

## PREVENTION TIPS

**RISK:** Shaking most often results in response to a crying baby/toddler when a caregiver becomes frustrated or angry. While crying is the most common trigger for SBS, other activities such as toilet training and feeding, may also cause the person caring for the baby to become frustrated or angry.

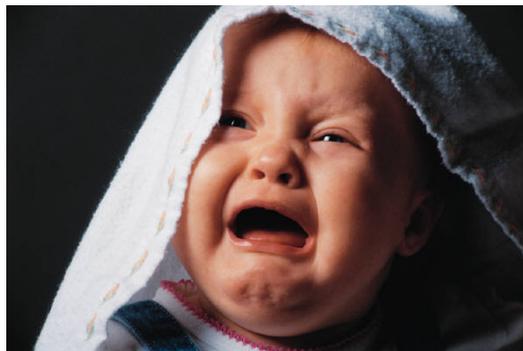
Factors that can increase a caregiver's risk for harming a child include:

- ◆ Being tired
- ◆ Limited anger management or coping skills
- ◆ Limited social support
- ◆ Low socioeconomic status
- ◆ Unrealistic expectations about child development and child-rearing
- ◆ Negative childhood experiences, including neglect or abuse
- ◆ Young parental age
- ◆ Unstable family environment
- ◆ Rigid attitudes and impulsivity
- ◆ Feelings of inadequacy
- ◆ Being a victim or witness to intimate partner violence

**REMEMBER:** Crying, including long bouts of inconsolable crying, is normal developmental behavior in infants. While infants usually cry to signal unmet needs, there are times when they will cry for no obvious reason.

### RECOMMENDATIONS to prevent Shaken Baby Syndrome:

1. Parent's and caregivers need to understand the frustration they may feel as a result of crying in normal infants. The National Center on Shaken Baby Syndrome refers to this as the period of **PURPLE** Crying.
  - Peak Pattern**– crying peaks around 2 months and then decreases
  - Unpredictable**– crying for long periods can come and go for no reason
  - Resistant to soothing**– the baby may keep crying for long periods
  - Pain-like Look on Face**
  - Long Bouts of Crying**– crying can go on for hours
  - Evening Crying**– baby cries more in the afternoon and evening
2. Try to soothe a crying baby using methods such as skin-to-skin contact or calming white noise.
3. If the infant will not stop crying and is fed and changed, it is okay to place him or her in a safe spot, such as a crib, and leave the baby to cry while you take a break. It is more important to stay calm than it is to soothe the baby. Allow 5-10 minutes for the frustration to pass, then go back and try to soothe the baby.
4. Parents and caregivers should be encouraged to ask for help when feeling overwhelmed.



**The problem is not the baby's crying; it's how caregivers respond to it. Picking up a baby and shaking, throwing, hitting, or hurting him/her is never an appropriate response.**

## RESOURCES

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- ◆ National Center on Shaken Baby Syndrome  
<http://www.dontshake.org/>
- ◆ The Shaken Baby Alliance  
<http://www.shakenbaby.com/>
- ◆ Shaken Baby Syndrome  
<http://www.aboutshakenbaby.com/>
- ◆ Centers for Disease Control and Prevention  
<http://www.cdc.gov/concussion/HeadsUp/sbs.html>  
<http://www.cdc.gov/ncipc/dvp/cmp/CMP-resources.htm>
- ◆ Shaken Baby Prevention  
<http://www.sbsprevention.com/>
- ◆ Virginia Department of Social Services  
[http://www.dss.virginia.gov/family/cps/shaken\\_baby.cgi](http://www.dss.virginia.gov/family/cps/shaken_baby.cgi)

## REFERENCES

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1. Centers for Disease Control and Prevention. Heads Up: Prevent Shaken Baby Syndrome. <http://www.cdc.gov/concussion/HeadsUp/sbs.html>
2. Centers for Disease Control and Prevention. Shaken Baby Syndrome Tips. [http://www.cdc.gov/healthmarketing/entertainment\\_education/tips/shaken\\_baby.htm](http://www.cdc.gov/healthmarketing/entertainment_education/tips/shaken_baby.htm)
3. The Shaken Baby Alliance. Shaken Baby Facts. <http://www.shakenbaby.com/>
4. Virginia Department of Health. Virginia Violent Death Reporting System. <http://www.vdh.state.va.us/medExam/NVDRS.htm>
5. Virginia Department of Social Services. Shaken Baby Syndrome. [http://www.dss.virginia.gov/family/cps/shaken\\_baby.cgi](http://www.dss.virginia.gov/family/cps/shaken_baby.cgi)