

Child Find Bibliography

Child Maltreatment

U.S. Department of Health & Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. (2018). Child Maltreatment 2016.

Child Maltreatment 2016 is the 27th edition of an annual report on child maltreatment. Data for the report comes from the National Child Abuse and Neglect Data System (NCANDS). NCANDS includes data from the 50 states, the District of Columbia, and the Commonwealth of Puerto Rico. Retrieved from:

<https://www.acf.hhs.gov/sites/default/files/cb/cm2016.pdf>

Early Identification

Barger, B., Rice, C., Simmons, C. A., & Wolf, R. (2018). A Systematic Review of Part C Early Identification Studies. *Topics in Early Childhood Special Education*. 2018 May; 38(1): 4-16. Published online 2016 Dec 20. DOI: <http://journals.sagepub.com/doi/abs/10.1177/0271121416678664?journalCode=teca>

The authors of this paper conducted a literature review on the early identification steps that lead young children who are at-risk of developmental delay to connect with Part C services. The authors found limited literature and describe opportunities for developing systems to better track and identify young children in need of Early Intervention services.

Barger, B., Rice, C., Wolf, R., & Roach, A. (2018). Better together: Developmental screening and monitoring best identify children who need early intervention. *Disability and Health Journal*. 11(3):420-426

In this article, the authors describe research designed to investigate the relationship between developmental monitoring (DM) and developmental screening (DS) in receipt of early intervention services. The authors analyzed data from the 2007/2008 and 2011/2012 National Survey of Children's Health and found that children who received both DM and DS were more likely to receive early intervention when compare to children receiving only DM, only DS, or neither DM nor DS. Retrieved from: <https://stacks.cdc.gov/view/cdc/56163>

Bowers, K., Folger, A. T., Zhang, N., et al. (2018). Participation in Home Visitation is Associated with Higher Utilization of Early Intervention. *Maternal and Child Health Journal* 22: 494. DOI: <https://doi.org/10.1007/s10995-017-2415-8>

This article describes a study designed to determine whether participation in a home visiting program increases or expedites use of early intervention services for infants and toddlers with suspected developmental delay. The authors found that participants in a home visiting program were more likely to access early intervention services. However, the time of onset of early intervention services was not impacted by home visiting.

Centers for Disease Control and Prevention (CDC). *Learn the Signs. Act Early.* (website)

This website provides several resources to help parents monitor their child's development from birth through age 5 with the goal of promoting early identification of developmental delays and disabilities, including autism. The site also includes resources for healthcare providers and early childhood educators. Website: <http://www.cdc.gov/ActEarly>

Centers for Disease Control and Prevention (CDC). *Act Early Ambassadors* (website)

The Act Early Ambassadors program is designed to expand the reach of the "Learn the Signs. Act Early." program. The Act Early Ambassadors program selects professionals with medical, child development, developmental disability, special education, or early intervention expertise to promote the "Learn the Signs. Act Early." program in their state. Website: <https://www.cdc.gov/ncbddd/actearly/ambassadors-list.html>

Opioid exposure

Lloyd, M. H., Akin, B. A., Brook, J., & Chasnoff, I. J. (2018). The Policy to Practice Gap: Factors Associated with Practitioner Knowledge of CAPTA 2010 Mandates for Identifying and Intervening in Cases of Prenatal Alcohol and Drug Exposure. *Families in Society: The Journal of Contemporary Social Services* (published online, July 2018). DOI: <https://doi.org/10.1177/1044389418785326>

This article describes the results from a statewide survey of social service professionals. The survey collected data regarding the professionals' knowledge of the Child Abuse Prevention and Treatment Act Reauthorization of 2010 (CAPTA), clinically based markers of prenatal substance exposure (PSE), and appropriate child protection responses following a PSE referral.

Lynch, S., Sherman, L., Snyder, S. M., & Mattson, M. (2018). Trends in infants reported to child welfare with neonatal abstinence syndrome (NAS). *Children and Youth Services Review*, 86, 135-141. DOI: <https://doi.org/10.1016/j.childyouth.2018.01.035>

In this article, the authors analyzed data from the National Child Abuse and Neglect Data System (NCANDS) to examine trends in the percentage of infants reported to the child welfare system with neonatal abstinence syndrome (NAS) from 2004 to 2014. The study sought to determine whether the trend is distinct from the trend in the percentage of infants reported with fetal alcohol spectrum disorder (FASD). Retrieved from: [10.1016/j.childyouth.2018.01.035](https://doi.org/10.1016/j.childyouth.2018.01.035)

Maguire, D. J., et al. (2016). Long-term outcomes of infants with neonatal abstinence syndrome. *Neonatal Network*, Vol. 35, No., 5 277-286. DOI: <https://doi.org/10.1891/0730-0832.35.5.277>

This article provides information that may be helpful to parents of infants with neonatal abstinence syndrome (NAS) who are in the NICU. The article describes the potential long-term consequences of prenatal exposure to methadone, including problems with vision, motor skills, behavior/cognition, sleeping, and ear infections. Awareness of these issues may help parents and pediatricians more closely monitor these children to optimize their outcomes.

Underserved Populations

Juárez, A. P., et al. (2018). Early Identification of ASD Through Telemedicine: Potential Value for Underserved Populations. *Journal of Autism and Developmental Disorders* (2018) 48:2601–2610. DOI: <https://doi.org/10.1007/s10803-018-3524-y>

This article describes an evaluation of a telemedicine procedure for identifying Autism Spectrum Disorder in young children. The telemedicine procedure was compared to blinded gold-standard evaluations. The acceptability and feasibility of using the telemedicine procedure in a rural environment was also investigated. The authors report that their findings “support preliminary feasibility, accuracy, and clinical utility of telemedicine-based assessment of ASD for young children.”

Magnusson, D. M., Minkovitz, C. S., Kuhlthau, K. A., Caballero, T. M., & Mistry, K. B. (2017). Beliefs Regarding Development and Early Intervention Among Low-Income African American and Hispanic Mothers. *Pediatrics*. 2017;140(5):e20172059

This paper describes a study on the influence of health beliefs in maternal decisions regarding help-seeking for children with development delay. The paper explores differences in these decisions between African American and Hispanic mothers. Data were collected from 22 mothers via open-ended, semistructured interviews. Retrieved from: <http://pediatrics.aappublications.org/content/pediatrics/early/2017/10/12/peds.2017-2059.full.pdf>

Zika Virus

Bailey Jr, D. B. & Ventura, L. O. (2018). The Likely Impact of Congenital Zika Syndrome on Families: Considerations for Family Supports and Services. *Pediatrics* 2018;141;S180 DOI: 10.1542/peds.2017-2038G

In this article, the authors discuss the potential consequences of congenital Zika syndrome on families of affected children. While the challenges faced by these families are similar to those faced by families of children with other disabilities, unique family implications are described, such as a limited professional knowledge about the course of the disease or treatment options. Suggestions are included for treatment including using a family-centered approach and providing comprehensible information. Retrieved from:

http://pediatrics.aappublications.org/content/141/Supplement_2/S180

Centers for Disease Control and Prevention (CDC). Microcephaly & Other Birth Defects (website)

This website provides information on Zika, microcephaly, and congenital Zika syndrome. The site includes several downloadable flyers with information for parents on these subjects. Website:

https://www.cdc.gov/zika/healtheffects/birth_defects.html

Delaney, A., Mai, C., Smoots, A., et al. (2018). Population-Based Surveillance of Birth Defects Potentially Related to Zika Virus Infection — 15 States and U.S. Territories, 2016. *Morbidity and Mortality Weekly Report* 2018;67:91–96

The CDC analyzed 2016 data from 15 U.S. jurisdictions conducting population-based surveillance for birth defects possibly due to Zika infection. The authors found a significant increase in the number of birth defects strongly linked to Zika virus infection (from 2.0 cases per 1,000 live births in the first half of 2016 to 2.4 cases in the second half of 2016). The jurisdictions were divided into three groups for analysis: 1) those with confirmed local Zika transmission in 2016, 2) those with one or more confirmed travel-associated Zika virus infections reported to CDC per 1,000 residents ("higher" Zika prevalence), and 3) those with less than one confirmed travel-associated Zika virus infection per 1,000 residents ("lower" or no travel-associated Zika prevalence). Retrieved from:

<http://dx.doi.org/10.15585/mmwr.mm6703a2>

Oduyebo, T., Polen, K. D., Walke, H. T., et al. Update: Interim Guidance for Health Care Providers Caring for Pregnant Women with Possible Zika Virus Exposure — United States (Including U.S. Territories), July 2017. *Morbidity and Mortality Weekly Report* 2017;66:781–793

This report from the Centers for Disease Control and Prevention (CDC) details the CDC's current guidance for U.S. health care providers regarding the testing and screening of pregnant women with possible Zika virus infection.

Retrieved from: <http://dx.doi.org/10.15585/mmwr.mm6629e1>

Rice, M. E., Galang, R. R., Roth, N. M., et al. Vital Signs: Zika-Associated Birth Defects and Neurodevelopmental Abnormalities Possibly Associated with Congenital Zika Virus Infection — U.S. Territories and Freely Associated States, 2018. *Morbidity and Mortality Weekly Report*. ePub: 7 August 2018

This study analyzed data from the U.S. Zika Pregnancy and Infant Registry (USZPIR) to learn about infant/child outcomes among pregnancies with confirmed or possible Zika virus infection. The authors found that 1 in 7 evaluated infants/children had a Zika-associated birth defect, a neurodevelopmental abnormality possibly associated with congenital Zika virus infection, or both. Retrieved from: <http://dx.doi.org/10.15585/mmwr.mm6731e1>

Russell K, Oliver SE, Lewis L, et al. Update: Interim Guidance for the Evaluation and Management of Infants with Possible Congenital Zika Virus Infection — United States, August 2016. *Morbidity and Mortality Weekly Report* 2016;65:870–878

This report describes the CDC's current guidance for U.S. health care providers regarding the clinical evaluation, laboratory testing, management, and follow-up of infants with possible congenital Zika virus exposure. Retrieved from:

<http://dx.doi.org/10.15585/mmwr.mm6533e2>

Wheller, A. C. (2018). Development of Infants With Congenital Zika Syndrome: What Do We Know and What Can We Expect? *Pediatrics* February 2018;141;(Supplement 2) S154-S160; DOI: 10.1542/peds.2017-2038D

This article presents a review of current literature on the impact of Congenital Zika Syndrome on infants. The author provides some predictions regarding long-term needs and outcomes for these children and their families. Retrieved from: http://pediatrics.aappublications.org/content/141/Supplement_2/S154

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