISCUSSION:** Who would you call? Students to list 3 people they would call and keep list

Before you begin to care for a child, either your own baby or the baby of a family member or friend, make sure that you are prepared by having a plan for who you can call for help if you need it. This could be a family member, a friend, or a resource in the community.

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Once you know the baby isn't hungry, wet or ill the best thing to do is place the baby in a safe place and walk into another room. If you have tried everything call someone.

1. **Swaddling:** Wrapping makes your baby feel magically returned to the womb and it will keep your baby from flailing his/her arms. If not done correctly, the baby may cry even harder. Remember to swaddle snugly. Loose blankets may be a choking risk. Also, don't overheat your baby. (Babies should never be sweaty and flushed.)
2. **Side/Stomach:** Newborns are easier to calm when they're lying on their side or stomach. This triggers the calming reflex by imitating your baby's position in the uterus. Lying a baby on his/her back can sometimes trigger a falling reflex and make your baby feel insecure. Keep in mind the side/stomach position is great for calming crying, but babies should only sleep on their backs.
3. **Shhhh:** "Shhhh"ing your baby imitates the sound he/she heard in your uterus, which was as loud as a vacuum cleaner. Place your mouth two to four inches from your baby's ear and make the "shhhh" sound. It must be loud enough to match the sound of your baby's crying, or he/she won't hear it.
4. **Swinging:** Rhythmic moving imitates the jiggling your baby felt inside the uterus and activates the calming reflex. Ways to use motion are: baby slings and carriers, dancing, infant swings, rocking, car rides, bouncy seats.
5. **Sucking:** Putting a pacifier, finger or breast into a baby's mouth satisfies hunger and turns on the calming reflex.

For more information about techniques for calming crying babies, go to [www.thehappiestbaby.com](http://www.thehappiestbaby.com)



### PREVENTING ABUSE

Everyone who comes into contact with young, pre-cruising infants has an important role to play in preventing abuse.

Bruises are expected when a baby starts to walk and fall. If they have a bruise, which many do not, the bruises typically occur on the front of the body such as the forehead and shins.



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Child maltreatment remains an important problem in the United States, according to a report sponsored by the US Department of Health and Human Services. Overall, there were 3.3 million referrals to child protective services across the United States in 2010. A total of 60% of these referrals prompted formal investigations, and more than 400,000 cases of child maltreatment were substantiated.

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**NO BRUISING BEFORE CRUISING**

- Cruising is a developmental stage of pulling to a stand and taking steps while holding onto something
- Infants who aren't cruising shouldn't be bruising! It is harder to bruise a baby than an older child



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According to a study by Puget Sound Pediatric Research Network, bruises are rare in normal infants and pre-cruisers and become common among cruisers and walkers. Bruises in infants younger than 9 months and who are not yet beginning to ambulate should lead to consideration of abuse or illness. Bruises in toddlers that are located in atypical areas, such as the trunk, hands, or buttocks, should prompt similar concerns.

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**INJURY A WARNING SIGN?**

- Any small injury, other than a scratch, such as a bruise or sore in the infant's mouth who can't cruise is a Sentinel injury. **This is a warning sign**
- The bruise or other injury can be an indication of:
  - A medical problem such as a bleeding disorder
  - Accidental injury
  - Child physical abuse

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In more than two decades, Dr. Lynn Sheets, Medical Director of Child Advocacy and Protection Services at Children's Hospital of Wisconsin has noticed a trend.

Often, when a seriously abused child arrives, perhaps with broken bones or head trauma, she looks back at medical records and finds that the same child often sustained minor bruises as an infant. Colleagues around the country noticed the same thing. "There are many cases where a child would have, say, a bruise on his cheek and the mother would say, It's from bumping into a pacifier. Then several weeks later, that child would come in having been beaten or slammed or even killed.

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**INVOLVE THE PROFESSIONALS**

**Key Message:** A Sentinel “warning” injury should be evaluated by a medical professional even if someone caring for the child has offered an explanation for the injury.



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Researchers conducted a case-controlled, retrospective study of 401 infants younger than 12 months of age who had been evaluated for abuse at the Children’s Hospital of Wisconsin between March 2001 and October 2011. The infants were classified by the hospital’s Child Protection Team to have definite signs of abuse, intermediate signs of abuse, or no signs of abuse.

The researchers defined a sentinel injury as a previous injury, reported in the child’s medical history, that was suspicious for abuse either because the infant was not yet crawling, able to pull to a stand, or walking or because the caregivers’ explanation for the cause of the injury was implausible. The investigators say that of the 200 infants who had definitely been abused, 27.5% had a previous sentinel injury. That was compared with only 8% of the 100 infants with intermediate concern for abuse.

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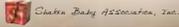


**SHOULD I CALL SOMEONE?**

Contact Social Services  
<http://dcf.wisconsin.gov/Children/CPS>

Depending on the severity of the abuse and immediate risk of harm, Child Protective Services will decide an appropriate response time or notify authorities.

Call the police using either 911 or calling the non-emergency number for the city/town near-by.



For more information there are lots of resources including the National Center for Injury Prevention and Control Violence prevention is a major focus of the national Center for Injury Prevention and Control (Injury Center). as the lead federal agency for injury prevention and control, CDC's Injury Center works closely with other federal agencies; national, state, and local organizations; state and local health departments; and research institutions. [www.cdc.gov/Injury](http://www.cdc.gov/Injury)

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This slide shows an ad made by a high school as a public service announcement. It conveys an important message of "Never Shake A Baby!", however a helmet would not protect a baby and could cause more injuries.

**TEACHER:** How can you share what you've learned with others?

Project suggestions:

- Share this information with three people and write about that experience
- Make a public service announcement
- Poster or brochure to be handed out at local doctor offices
- Write a poem or song
- Hold a fundraising event to benefit a Shaken Baby Syndrome prevention program

Student projects can be featured on the Shaken Baby Association website. You can make a difference – you can help us save lives

Contact us at [shakenbabywi@gmail.com](mailto:shakenbabywi@gmail.com) if you would like to share your projects

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**TEACHER:** Tell us what you thought about this program by completing this quick survey.

**POST TEST:**

<http://tinyurl.com/pefgpfg>

"A single moment of uncontrolled frustration can take a life.  
A single hour of education can save one.  
Help us save lives."

Let us know that you received our message about the tragic, often deadly problem of Abuse Head Trauma sometimes called Shaken Baby Syndrome.

Have your students complete this post-test by providing the above link and once the students hit "submit" the results are sent to SBA.

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## MORE INFORMATION



*Shaken Baby Association, Inc.*

**www.shakenbaby.net**

- Founded in 1998 by parents of children who were shaken
- Non-profit organization
- Mission: To increase public awareness and share prevention strategies to eliminate SBS
- shakenbabywi@gmail.com



 Shaken Baby Association, Inc.

**TEACHER:** What is one life saving message you learned?

**“NEVER SHAKE A BABY!”**

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