Travis County Child Fatality Review Team

2006 Annual Report

center for child protection

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Letter from the Travis County Child Fatality Review Team Chair

Six month old Sarah* was growing more active by the day. Her mother, Anna delighted in each giggle and smile and wondered what baby Sarah would do next. Sarah was the third child born to Anna and David but she was their first girl. Everything was new and exciting. Sarah's future was bright. Although Sarah had her own crib, she often slept with her parents in the hours after her last feeding. When Anna and David got up to begin their day, Sarah lay peacefully in the middle of their bed. Later when Anna went back into the bedroom to check on Sarah, her breath caught and her world forever changed. Sarah had somehow slipped between the bed and the wall, the top of her head barely visible. Her body was warm but lifeless. She and David carried Sarah's body to her neighbor's home. They called for an ambulance and together started CPR to no avail. Sarah was gone. Her parents and family have only pictures and memories. Their hopes and dreams for their daughter will never be realized, replaced only with bittersweet sadness and loss for the child they had just begun to know.

It has been 10 years since the release of the first report on child fatalities in Travis County. We have learned that trends and patterns can change significantly from year to year. The most significant finding has continued to be the number of deaths that didn't have to be. Children who could be with us today, as high school graduates, parents, leaders, teachers and friends, are not. The losses are immeasurable.

The Travis County Child Fatality Review Team has been collecting data on these deaths since 1996. Each of these losses is a chance to learn how to better protect our community's children through raising awareness and prevention of similar tragedies. Sadly, each of these deaths represents a loss of hopes and dreams that families had for their children.

Last year, 140 children lost their lives in our community. After two years of decline, this represents an increase of 20 percent over deaths in 2005. A continuing trend from 2005, accidental deaths are also on the rise, up 81 percent from the previous year. Sarah's death is part of a frightening increase in asphyxia- related deaths. After a three-year downward trend from an average of eight asphyxia deaths between 1996 and 2002, 17 children lost their lives because they couldn't breathe.

An alarming number of children, from infants to teens, still lose their lives because they were not restrained in car safety seats and with seat belts. In 2006, 13 children died as a result of motor vehicle accidents. One child was hit by a car. Of the 10 motor vehicle deaths where restraint information was known, nine children (90 percent) were not adequately restrained. Three children lost their lives in accidents where an adult driver was impaired by drugs or alcohol. These are all preventable events that have lasting affects on everyone that knew them in life – and in death.

We must come together as a community and use the information collected by the Child Fatality Review Team to reduce deaths that are preventable because even one is too many.

Dayna Blazey
Assistant District Attorney
Travis County Child Fatality Review Team Chair

Note: Names and other identifying circumstances have been changed to protect the privacy of children and families.

Across the nation, researchers estimate that 2,000 children die from abuse and neglect each year, and that number is believed to be far lower than the true number of deaths.[1] Public attention and commitment given to the matter of child abuse- and neglect-related deaths has historically been inadequate. The fact is, historically, many child deaths have been misidentified for a variety of reasons. Child fatality review teams were formed to solve this problem. They collaborate to better understand how, why, and which children are dying. They evaluate the circumstances and events surrounding each death to "identify gaps or breakdowns in agency services, review existing protocols and recommend revisions in agency investigation procedures"[2]

The Travis County Child Fatality Review Team (CFRT) is a multidisciplinary group consisting of law enforcement officials, medical professionals, social workers, prosecutors, and child advocacy professionals working together toward a single goal: to prevent the senseless and needless deaths of children in Travis County. The team was formed in 1992 and includes the Austin Police Department, Children's Hospital of Austin, City of Austin – Emergency Medical Services, Texas Department of State Health Services – Bureau of Vital Statistics, Texas Department of Family and Protective Services – Child Protective Services, Texas Department of Public Safety, Center for Child Protection, Travis County District Attorney's Office, Travis County Medical Examiner, and the Travis County Sheriff's Office. The team also includes professionals in the medical and mental health fields. The CFRT team meets at the Center for Child Protection every other month to review the circumstances associated with every child fatality, ages 0–17, in the county.

This unique collaboration is charged with looking beyond statistics to identify patterns in child deaths in order to educate the community about how to prevent them. Specifically, the team's goals are the following:

- Increase the effectiveness of child protection through improved prevention, intervention, investigation, and prosecution;
- Support and enhance cooperation and communication among public and private organizations charged with protecting children;
- Identify the causes of child death through consistent and thorough data collection;
- Share and exchange information about advances in investigating, preventing, and prosecuting child abuse; and
- Improve public awareness.

By working together, sharing resources, and educating each other and the community, the Child Fatality Review Team hopes to increase the public's awareness about the causes of death among children and how to prevent future deaths in our community.

The sources for the statistics in this report are taken from the Texas Department of State Health Services – Bureau of Vital Statistics and the Travis County Medical Examiner. Statistical comparisons are based upon an 11-year historical database, which began in 1996. Please note that because the numbers are relatively small from a statistical perspective, there are limitations to their interpretation. These numbers, however, are accurate and reflect patterns and trends in the risks to the welfare of children in Travis County.

[1]U.S. Advisory Board on Child Abuse and Neglect. (1995). *A Nation's Shame: Fatal Child Abuse and Neglect in the United States.* Washington, DC: U.S. Department of Health and Human Services. (Chapter 3 – Recommendations).
[2]Broderick, S. (2004). Reducing child fatalities through a team approach. *American Prosecutors Research Institute's National Center for Prosecution of Child Abuse UPDATE,* 17(8), 1.

Asphyxia

Reducing the danger for sleeping infants

According to the National Center for Child Death Review, asphyxia or suffocation is the fourth leading type of accidental death for children following motor vehicle crashes, fires, and drowning.[1] Over the last 10 years, 69 children in Travis County have died from asphyxia. In 2006, the largest number of accidental deaths due to suffocation occurred with 17 deaths as compared to three such deaths the previous year. Seven of the deaths were the result of overlays (asphyxia caused by an adult or child), nine were due to positional asphyxia (asphyxia due to a child's position in relation to an object), and one was caused by choking. All of these children were less than a year old except for the choking victim who was two years old.

Risks of suffocation come from a variety of sources:
- *Overlay* occurs when a person who is sleeping with a child unintentionally smothers the child.
- *Positional asphyxia* occurs when an object covers a child's face or compresses the chest. Children may become entrapped in soft bedding or become wedged between a mattress and a wall.
- *Confinement* occurs when a child is trapped in an airtight place such as an unused refrigerator, car trunk, or toy chest.
- *Strangulation* occurs when rope, cords, hands or other objects obstruct a child's neck and airway.
- *Choking* occurs when a child's airway becomes blocked by a piece of food or small toy.

A majority of asphyxiation deaths happen to infants in unsafe sleeping environments. These infants suffocate when another person lays over them or when they smother in bedding or against furniture. Infants should be placed on their backs to sleep and in cribs without toys or bulky bedding. Infants should not be placed to sleep on hazardous sleeping surfaces such as soft couches, waterbeds, pillows, or heavy comforters.

Research suggests that infants who sleep in adult beds (bed-sharing or co-sleeping) are at higher risk of suffocation than those who sleep alone.[2] Some proponents of bed-sharing argue that it promotes breastfeeding. However, researchers have shown that many of the benefits received from bed-sharing can be derived from the practice of having the infant sleep on a separate, firm surface, in the same room with the mother.

Infants who suffocate often have no clinical findings at autopsy. It is only through a comprehensive scene investigation and subsequent reviews by CFRT professional that unintentional suffocation can be distinguished from Sudden Infant Death Syndrome (SIDS) or intentional suffocations (homicides). Being able to recognize these risks, we can educate parents about how keep their children safe from the tragedy of an unintentional suffocation death.

Sources:

[1] National MCH Center for Child Death Review. Suffocation Fact Sheet. Downloaded April 23, 2007 from www.childdeathreview.org/causesSUF.htm

[2] Scheers, N.J., Rutherford, G.W., and Kemp, J.S. 2003. Where Should Infants Sleep? A Comparison of Risk for Suffocation of Infants Sleeping in Cribs, Adult Beds, and Other Sleeping Locations. *Pediatrics*, 112: 883-889.

Child Safety Seats

Proper restraint key to surviving car accidents

Motor vehicle accidents remain the number one killer of children ages 4 to 14 in America. In 2005, an average of five children ages 14 and younger were killed and 640 were injured in motor vehicle crashes every single day.[1] In Travis County, 13 young lives were lost due to motor vehicle accidents last year. Of those, 11 of the victims were Hispanic. Because Hispanic children make up 41 percent of the child population in Travis County, it is of concern that 85 percent of the child motor vehicle accident fatalities recorded last year were Hispanic children.

National studies show that Hispanic children are at greater risk of injury or death from automobile crashes because they are less likely to ride in the back seat in an appropriate car seat.[2] A study conducted by the Insurance Institute for Highway Safety found that Hispanic children ages 5-12 are 72 percent more likely to die in a traffic accidents than non-Hispanic whites of the same age.[3]

We do know that proper restraint systems for children save lives. According to the National Highway Traffic Safety Administration, child safety seats reduce the risk of death in passenger cars by 71 percent for infants, and by 54 percent for toddlers ages 1-4 years.

To prevent future deaths of Hispanic children in the Austin community, we need to reach out to parents and drivers. We know that a number of factors may be affecting Hispanics' use of proper restraints, including language barriers, cultural traditions and economic hardships. Recently arrived immigrants may be unaware of laws requiring children be in appropriate safety seats, or how to access a source for free seats.

Texas law (HB 183) states that all children younger than 5 years of age and less than 36 inches tall are required to ride in a motor vehicle restrained within a child safety seat system, which includes booster seats for larger children.

Helpful Resources

- The American Academy of Pediatrics has a helpful guide for parents entitled Car Safety Seats: A Guide for Families 2007 (www.aap.org/family/carseatguide.htm)
- The National Highway Traffic Safety Administration (www.nhtsa.dot.gov) has a guide that evaluates car seats by ease of use, comprehensive information about child safety seats, and safety recall information.
- The Texas Department of Health Services Safe Riders Program offers free car seats and related education to low-income families. For more information, call 1-800-252-8255, Monday through Friday.
- Locally, Safe Kids Austin, led by the Children's Hospital of Austin and members of the Safe Kids Child Passenger Safety Task Force, offer regular car seat inspections for families. For more information visit www.childrenshospital.com or contact the Children's Hospital Injury Prevention Department at 512-324-TOTS.

Sources:

[1] Data accessed from the Centers for Disease Control website at: http://www.cdc.gov/ncipc/factsheets/childpas.htm on April 23, 2007.

[2] Data accessed from the National Highway Traffic Safety Administration website at: http://www.nhtsa.dot.gov/people/injury/airbags/buckleplan/seatbeltshispanic2003/index.htm

[3] Baker, S.P.; Braver, E.R.; Chen, L-H.; Pantula, J.F. and Massie, D.L. 1998. Motor vehicle occupant deaths among Hispanic and black children and teenagers. *Archives of Pediatrics and Adolescent Medicine,* 152:1209-12.

Summary of Findings

In 2006, Travis County recorded 140 child fatalities, which is significantly higher than the annual average of 127 deaths recorded since 1996. This represents an increase of 20 percent over the 117 child deaths reported in 2005 and therefore, is unlikely to be due solely to the county's population increase. Children in Travis County ranged in age from preterm infants to age 17.

The racial/ethnic makeup of children who died in Travis County in 2006 showed increases for African American, Anglo, and Asian children. Over the past ten years, African American children have experienced a disproportionately high number of fatalities (19 percent) relative to their percentage of the entire child population (12 percent). The 2006 numbers show that this disparity has not changed.

Anglo children (29 percent) were slightly higher at risk of death than in 2005 when the percentage was (27 percent). Overall, Anglo children are at least risk for fatalities than other African Americans and Hispanics. They make up 43 percent of the Travis County child population. Six percent of children who died in 2006 were of Asian descent. Asian children make up 6 percent of the child population.

Although the proportion of child fatalities involving Hispanic children fell from 56 percent in 2005 to 46 percent in 2006, Hispanic children continued to experience a disproportionately high number of deaths, especially due to motor vehicle accidents. Forty-six percent of all Travis County child fatalities in 2006 were Hispanic, yet only 41 percent of the county's entire child population is Hispanic.

Manner of Death

Since 1996, the Travis County Child Fatality Review Team has recorded data on the causes of deaths of children. In 2006, the total number of deaths was 140. A majority of deaths are due to natural causes (96) with smaller numbers reported for accidental deaths (38), homicides (2), suicide (2), and undetermined causes (2).

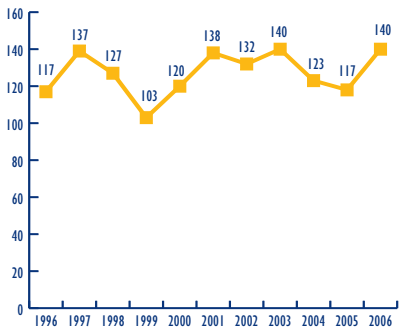
Natural Causes

A total of 96 children died in Travis County in 2006 due to natural causes. Of those deaths, 43 were caused by prematurity, 31 from congenital defects, 10 from infection, 8 from malignancies, and 1 from Sudden Infant Death Syndrome (SIDS). Three natural deaths were from undetermined causes. Eight child deaths were caused by malignancies in 2006. This number represents double the average and the highest number observed since 1999. As in the preceding year, only one child was determined to have died of SIDS in 2006.

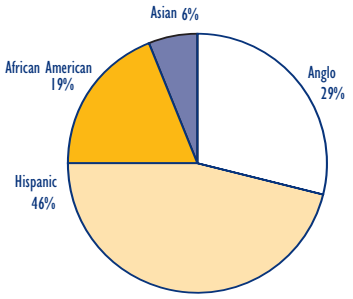
Accidental Deaths

After natural deaths, the most frequent cause of child fatalities in Travis County was due to accidents. The 38 children who died

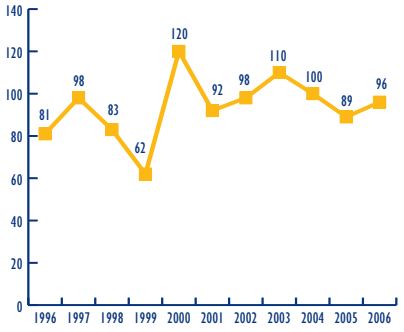
Total Child Fatalities in Travis County, by Year: 1996-2006



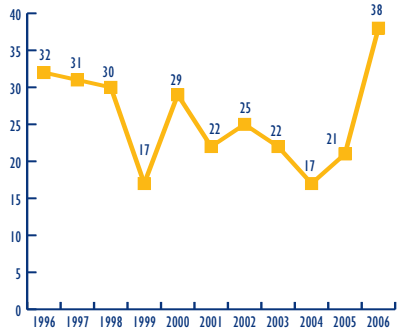
Race/Ethnicity of Child Deaths in Travis County: 2006



Natural Child Deaths in Travis County, by Year: 1996-2006



Accidental Child Deaths in Travis County, by Year: 1996-2006



accidentally in 2006 reflects an 81 percent increase over 2005 whenthere were 21 deaths and more than twice the number of accidental deaths (17) occurring in 2004. The average number of accidental fatalities recorded over the last 11 years is 26. Of the accidental deaths documented last year, children died as a result of asphyxia (17), motor vehicle accidents (13), drowning (3), fire (1), gunshot wound (1), and other accidents (3). No children died as a result of hyperthermia.

The largest number of accidental child deaths was from asphyxiation. It is important to note that 2006 marks the first year that another cause of accidental death exceeded the number of deaths due to motor vehicle accidents. Seventeen children died from asphyxiation in 2006 compared to only three such deaths in 2006. This is the highest annual total since 13 occurred in 1997. Seven of the deaths in 2006 were the result of overlays (asphyxia caused by an adult or child), nine were due to positional asphyxia (asphyxia due to a child's position in relation to an object), and one was caused by choking. All of these children were less than a year old except for the choking victim who was two years old.

The second largest category of fatal accidents involved motor vehicle accidents. In 2006, 13 children died as a result of motor vehicle accidents (MVA), reflecting an 18 percent increase in child MVA fatalities over 2005 when there were 11 deaths. The county has averaged 12 MVA deaths per year over the last decade; however, the 2006 total is the highest since 2000.

Out of the 13 MVA child fatalities in 2006, nine (69 percent) were teenagers defined as children between ages 13 and 17. Though no child MVA victims had consumed alcohol, three fatalities (23 percent) were caused by alcohol-impaired adults.

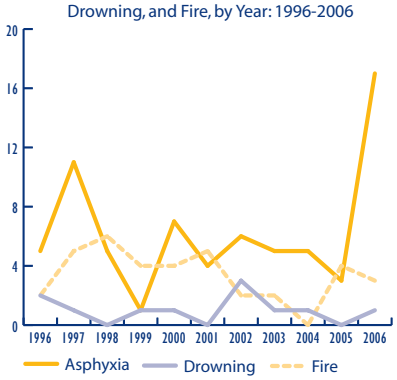
Of concern was the disproportionate number of MVA child victims who were Hispanic as compared to the population (41 percent). Eleven of the 13 MVA child fatalities or 85 percent were Hispanic, while the remaining two were Anglo. Of the eight Hispanic victims where restraint information was available, none were properly restrained (e.g. wearing a seatbelt or seated within a safety seat). Of the two Anglo fatalities, one was properly restrained and one was not.

Child Homicides

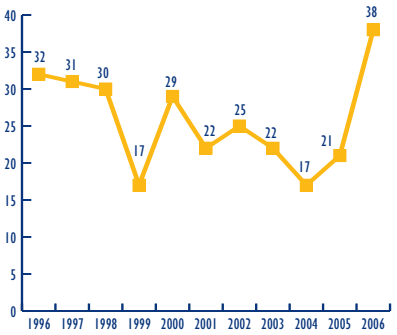
In 2006, two child deaths were ruled homicides and were a result of abuse. This number is the lowest annual total of homicides in 10 years, though two is the average number of homicides specifically due to abuse. Between 2003 and 2006, the total number of homicides decreased 78 percent, ranging from nine murders in 2003 to just two in 2006. Seven is the average number of child homicides due to abuse or other reasons occurring annually over the last decade.

According to data from the Texas Department of Family and Protective Services (TDFPS), eight children died in 2006 in Travis County due to abuse or neglect. It is important to note that this number is different from the number documented by the CFRT for two reasons: (1) TDFPS data reflects a fiscal year while the CFRT data reflects a calendar year, and (2) Because TDFPS determines

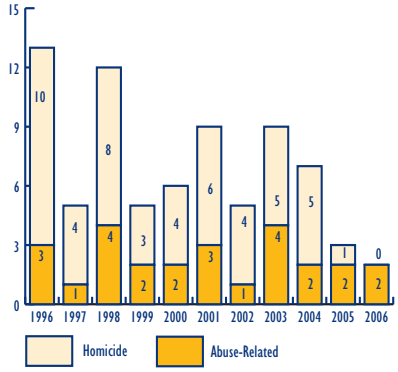
Child Deaths in Travis County Due to Asphyxia, Drowning, and Fire, by Year: 1996-2006



Accidental Child Deaths in Travis County, by Year: 1996-2006



Child Deaths in Travis County Due to Abuse or Homicide, by Year: 1996-2006



culpability for child deaths due to abuse and neglect, deaths that are the result of neglect are often identified as accidental deaths by the Medical Examiner's Office.

Child Suicide

In 2006, two child suicides were reported, which is the same number as reported in 2005. The average annual rate of suicide in Travis County has remained between one and two over the last ten years. Both suicides in 2006 were teenage boys.

2006 Travis County Child Fatality Review Team

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© April 2007. The Center for Child Protection, an accredited children's advocacy center, is the first stop for children in Travis County who are suspected victims of sexual abuse, serious physical abuse and for children who have witnessed a violent crime. The Center is a child-friendly, specially-equipped facility where children go for recorded forensic interviews, medical exams, counseling and crisis intervention during the investigation and prosecution of child abuse cases. In 2006, the Center served more than 1,400 children and 900 adults. All services are provided at no charge to children and families.

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